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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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.

OMB No 1545-0047

2018

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

COLUMBUS JEWISH FOUNDATION

Doing business as

Number and street (or P O box if mail is not delivered to street address)Room/suite

1175 COLLEGE AVE

City or town, state or province, country, and ZIP or foreign postal code

COLUMBUS, OH 43209

F Name and address of principal officer

JOEL MARCOVITCH

1175 COLLEGE AVE

COLUMBUS, OH 43209

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number

31-1384772

E Telephone number

(614) 338-2365

G Gross receipts \$ 49,753,314

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.JEWISHCOLUMBUS.ORG

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1955

M State of legal domicile OH

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

THE FOUNDATION DEVELOPS AND MANAGES ENDOWMENTS, PLANNED GIVING, AND DONOR-ADVISED PHILANTHROPIC FUNDS. OUR GRANTS ARE PROVIDED FOR INNOVATIVE PROGRAMS, COMMUNITY DEVELOPMENT, EMERGENCIES FACING THE JEWISH WORLD, AND SECURING COMMUNITY RESOURCES FOR GENERATIONS TO COME

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶125,640

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Prior Year

8,976,130

244,214

4,221,722

141,793

13,583,859

7,879,407

0

736,098

0

323,719

8,939,224

4,644,635

Beginning of Current Year

131,504,313

26,586,790

104,917,523

Current Year

7,395,248

245,878

5,030,715

68,993

12,740,834

8,113,575

0

701,204

0

381,140

9,195,919

3,544,915

End of Year

133,001,259

25,623,173

107,378,086

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

2020-03-07

Date

TAMRA FITZPATRICK, CHIEF FINANCIAL OFFICER

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN P00368385

Firm's name ▶ RSM US LLP

Firm's EIN ▶ 42-0714325

Firm's address ▶ 1001 LAKESIDE AVENUE EAST SUITE 200

Phone no. (216) 523-1900

CLEVELAND, OH 441141152

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

THE COLUMBUS JEWISH FOUNDATION DEVELOPS SUSTAINABLE FINANCIAL RESOURCES TO FULFILL ITS MISSION TO ENSURE CONTINUITY OF JEWISH LIFE AND TO MEET CHANGING NEEDS LOCALLY, IN ISRAEL AND IN OUR WORLDWIDE COMMUNITY THE FOUNDATION DEVELOPS AND MANAGES ENDOWMENTS, PLANNED GIVING, AND DONOR-ADVISED PHILANTHROPIC FUNDS OUR GRANTS ARE PROVIDED FOR INNOVATIVE PROGRAMS, COMMUNITY DEVELOPMENT, EMERGENCIES FACING THE JEWISH WORLD, AND SECURING COMMUNITY RESOURCES FOR GENERATIONS TO COME

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code)	(Expenses \$ 8,270,018	including grants of \$ 8,113,575)	(Revenue \$ 245,878)
See Additional Data				

4b	(Code)	(Expenses \$	including grants of \$	) (Revenue \$)
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4c	(Code)	(Expenses \$	including grants of \$	) (Revenue \$)
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4d	Other program services (Describe in Schedule O)	(Expenses \$	including grants of \$	) (Revenue \$)
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4e	Total program service expenses ▶	8,270,018
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
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	No
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	No
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	No
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 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9 Yes	
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 Yes	
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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
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	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
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	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
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	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No

Part IV Checklist of Required Schedules (continued)

		Yes	No	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	35	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		2a	8			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a	Yes	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b	Yes	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a		No
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b		
7 Organizations that may receive deductible contributions under section 170(c).						
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c	Yes	
d If "Yes," indicate the number of Forms 8282 filed during the year				7d		1
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
8 Sponsoring organizations maintaining donor advised funds.						
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?				8		No
9a Did the sponsoring organization make any taxable distributions under section 4966?				9a		No
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		No
10 Section 501(c)(7) organizations. Enter						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
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				11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				11b		
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				12b		
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				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				13b		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N				15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O				16		No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 ☒

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 16		
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 16		
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		No
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		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6		No
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	No
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13 Did the organization have a written whistleblower policy?	13	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	Yes
b Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed **OH**

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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
TAMARA FITZPATRICK CFO 1175 COLLEGE AVE COLUMBUS, OH 43209 (614) 338-2365

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JIM BOWMAN PRESIDENT	5 00 4 00	X		X				0	0	0
(2) HARLAN ROBINS VICE PRESIDENT, PRESIDENT ELECT	2 00 2 00	X		X				0	0	0
(3) WILLIAM BYERS TREASURER	2 00 2 00	X		X				0	0	0
(4) MICHAEL SCHLONSKY SECRETARY	2 00 2 00	X		X				0	0	0
(5) JEFF MEYER IMMEDIATE PAST PRESIDENT	2 00 2 00	X		X				0	0	0
(6) JOSHUA BARKAN BOARD MEMBER	2 00 2 00	X						0	0	0
(7) DR MICHAEL HALLET BOARD MEMBER	2 00 2 00	X						0	0	0
(8) RANDY HANSELL BOARD MEMBER	2 00 2 00	X						0	0	0
(9) STEVE HEISER BOARD MEMBER	2 00 2 00	X						0	0	0
(10) IRA KANE BOARD MEMBER (END 7/18)	2 00 2 00	X						0	0	0
(11) INNA KINNEY BOARD MEMBER	2 00 2 00	X						0	0	0
(12) STACY LEVIN BOARD MEMBER	2 00 2 00	X						0	0	0
(13) JODY SCHEIMAN BOARD MEMBER	2 00 2 00	X						0	0	0
(14) LEE SMITH BOARD MEMBER	2 00 2 00	X						0	0	0
(15) NEVADA SMITH BOARD MEMBER	2 00 2 00	X						0	0	0
(16) AUDREY TUCKERMAN BOARD MEMBER	2 00 4 00	X						0	0	0
(17) DR PHILIP WEINERMAN BOARD MEMBER	2 00 2 00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JACKIE JACOBS CHIEF EXECUTIVE OFFICER (TO 8/31/18)	20 00 0 00			X				155,426	0	31,953
(19) TAMRA FITZPATRICK CHIEF FINANCIAL OFFICER	11 20 28 80			X				163,371	0	34,586
(20) JOEL MARCOVITCH CHIEF EXECUTIVE OFFICER (FROM 8/20/18)	11 20 28 80			X				0	114,202	17,083
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								318,797	114,202	83,622

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 **▶ 2**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 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? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶ 0**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a				
	b Membership dues . . .	1b				
	c Fundraising events . . .	1c				
	d Related organizations	1d	30,000			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	7,365,248			
	g Noncash contributions included in lines 1a - 1f \$ <u>2,776,523</u>					
	h Total. Add lines 1a-1f ▶		7,395,248			
Program Service Revenue			Business Code			
	2a RECORD KEEPING FEES		900099	245,878	245,878	
	b _____					
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶		245,878			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		3,977,340			3,977,340
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
			(i) Real	(ii) Personal		
	6a Gross rents		59,563			
	b Less rental expenses		176,074			
	c Rental income or (loss)		-116,511			
	d Net rental income or (loss) ▶		-116,511			-116,511
			(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory		37,647,393	242,388		
	b Less cost or other basis and sales expenses		36,536,518	299,888		
	c Gain or (loss)		1,110,875	-57,500		
	d Net gain or (loss) ▶		1,053,375			1,053,375
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a					
	b Less direct expenses b					
	c Net income or (loss) from fundraising events ▶					
	9a Gross income from gaming activities See Part IV, line 19 a					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities ▶					
	10a Gross sales of inventory, less returns and allowances a					
	b Less cost of goods sold b					
	c Net income or (loss) from sales of inventory ▶					
Miscellaneous Revenue		Business Code				
11a PARTNERSHIP INVESTMENTS		900004	179,475	4,116	175,359	
b FEDERATION REIMBURSEMENT		900099	5,362		5,362	
c _____						
d All other revenue			667		667	
e Total. Add lines 11a-11d ▶			185,504			
12 Total revenue. See Instructions ▶			12,740,834	245,878	4,116	5,095,592

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 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 and domestic governments. See Part IV, line 21.	8,113,575	8,113,575		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	385,335		319,828	65,507
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.	206,658		169,219	37,439
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	15,939		15,939	
9 Other employee benefits.	56,276		46,709	9,567
10 Payroll taxes.	36,996		30,707	6,289
11 Fees for services (non-employees):				
a Management.				
b Legal.	11,115		11,115	
c Accounting.	23,340		23,340	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	18,044		18,044	
12 Advertising and promotion.	12,575		5,737	6,838
13 Office expenses.	21,540		21,540	
14 Information technology.	41,938		41,938	
15 Royalties.				
16 Occupancy.	3,041		3,041	
17 Travel.				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	7,599		7,599	
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	18,239		18,239	
23 Insurance.	11,046		11,046	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a LIFE INSURANCE	156,443	156,443		
b TRANSITION COSTS	25,319		25,319	
c BUILDING SERVICES/MAINT	15,999		15,999	
d EQUIPMENT RENTAL/MAINT	8,994		8,994	
e All other expenses	5,908		5,908	
25 Total functional expenses. Add lines 1 through 24e.	9,195,919	8,270,018	800,261	125,640
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	1,028,408	1	606,283
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	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 employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	496,563	7	429,338
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	62,641	9	78,189
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	4,288,918		
	b	Less: accumulated depreciation	1,396,633		
			3,344,667	10c	2,892,285
	11	Investments—publicly traded securities	112,330,782	11	114,244,529
	12	Investments—other securities. See Part IV, line 11	9,598,558	12	9,964,156
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
15	Other assets. See Part IV, line 11	4,642,694	15	4,786,479	
16	Total assets. Add lines 1 through 15 (must equal line 34)	131,504,313	16	133,001,259	
Liabilities	17	Accounts payable and accrued expenses	75,005	17	95,065
	18	Grants payable	240,533	18	468,601
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	26,271,252	21	25,059,507
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26	Total liabilities. Add lines 17 through 25	26,586,790	26	25,623,173
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☐ and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☒ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds	0	30	0
	31	Paid-in or capital surplus, or land, building or equipment fund	0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds	104,917,523	32	107,378,086
33	Total net assets or fund balances	104,917,523	33	107,378,086	
34	Total liabilities and net assets/fund balances	131,504,313	34	133,001,259	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,740,834
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,195,919
3	Revenue less expenses Subtract line 2 from line 1	3	3,544,915
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	104,917,523
5	Net unrealized gains (losses) on investments	5	-1,369,209
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	284,857
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	107,378,086

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☒ Other <u>INCOME TAX BASIS</u> If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a	No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	Yes
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes
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 Act and OMB Circular A-133?	3a	No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Additional Data

Software ID:
Software Version:
EIN: 31-1384772
Name: COLUMBUS JEWISH FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

THE FOUNDATION DEVELOPS AND MANAGES ENDOWMENTS, PLANNED GIVING, AND DONOR-ADVISED PHILANTHROPIC FUNDS. OUR GRANTS ARE PROVIDED FOR INNOVATIVE PROGRAMS, COMMUNITY DEVELOPMENT, EMERGENCIES FACING THE JEWISH WORLD, AND SECURING COMMUNITY RESOURCES FOR GENERATIONS TO COME. PROGRAM SERVICE REVENUE OF \$245,878 REPRESENTS CUSTODIAL RECORD KEEPING FEES FROM FUNDS NOT OWNED BY THE FOUNDATION. ADDITIONALLY, THE FOUNDATION WAS SUPPORTED BY CONTRIBUTIONS IN THE AMOUNT OF \$7,395,248 THAT ARE NOT INCLUDED IN PROGRAM SERVICE REVENUE.

SCHEDULE A

(Form 990 or 990EZ)

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 the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

COLUMBUS JEWISH FOUNDATION

Employer identification number

31-1384772

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

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

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

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

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university
- 10

☐

An organization that normally receives (1) more than 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

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	3,814,166	7,146,062	7,826,577	8,976,130	7,395,248	35,158,183
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	3,814,166	7,146,062	7,826,577	8,976,130	7,395,248	35,158,183
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,575,884
6	Public support. Subtract line 5 from line 4						31,582,299

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	3,814,166	7,146,062	7,826,577	8,976,130	7,395,248	35,158,183
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,886,879	2,870,974	1,157,551	3,081,389	4,036,903	15,033,696
9	Net income from unrelated business activities, whether or not the business is regularly carried on	1,184	35,786	1,572	2,291	2,314	43,147
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)		188,440		41,651	6,029	236,120
11	Total support. Add lines 7 through 10						50,471,146
12	Gross receipts from related activities, etc (see instructions)					12	1,120,954
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14 62.570 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15 61.640 %
16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☒		
b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ☐		
b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	4b	
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)? <i>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.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	5a	
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?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
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? <i>If "Yes," provide detail in Part VI.</i>	6	
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	REFUND FROM PENSION PLAN - 2015 AMOUNT \$ 188,440 FEDERATION REIMBURSEMENT - 2017 AMOUNT \$ 39,334 2018 AMOUNT \$ 5,362 OTHER INCOME - 2017 AMOUNT \$ 2,317 2018 AMOUNT \$ 667

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 the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
COLUMBUS JEWISH FOUNDATION

Employer identification number
31-1384772

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	708	
2 Aggregate value of contributions to (during year)	5,067,895	
3 Aggregate value of grants from (during year)	5,834,617	
4 Aggregate value at end of year	28,406,751	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☒ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation 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 easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a☐ Public exhibition

b☐ Scholarly research

c☐ Preservation for future generations

d☐ Loan or exchange programs

e☐ Other

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?

☐ Yes☐ No

Part IV

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.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

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?

☒ Yes☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☒

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back	
1a	Beginning of year balance	63,060,716	59,645,965	52,398,227	53,763,123	54,423,628
b	Contributions	3,326,618	2,434,975	4,150,636	1,189,110	1,300,388
c	Net investment earnings, gains, and losses	2,023,315	3,750,192	6,196,846	-54,761	548,910
d	Grants or scholarships	2,810,403	2,242,930	2,625,019	2,060,683	2,106,581
e	Other expenditures for facilities and programs					
f	Administrative expenses	560,948	527,486	474,725	438,562	403,222
g	End of year balance	65,039,298	63,060,716	59,645,965	52,398,227	53,763,123

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

14 730 %

b

Permanent endowment

80 010 %

c

Temporarily restricted endowment

5 260 %

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

	Yes	No
(i) unrelated organizations		No
(ii) related organizations		No
b	If "Yes" on 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.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	373,600		373,600
b	Buildings	3,748,287	1,229,602	2,518,685
c	Leasehold improvements			
d	Equipment	167,031	167,031	0
e	Other			
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			2,892,285

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) ALTERNATIVE INVESTMENT FUNDS	6,172,796	F
(B) PARTNERSHIP	3,791,360	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	9,964,156	

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)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

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)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		

2. Liability for uncertain tax positions In Part XIII, provide the text of 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 ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements	1	11,832,554
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-1,369,211
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	460,931
e	Add lines 2a through 2d	2e	-908,280
3	Subtract line 2e from line 1	3	12,740,834
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	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	12,740,834

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

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

1	Total expenses and losses per audited financial statements	1	9,371,991
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	176,072
e	Add lines 2a through 2d	2e	176,072
3	Subtract line 2e from line 1	3	9,195,919
4	Amounts included on Form 990, Part IX, line 25, 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	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	9,195,919

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 31-1384772
Name: COLUMBUS JEWISH FOUNDATION

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	THE COLUMBUS JEWISH FOUNDATION HOLDS AND INVESTS CUSTODIAL FUNDS FOR JEWISH AGENCIES

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	THE COLUMBUS JEWISH FOUNDATION IS A DONOR-CENTERED CHARITABLE ENTERPRISE DEDICATED TO ACCUMULATING ENDURING ASSETS TO SUPPORT THE STABILITY AND CONTINUITY OF JEWISH LIFE IN COLUMBUS AND ELSEWHERE. ENDOWED RESOURCES ARE FOR USE IN SUPPORTING SPECIAL, EMERGENCY AND FUTURE NEEDS.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES NETTED AGAINST REVENUE 176,074 CSV CHANGE OF LIFE INSURANCE 284,857

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES NETTED AGAINST REVENUE 176,072

OMB No 1545-0047

Open to Public Inspection

31-1384772

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	0	0	INVESTMENTS		602,543
3a Sub-total	0	0			602,543
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	0			602,543

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to 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.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

Part III	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
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Part III can be duplicated if additional space is needed.

[illegible]

Part IV Foreign Forms

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

Part V **Supplemental Information**

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

ReturnReference	Explanation

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Department of the
Treasury
Internal Revenue Service

Name of the organization
COLUMBUS JEWISH FOUNDATION

**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.

OMB No 1545-0047

2018

Open to Public
Inspection

Employer identification number
31-1384772

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of 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
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 126

3 Enter total number of other organizations listed in the line 1 table 2

Part III **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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	COMMUNITY GRANTS - STEWARDSHIP IS A KEY FUNCTION OF THE GRANTS COMMITTEES AND BOARD GRANT REQUESTS ARE SCREENED BY PROFESSIONAL STAFF AND THEN RECEIVE CAREFUL LAY LEADER SCRUTINY AND REVIEW AT VARIOUS LEVELS PRIOR TO FORMAL BOARD ACTION POST-APPROVAL PROCEDURES INCLUDE BUDGET MONITORING, STATUS REPORTS AND PROGRAM EVALUATION REVIEWS BY GRANTS DIRECTOR PRIOR TO RELEASE OF FUNDS VOLUNTEER ENGAGEMENT TAKES PLACE THROUGHOUT ALL PHASES OF THE GRANTS CYCLE DONOR ADVISED FUNDS - GIFT RECOMMENDATIONS ARE SCRUPULOUSLY REVIEWED BY FOUNDATION PROFESSIONAL STAFF AND LAY LEADERSHIP FOR COMPLIANCE ISSUES, INCLUDING BUT NOT LIMITED TO EXEMPT STATUS OF BENEFICIARIES, QUID PRO QUO AND SELF-INUREMENT ISSUES, COMPLIANCE WITH PPA 2006/H R 4, ETC REVIEW TAKES PLACE AT STAFF LEVEL AS WELL AS BY LAY-VOLUNTEER REVIEW COMMITTEE FORMAL AUTHORIZATION OF DISBURSEMENTS OCCURS AT BOARD MEETINGS ALL DAF DONORS RECEIVE WRITTEN GUIDELINES (ALSO INCORPORATED IN DAF FUND AGREEMENTS) AND "DO'S AND DON'TS" PROTOCOLS, AS WELL AS PERIODIC UPDATES AND REMINDERS IN BOTH OF THE ABOVE, BOARD IS FULLY ENGAGED IN FOUNDATION GRANTS OPERATIONS TO GUARD AGAINST REAL AND PERCEIVED ABUSES AND TO BUILD DONOR AND PUBLIC TRUST THROUGH FORMALIZED POLICIES, PROCEDURES AND PRACTICES CONSISTENT WITH JEWISH ETHICAL CONDUCT AND GOOD GOVERNANCE

Additional Data

Software ID:
Software Version:
EIN: 31-1384772
Name: COLUMBUS JEWISH FOUNDATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
A KID AGAIN 777-G DEARBORN PARK LANE WORTHINGTON, OH 43085	31-1440073	501(C)(3)	100,000				CHILDREN'S & YOUTH SERVICES, ANNUAL HOLIDAY EVENT
ALVIS HOUSE 2100 STELLA CT COLUMBUS, OH 432151011	31-0743167	501(C)(3)	5,100				BEHAVIORAL HEALTH AND SUBSTANCE ABUSE TREATMENT SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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 FRIENDS INTERDISCIPLINARY CENTER (AFIDC) 142 W 57TH STREET 11TH FLOOR NEW YORK, NY 10019	31-1577589	501(C)(3)	11,000				ANNUAL SCHOLARSHIPS, HIGHER EDUCATION
AMERICAN FRIENDS MAGEN DAVID ADOM NATIONAL MAIL PROCESSING CENTER PO BOX 96402 WASHINGTON, DC 200906402	13-1790719	501(C)(3)	106,300				DISASTER RELIEF AND BLOOD SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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 FRIENDS OF HERZOG HOSPITAL INC 57 W 57TH STREET 412 NEW YORK, NY 10019	13-5655183	501(C)(3)	93,750				HEALTH, MEDICAL EQUIPMENT
AMERICAN FRIENDS OF MA'AGALIM INC 4101 PINE TREE DRIVE SUITE 509 MIAMI BEACH, FL 33140	27-3315621	501(C)(3)	5,050				MOTIVATE AND ENCOURAGE AT-RISK YOUTH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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 FRIENDS OF MATAN INC PO BOX 40 POMONA, NY 109700040	13-3639482	501(C)(3)	50,000				EDUCATIONAL PROGRAMMING FOR JEWISH LEADERSHIP WOMEN
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE INC 220 E 42ND ST SUITE 400 NEW YORK, NY 10017	13-1656634	501(C)(3)	25,510				EMERGENCY HUMANITARIAN SUPPORT AND DISASTER RELIEF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
ANDREWS HOUSE INC 39 WINTER ST DELAWARE, OH 430158266	31-1424363	501(C)(3)	5,000				KIDS ON THE BLOCK OF CENTRAL OHIO
ANSHE SHOLOM B'NAI ISRAEL CONGREGATION 540 W MELROSE ST CHICAGO, IL 60657	36-2284422	501(C)(3)	6,800				SYNAGOGUE, WORSHIP & EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
ARTHUR G JAMES CANCER HOSPITAL 660 ACKERMAN ROAD PO BOX 183112 COLUMBUS, OH 43218	31-1145986	501(C)(3)	205,844				CELEBRATION OF LIFE, PELOTONIA, OSUCCC JAMES COMM PARTNERS
ASPEN ART MUSEUM 637 E HYMAN AVEVUE ASPEN, CO 81611	84-0746671	501(C)(3)	6,980				EDUCATION & CULTURAL CENTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
ASPEN JEWISH COMMUNITY CENTER 435 W MAIN ST ASPEN, CO 81611	22-3787221	501(C)(3)	10,000				SYNAGOGUE, WORSHIP & EDUCATION
ASPEN JEWISH SYNAGOGUE 77 MEADOWWOOD DR ASPEN, CO 81611	84-0723135	501(C)(3)	7,100				SYNAGOGUE, WORSHIP & EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
BALLETMET 322 MOUNT VERNON AVENUE COLUMBUS, OH 43215	31-0858562	501(C)(3)	23,400				DANCE PERFORMANCES, TRAINING, EDUCATION, OUTREACH
BATED BREATH THEATRE COMPANY 233 PEARL STREET BOX 21 HARTFORD, CT 06103	26-2370741	501(C)(3)	64,000				ARTS, CULTURE & TRAINING PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
BETH ABRAHAM SYNAGOGUE 305 SUGAR CAMP CIRCLE DAYTON, OH 45409	31-0550821	501(C)(3)	10,980				SYNAGOGUE, WORSHIP & EDUCATION
BETH JACOB CONGREGATION 1223 COLLEGE AVENUE COLUMBUS, OH 43209	31-6401183	501(C)(3)	67,646				SYNAGOGUE, WORSHIP & EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
BEXLEY COMMUNITY FOUNDATION 552 S DREXEL AVENUE COLUMBUS, OH 43209	27-1405357	501(C)(3)	39,025				BEXLEY PUBLIC LIBRARY COMMUNITY AUTHOR SERIES FUND, JEFFREY MANSION FUND
BEXLEY EDUCATION FOUNDATION 348 S CASSINGHAM ROAD BEXLEY, OH 43209	31-1463283	501(C)(3)	14,456				EDUCATOR OF THE YEAR AWARD, BRAVO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
BIG BROTHERSBIG SISTERS OF CENTRAL OHIO 1855 E DUBLIN-GRANVILLE ROAD COLUMBUS, OH 43229	31-4379429	501(C)(3)	27,150				SCHRINER LEGACY FUND, NURTURE CHILDREN & STRENGTHEN COMMUNITIES
CANCER ALLIANCE OF HELP & HOPE PO BOX 3292 PALM BEACH, FL 33480	90-0101236	501(C)(3)	6,000				BASIC NEEDS ASSISTANCE FOR CANCER PATIENTS AND FAMILIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
CANCER SUPPORT COMMUNITY 1200 OLD HENDERSON RD COLUMBUS, OH 43220	20-1388385	501(C)(3)	9,333				BASIC NEEDS ASSISTANCE FOR CANCER PATIENTS AND FAMILIES
CENTER FOR BALANCED LIVING 8001 RAVINES EDGE CT SUITE 201 COLUMBUS, OH 43235	31-1720581	501(C)(3)	5,000				TREATMENT, EDUCATION, PREVENTION AND RESEARCH IN THE AREA OF EATING DISORDERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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 HEALTHY FAMILIES 500 S FRONT STREET 930 COLUMBUS, OH 43215	20-8701526	501(C)(3)	7,100				PARENTING TEENS AND THEIR CHILDREN IN OPPORTUNITIES TO ACQUIRE SELF-SUFFICIENCY
CENTRAL OHIO TECHNICAL COLLEGE 1179 UNIVERSITY DR NEWARK, OH 43055	31-0802020	501(C)(3)	52,500				HIGHER EDUCATION, CAMPUS RENOVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
CHABAD HOUSE NORTHERN PALM BEACH ISLAND 361 S COUNTY ROAD D PALM BEACH, FL 33480	26-2697228	501(C)(3)	36,000				JEWISH EDUCATION & OUTREACH
CHABAD OF RIVER NORTH & FULTON MARKET 353 N DESPLAINES SUITE 610 CHICAGO, IL 60661	82-4426647	501(C)(3)	5,500				JEWISH EDUCATION & OUTREACH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
CHABAD ON CAMPUS AT OSU 207 E 15TH AVENUE COLUMBUS, OH 43201	81-2505414	501(C)(3)	22,510				JEWISH EDUCATION & OUTREACH
CLEVELAND COMMUNITY MIKVAH INC PO BOX 21246 CLEVELAND, OH 44121	81-2733203	501(C)(3)	10,000				JEWISH EDUCATION & OUTREACH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
COLUMBUS ACADEMY 4300 CHERRY BOTTOM ROAD GAHANNA, OH 43230	31-4379445	501(C)(3)	58,800				COLLEGE PREPARATORY CURRICULUM, NEW QUEST CAMPAIGN
COLUMBUS COMMUNITY KOLLEL 2513 E MAIN STREET COLUMBUS, OH 43209	31-1438033	501(C)(3)	104,360				ADULT JEWISH EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
COLUMBUS FOUNDATION 1234 E BROAD STREET COLUMBUS, OH 43205	31-6044264	501(C)(3)	5,500				PHILANTHROPY & GRANT MAKING
COLUMBUS JEWISH DAY SCHOOL 150 E GRANVILLE STREET NEW ALBANY, OH 43054	31-1482374	501(C)(3)	63,010				JEWISH DAY SCHOOL FOR ELEMENTARY AGE STUDENTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
COLUMBUS JEWISH HISTORICAL SOCIETY 1175 COLLEGE AVENUE COLUMBUS, OH 43209	31-1012951	501(C)(3)	40,172				PRESERVATION OF HISTORY OF THE JEWISH COMMUNITY
COLUMBUS METROPOLITAN LIBRARY FOUNDATION 96 S GRANT AVENUE COLUMBUS, OH 43215	31-1692755	501(C)(3)	63,378				GREAT LIBRARIES CREATE CAMPAIGN, SUPPORT FOR COLUMBUS METROPOLITAN LIBRARY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
COLUMBUS MUSEUM OF ART 480 E BROAD STREET COLUMBUS, OH 43215	31-4379447	501(C)(3)	108,980				EDUCATIONAL & CULTURAL CENTER
COLUMBUS POLICE FOUNDATION CO THE COLUMBUS FOUNDATION 1234 E BROAD STREET COLUMBUS, OH 43205	37-1588250	501(C)(3)	14,500				HOLOCAUST MUSEUM, HOMELAND SECURITY TRAINING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
COLUMBUS SCHOOL FOR GIRLS 65 S DREXEL AVENUE COLUMBUS, OH 43209	31-4379452	501(C)(3)	25,850				COLLEGE PREPARATORY CURRICULUM
COLUMBUS SPEECH & HEARING CENTER 510 EAST NORTH BROADWAY STREET COLUMBUS, OH 43214	31-4379449	501(C)(3)	5,000				HEARING & SPEECH THERAPY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
COLUMBUS SYMPHONY ORCHESTRA 55 E STATE STREET COLUMBUS, OH 43215	31-6402408	501(C)(3)	37,375				ARTS, CULTURE & EDUCATION AND SUPPORT OF YOUNG MUSICIANS
COLUMBUS TORAH ACADEMY 181 NOE-BIXBY ROAD COLUMBUS, OH 43213	31-4428025	501(C)(3)	425,860				JEWISH STUDIES FOR ELEMENTARY & SECONDARY AGE STUDENTS, FURNITURE-UPPER SCHOOL CLASSROOMS, LANGUAGE ARTS LOWER SCHOOL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
COLUMBUS ZOO AND AQUARIUM 9990 RIVERSIDE DRIVE PO BOX 4 POWELL, OH 43065	31-1307572	501(C)(3)	50,450				ANIMAL HOSPITAL
COMMUNITY DEVELOPMENT FOR ALL PEOPLE 946 PARSONS AVE COLUMBUS, OH 43206	51-0476886	501(C)(3)	10,000				URBEN ZEN INTEGRATIVE THERAPY PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
COMMUNITY SHELTER BOARD 111 LIBERTY STREET 15 COLUMBUS, OH 43215	31-1181284	501(C)(3)	12,600				EMERGENCY HOUSING PROGRAMS & COMMUNITY AWARENESS
CONGREGATION AGUDAS ACHIM 2767 E BROAD STREET COLUMBUS, OH 43209	31-4414020	501(C)(3)	115,273				WORSHIP & EDUCATON, BROTHERHOOD, RELIGIOUS SCHOOL SUBSIDIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
CONGREGATION AHAVAS SHOLOM 2568 E BROAD STREET COLUMBUS, OH 43209	31-0898886	501(C)(3)	38,671				WORSHIP & EDUCATION
CONGREGATION BETH TIKVAH 6121 OLENTANGY RIVER ROAD WORTHINGTON, OH 43085	31-1069161	501(C)(3)	48,801				SYNAGOGUE, WORSHIP & EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
CONGREGATION RODEPH SHOLOM 7 W 83RD STREET 3RD FLOOR NEW YORK, NY 10024	13-1628164	501(C)(3)	29,620				SYNAGOGUE, WORSHIP & EDUCATION
CONGREGATION TIFERETH ISRAEL 1354 E BROAD STREET COLUMBUS, OH 43205	31-1631630	501(C)(3)	305,196				SYNAGOGUE, WORSHIP & EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
CONGREGATION TORAT EMET 2375 E MAIN STREET BEXLEY, OH 43209	31-1786319	501(C)(3)	73,691				SYNAGOGUE, WORSHIP & EDUCATION
COSI (FRANKLIN COUNTY HISTORICAL SOCIETY) 333 WEST BROAD STREET COLUMBUS, OH 43215	31-4383802	501(C)(3)	9,300				APPRENTICESHIP PROGRAM, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
CREATIVE LIVING INC 150 W 10TH AVE COLUMBUS, OH 43201	23-7159623	501(C)(3)	5,100				PROVIDE HOUSING AND SUPPORT TO PHYSICALLY DISABLED INDIVIDUALS
FLORENCE MELTON SCHOOL OF ADULT JEWISH LEARNING 95 REVERE DRIVE SUITE H NORTHBROOK, IL 60062	01-0725179	501(C)(3)	53,500				ADULT JEWISH EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
FLYING HORSE FARMS 5260 STATE ROUTE 95 MT GILEAD, OH 43338	20-3498125	501(C)(3)	25,900				CAMP EXPERIENCES FOR CHILDREN WITH SERIOUS ILLNESES
FRANKLIN COUNTY 330 HUNTINGTON PARK LANE COLUMBUS, OH 43215	31-0897014	501(C)(1)	10,000				ENVIRONMENTAL FORUM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
FRIENDS OF THE ARAVA INSTITUTE 1320 CENTRE STREET SUITE 206 NEWTON CENTRE, MA 02459	11-3485736	501(C)(3)	9,000				ATHLETIC EDUCATION & COMMUNITY OUTREACH-COLUMBUS BASEBALL
FRIENDS OF THE CONSERVATORY 1777 E BROAD STREET COLUMBUS, OH 43203	31-1657027	501(C)(3)	5,375				HORTICULTURAL & EDUCATIONAL INSTITUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
FRIENDS OF THE DREXEL 55 E STATE STREET COLUMBUS, OH 43215	27-1447434	501(C)(3)	7,589				TO SECURE AND SUSTAIN THE FUTURE OF THE HISTORIC DREXEL THEATRE
FRIENDS OF THE IDF 60 E 42ND STREET NEW YORK, NY 10165	13-3156445	501(C)(3)	8,650				DEDICATED TO THE MEN AND WOMEN SERVING IN THE ISRAEL DEFENSE FORCES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
FRIENDS OF THE ZIV MEDICAL CENTER INC 20533 BISCAYNE BLVD 966 AVENTURA, FL 33180	47-1194731	501(C)(3)	150,000				MEDICAL EQUIPMENT
FURNITURE BANK OF CENTRAL OHIO 118 S YALE AVENUE COLUMBUS, OH 43222	31-1600869	501(C)(3)	5,100				FURNITURE & HOUSEHOLD GOODS ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
GIGIS SHELTER FOR DOGS 2700 E DUBLIN GRANVILLE RD SUITE 300 COLUMBUS, OH 43231	81-4422755	501(C)(3)	7,000				DOG SHELTER
HADASSAH THE WOMEN'S ZIONIST ORG OF AMERICA INC PO BOX 11 NEW YORK, NY 10268	13-1656651	501(C)(3)	7,644				KEEPER OF THE GATE, EDUCATION, ADVOCACY & JEWISH CONTINUITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
HARMONY PROJECT 779 E LONG STREET COLUMBUS, OH 43203	27-1819074	501(C)(3)	33,886				REFORMATORY FOR WOMEN CHOIR PROGRAM, SOUTH HIGH NATIONAL TREASURE TOUR
HEBREW UNION COLLEGE 3101 CLIFTON AVENUE CINCINNATI, OH 45220	31-0537067	501(C)(3)	6,000				RELIGIOUS & SCHOLARLY LEARNING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
HOMELESS FAMILIES FOUNDATION 33 N GRUBB ST COLUMBUS, OH 43215	31-1179492	501(C)(3)	25,200				SHELTER & SUPPORT SERVICES FOR HOMELESS FAMILIES
HOPE SPRINGS INSTITUTE 4988 MINERAL SPRINGS RD PEEBLES, OH 45660	31-1705829	501(C)(3)	8,750				WORKSHOPS ON WOMEN'S ISSUES, EMPOWERED LEADERSHIP, AND PERSON GROWTH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
ILLINOIS HOLOCAUST MUSEUM & EDUCATION CENTER 9603 WOODS DRIVE SKOKIE, IL 60077	36-3156154	501(C)(3)	33,000				TEACHING TOLERANCE & EDUCATION CENTER PROGRAM
INNOCENCE PROJECT INC 40 WORTH STREET 701 NEW YORK, NY 10013	32-0077563	501(C)(3)	5,000				FREE INCARCERATED INNOCENT PEOPLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
JCC CHICAGO 300 REVERE DR NORTHBROOK, IL 60062	36-2167758	501(C)(3)	6,000				LAKEVIEW JCC RENOVATION
JEWISH AGENCY FOR ISRAEL - NORTH AMERICAN COUNCIL 633 THIRD AVENUE 21ST FLOOR SUITE C C NEW YORK, NY 10017	23-0053483	501(C)(3)	12,000				YOUTH FUTURES DIMONA

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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 CENTER 1125 COLLEGE AVENUE COLUMBUS, OH 43209	31-4379496	501(C)(3)	526,247				PRESCHOOL PLAYGROUND, FILM FESTIVAL, MAMANET, GALLERY PLAYERS, SECURITY UPDATES, EARLY CHILDHOOD EDUCATION
JEWISH FAMILY SERVICES 1070 COLLEGE AVENUE COLUMBUS, OH 43209	31-4379497	501(C)(3)	115,764				COMPREHENSIVE HEALTH & SOCIAL SERVICES, SHORT TERM THERAPY, SCRIP, BUILDING REPAIR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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 FEDERATION OF CLEVELAND 25701 SCIENCE PARK DR CLEVELAND, OH 44122	34-0714445	501(C)(3)	38,718				TEEN PROGRAM, JAFI, JEWISH NEEDS
JEWISH FEDERATION OF COLUMBUS 1175 COLLEGE AVENUE COLUMBUS, OH 43209	31-0838745	501(C)(3)	1,079,441				BUILD & STRENGTHEN THE COLUMBUS JEWISH COMMUNITY, HOLOCAUST SURVIVOR INITIATIVE, CAMPERSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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 FEDERATION OF GREATER PITTSBURGH 234 MCKEE PL PITTSBURGH, PA 15213	25-1017602	501(C)(3)	37,025				BUILD & STRENGTHEN THE GREATER PITTSBURGH JEWISH COMMUNITY
JEWISH FEDERATION PALM BEACH COUNTY 1 HARVARD CIRCLE SUITE 100 WEST PALM BEACH, FL 33409	59-0948696	501(C)(3)	50,000				BUILD & STRENGTHEN THE PALM BEACH COUNTY JEWISH COMMUNITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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 FEDERATION-SOUTHERN ARIZONA 3822 E RIVER ROAD 100 TUCSON, AZ 85718	86-0096795	501(C)(3)	5,000				BUILD & STRENGTHEN THE SOUTHERN ARIZONIA JEWISH COMMUNITY
JEWISH THEOLOGICAL SEMINARY 3080 BROADWAY NEW YORK, NY 10027	13-0887640	501(C)(3)	6,100				JEWISH HIGHER EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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JEWISH UNITED FUND OF METROPOLITAN CHICAGO 3 S WELLS STREET CHICAGO, IL 60606	36-2167034	501(C)(3)	11,720				HUMAN SERVICES, STRENGTHENING JEWISH COMMUNITY CONNECTIONS
JORGE M PEREZ ART MUSEUM OF MIAMI DADE COUNTY INC 1103 BISCAYNE BLVD MIAMI, FL 33132	59-2048869	501(C)(3)	5,000				INTERNATIONAL WOMENS COMMITTEE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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KIPP COLUMBUS 2900 INSPIRE DRIVE COLUMBUS, OH 43224	20-8627107	501(C)(3)	5,500				COLLEGE PREPARATORY PUBLIC SCHOOL DEDICATED TO PREPARING STUDENTS IN UNDERSERVED COMMUNITIES
LIFECARE ALLIANCE 1699 W MOUND STREET COLUMBUS, OH 43223	31-4379494	501(C)(3)	11,630				MEALS ON WHEELS, KOSHER KITCHEN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
LOCAL MATTERS 633 PARSONS AVENUE COLUMBUS, OH 43206	06-1819644	501(C)(3)	25,000				TO CREATE HEALTHY COMMUNITIES THROUGH FOOD EDUCATION, ACCESS, AND ADVOCACY
LORI SCHOTTENSTEIN CHABAD CENTER PO BOX 80 NEW ALBANY, OH 43054	31-1427001	501(C)(3)	31,391				EDUCATIONAL & RELIGIOUS PROGRAMS, FRIENDSHIP CIRCLE, LIFETOWN, YAHRZEITS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MARBURN ACADEMY 9555 JOHNSTOWN ROAD NEW ALBANY, OH 43054	31-1011901	501(C)(3)	26,500				SPECIALIZED EDUCATION FOR LEARNING DISABLED STUDENTS, CAPITAL CAMPAIGN
MASORTI FOUNDATION 475 RIVERSIDE DRIVE SUITE 832 NEW YORK, NY 10115	13-3137586	501(C)(3)	50,200				CONSERVATIVE JEWISH RELIGIOUS & SPIRITUAL DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MAYO CLINIC 200 FIRST STREET SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	20,000				HEALTH SERVICES, EDUCATION
MID-OHIO FOODBANK 3960 BROOKHAM DRIVE GROVE CITY, OH 43123	31-0865343	501(C)(3)	78,570				HUNGER RELIEF PROGRAMS, FOOD FOR THE NEEDY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MOMENTUM-EXCELLENCE 500 S FRONT STREET SUITE 965 COLUMBUS, OH 43215	46-4509725	501(C)(3)	11,500				DANCE, MUSIC AND PERFORMANCE TO PUT CHILDREN ON A PATH TOWARD LEADING SUCCESSFUL LIVES
MONMOUTH UNIVERSITY 400 CEDAR AVENUE WEST LONG BRANCH, NJ 07764	21-0634584	501(C)(3)	12,000				SCHOLARSHIPS, HIGHER EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MORSELLIFE FOUNDATION INC 4847 FRED GLADSTONE DR WEST PALM BEACH, FL 33417	59-2774476	501(C)(3)	5,400				TO ENHANCE SENIOR LIVING IN THE SPIRIT OF THE JEWISH TRADITION
NATIONAL COUNCIL OF JEWISH WOMEN 3000 B EAST MAIN ST 272 COLUMBUS, OH 43209	31-6066252	501(C)(3)	8,604				WOMENS ADVOCACY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NATIONAL HEMOPHILIA FOUNDATION 7 PEEN PLAZA STE 1204 NEW YORK, NY 10001	13-5641857	501(C)(3)	11,000				TO FIND BETTER TREATMENTS AND CURES FOR BLEEDING AND CLOTTING DISORDERS
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVE NEW YORK, NY 10017	13-5661935	501(C)(3)	5,000				GLIMCHER KEYSTONE COUNTRY RIDE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NATIONWIDE CHILDREN'S HOSPITAL FOUNDATION PO BOX 16810 COLUMBUS, OH 432166810	31-1036370	501(C)(3)	51,479				SUPPORT FOR NATIONWIDE CHILDRENS HOSPITAL, SUICIDE PROGRAM
NE'EMAN FOUNDATION USA 18 HAZELTON RD NEWTON CENTRE, MA 02459	47-3438072	501(C)(3)	6,800				TO SUPPORT ISRAELI NON-PROFIT ORGANIZATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NEW ALBANY COMMUNITY FOUNDATION 220 MARKET ST 205 NEW ALBANY, OH 43054	31-1409264	501(C)(3)	14,245				PHILANTHROPY & GRANT MAKING
OAKSTONE ACADEMY 900 CLUB DRIVE WESTERVILLE, OH 43081	31-1666674	501(C)(3)	5,000				QUALITY EDUCATION FOR CHILDREN WITH AND WITHOUT AUTISM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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OHIO WILDLIFE CENTER 6131 COOK ROAD POWELL, OH 43065	31-1182372	501(C)(3)	77,210				WILDNITE FOR WILDLIFE
OHIOANS TO STOP EXECUTIONS 9 E LONG STREET SUITE 202 COLUMBUS, OH 43215	31-1269170	501(C)(3)	5,000				END DEATH PENALTY IN OHIO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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OHIOHEALTH FOUNDATION 180 E BROAD STREET 31ST FLOOR COLUMBUS, OH 43215	23-7446919	501(C)(3)	150,255				KOBACKER HOUSE, ALAN & BOBBIE WEILER NURSING FUND, FINAL WISH FUND
OSU FOUNDATION 1480 W LANE AVENUE COLUMBUS, OH 43221	31-1145986	501(C)(3)	448,521				JAMES FUND FOR LIFE, MOVE TO PROSPER, CREATIVE WRITING, KIRWIN INSTITUTE, BOOK CLUB, SCHOTTENSTEIN BASKETBALL IMPROVEMENTS, SCHOLARSHIPS STAR PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
OSU HILLEL 46 E 16TH AVENUE COLUMBUS, OH 43201	31-1048567	501(C)(3)	229,192				PROGRAM & BUILDING EXPENSES, EDUCATION FELLOW, BUCKEYES FOR ISRAEL, BIRTHRIGHT
OSU - WEXNER CENTER FOR THE ARTS 1871 N HIGH ST COLUMBUS, OH 43210	31-6025986	501(C)(3)	37,240				ARMORY CIRCLE, SHERRI GELDIN FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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PACE UNIVERSITY GIFT PROCESSING CENTER PO BOX 419268 BOSTON, MA 022419268	13-5562314	501(C)(3)	5,000				HIGHER EDUCATION
PALM BEACH ORTHODOX SYNAGOGUE INC 120 N COUNTY ROAD PALM BEACH, FL 33480	65-0478910	501(C)(3)	17,300				SYNAGOGUE, WORSHIP & EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
PARDES INSTITUTE OF JEWISH STUDIES NORTH AMERICA INC 404 FIFTH AVENUE 3RD FLOOR NEW YORK, NY 10018	22-2594099	501(C)(3)	6,000				HIGHER JEWISH EDUCATION
PEF ISRAEL ENDOWMENT FUNDS 630 THIRD AVENUE SUITE 1501 NEW YORK, NY 10017	13-6104086	501(C)(3)	5,000				COMPUTERS FOR NEGBA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
PILOT DOGS 625 W TOWN STREET COLUMBUS, OH 43215	31-4393243	501(C)(3)	56,500				TRAIN DOGS FOR THE BLIND, GROUP CLASS
RATTLESTICK PRODUCTIONS INC 224 WAVERLY PL NEW YORK, NY 10014	11-3105457	501(C)(3)	10,000				CULTURAL ARTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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STEPHEN GAYNOR SCHOOL 148 W 90TH STREET NEW YORK, NY 10024	13-1969570	501(C)(3)	10,000				SPECIALIZED EDUCATION FOR LEARNING DISABLED STUDENTS
STORAHTELLING LABSHUL 125 MAIDEN LANE STE 8B NEW YORK, NY 10038	46-3877785	501(C)(3)	5,800				GENERAL SUPPORT, JEWISH CULTURE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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TEMPLE BETH SHALOM 5089 JOHNSTOWN ROAD NEW ALBANY, OH 43054	31-0926157	501(C)(3)	50,925				SYNAGOGUE, WORSHIP & EDUCATION
TEMPLE ISRAEL 431 E BROAD STREET COLUMBUS, OH 43215	31-1552336	501(C)(3)	496,448				SYNAGOGUE, WORSHIP & EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
THE BUCKEYE RANCH 5665 HOOVER ROAD GROVE CITY, OH 43123	31-0642111	501(C)(3)	100,000				MENTAL HEALTH TREATMENT TO FOSTER CARE
THE MANHATTAN INSTITUTE 52 VANDERBILT AVENUE NEW YORK, NY 10017	13-2912529	501(C)(3)	43,050				HIGHER EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
THE OHIO STATE UNIVERSITY 281 W LANE AVENUE 2ND FLOOR COLUMBUS, OH 43210	31-6025986	501(C)(1)	12,000				DENTAL SCHOLARSHIPS
TORAS CHAIM INC PO BOX 185 TEANECK, NJ 07666	11-3401024	501(C)(3)	12,206				JEWISH EDUCATION & OUTREACH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
TREE OF LIFE CONGREGATION 5898 WILKINS AVE PITTSBURGH, PA 15217	25-0979381	501(C)(3)	22,385				SYNAGOGUE, WORSHIP & EDUCATION
US HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PL SW WASHINGTON, DC 20024	52-1309391	501(C)(3)	9,704				DOCUMENTATION, STUDY & INTERPRETATION OF HOLOCAUST HISTORY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
UNITED WAY-CENTRAL OHIO 360 S THIRD STREET COLUMBUS, OH 43215	31-4393712	501(C)(3)	209,011				BUILD & STRENGTHEN THE COLUMBUS COMMUNITY
WEXNER HERITAGE VILLAGE 1151 COLLEGE AVENUE COLUMBUS, OH 43209	31-4417962	501(C)(3)	97,028				LONG TERM HEALTHCARE FOR DISABLED ELDERLY INDIVIDUALS, CAMPAIGN TO REVOLUTIONIZE CARE, ELDER ABUSE CONFERENCE, ZUSMAN HOSPICE, BUSINESS STRATEGY PHASE III, NURSE AIDE TRAINING INST, VEHICLE W/WHEEL CHAIR LIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
WORLD ORT INC 1740 BROADWAY 15TH FLOOR NEW YORK, NY 10019	06-1669917	501(C)(3)	12,000				SCHOOL SECURITY
YESHIVA UNIVERSITY PO BOX 21773 NEW YORK, NY 10087	13-1624225	501(C)(3)	18,000				HIGHER EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(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
YMCA OF CENTRAL OHIO 40 W LONG ST COLUMBUS, OH 43215	31-4379594	501(C)(3)	10,000				MEN'S HUMAN SERVICES
YWCA OF COLUMBUS 65 S FOURTH STREET COLUMBUS, OH 43215	31-4379597	501(C)(3)	11,000				WOMEN'S HUMAN SERVICES

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.	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization COLUMBUS JEWISH FOUNDATION	Employer identification number 31-1384772
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Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
☐ Travel for companions	☐ Payments for business use of personal residence		
☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.		1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
☒ Compensation committee	☐ Written employment contract		
☐ Independent compensation consultant	☐ Compensation survey or study		
☒ 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 organization or a related organization:			
a Receive a severance payment or change-of-control payment?		4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a The organization?		5a	No
b Any related organization?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a The organization?		6a	No
b Any related organization?		6b	No
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

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

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

[illegible]

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
COLUMBUS JEWISH FOUNDATION

Employer identification number
31-1384772

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures . .				
3 Art—Fractional interests . .				
4 Books and publications . .				
5 Clothing and household goods				
6 Cars and other vehicles . . .				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded .	X	67	2,776,523	MARKET VALUE
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential . .				
16 Real estate—Commercial . .				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (_____)				
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

32a

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

32a

Yes

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2018)

Part II **Supplemental Information.**

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

Return Reference	Explanation
PART I, LINE 32B	THE ORGANIZATION USES THIRD PARTIES TO SELL NONCASH CONTRIBUTIONS WHEN NECESSARY THE CONTRIBUTORS OF THE NONCASH CONTRIBUTIONS ARE RESPONSIBLE FOR PAYMENT OF THE THIRD PARTIES' SERVICES

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization
COLUMBUS JEWISH FOUNDATION

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

2018

**Open to Public
Inspection**

Employer identification number

31-1384772

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE JEWISH FEDERATION OF COLUMBUS (EIN 31-0838745, THE "FEDERATION") AND THE COLUMBUS JEWI SH FOUNDATION (EIN 31-1384772, THE "FOUNDATION") FORMED A NEW TAX-EXEMPT OPERATING ENTITY NAMED JEWISHCOLUMBUS (EIN 83-2103988) JEWISHCOLUMBUS IS A "FUNCTIONALLY INTEGRATED TYPE I II SUPPORTING ORGANIZATION " THIS CHANGE INCLUDED THE FOLLOWING REVISIONS IN STRUCTURE, GO VERNANCE AND OPERATIONS 1 LEGAL STRUCTURE - JEWISHCOLUMBUS WILL CARRY OUT THE MANAGEMEN T AND ADMINISTRATIVE FUNCTIONS OF THE FEDERATION AND FOUNDATION - ALL EMPLOYEES WILL TRAN SITION FROM THE FEDERATION AND FOUNDATION TO JEWISHCOLUMBUS - PROVISIONS WERE ADDED TO TH E CODES OF REGULATIONS TO INCLUDE ADDITIONAL PROTECTIONS FOR MAINTAINING ENDOWMENTS AND RE STRICTED FUNDS 2 GOVERNANCE AND OPERATIONS - JEWISHCOLUMBUS WILL APPOINT A MAJORITY OF THE FEDERATION AND FOUNDATION BOARD MEMBERS THE FEDERATION AND FOUNDATION BOARDS WILL RED UCE IN SIZE - OPERATIONAL AND ADMINISTRATIVE COMMITTEES OF THE FEDERATION AND FOUNDATION WILL MOVE TO JEWISHCOLUMBUS - JEWISHCOLUMBUS WILL BE FUNDED PRIMARILY BY THE FEDERATION A ND FOUNDATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	SEE EXPLANATION FOR FORM 990, PART VI, SECTION A, LINE 4 JEWISHCOLUMBUS APPOINTS A MAJORITY OF THE ORGANIZATION'S BOARD MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	SEE EXPLANATION FOR FORM 990, PART VI, SECTION A, LINE 4 JEWISHCOLUMBUS CARRIES OUT THE M ANAGEMENT AND ADMINISTRATIVE FUNCTIONS OF THE ORGANIZATION, INCLUDING, BUT NOT LIMITED TO, APPROVAL OF BUDGETS, STRATEGIC PLANNING, MARKETING AND RESOURCE ALLOCATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE CHIEF FINANCIAL OFFICER AND THE CHIEF EXECUTIVE OFFICER REVIEW A DRAFT OF THE FEDERAL FORM 990 AND RECOMMEND ANY CHANGES TO THE TAX PREPARER. THE REVISED FEDERAL FORM 990 IS THEN DISTRIBUTED TO THE FINANCE COMMITTEE FOR FINAL REVIEW. THE FULL BOARD IS PROVIDED WITH A COPY OF FEDERAL FORM 990 PRIOR TO FILING WITH THE IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE TRUSTEES AND MEMBERS OF COMMITTEES WITH BOARD DELEGATED POWERS C ONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT AFTER DISCLOSURE OF THE FINANCIAL INTE REST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE S HALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTERES T IS DISCUSSED AND VOTED UPON THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS THE CONFLICT OF INTEREST POLICY IS PROVIDED TO ALL BOARD MEMB ERS AT THE BEGINNING OF EACH FISCAL YEAR EACH OFFICER, TRUSTEE AND MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON A HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, B HAS READ AND UNDERSTANDS THE PO LICY, C HAS AGREED TO COMPLY WITH THE POLICY, AND D UNDERSTANDS THE FOUNDATION IS CHARIT ABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION MUST ENGAGE PRIMARILY IN ACTIVITIE S WHICH ACCOMPLISH ITS TAX-EXEMPT PURPOSES IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT S HALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY T O EXPLAIN THE ALLEGED FAILURE TO DISCLOSE IF, AFTER HEARING THE MEMBER'S RESPONSE AND AFT ER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, I T SHALL TAKE APPROPRIATE CORRECTIVE ACTION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION IS REVIEWED BY THE FOUNDATION'S VOLUNTEER PERSONNEL COMMITTEE AND THEN APPROVED BY THE FINANCE COMMITTEE. THE COMMITTEE REVIEWS SALARY LEVELS OF AGENCY EXECUTIVES WITH COMPARABLE ENDOWMENT PROGRAMS THROUGH THE USE OF FEDERAL FORMS 990 AND PUBLISHED NONPROFIT SALARY GUIDES. BUDGET IS SUBSEQUENTLY ACTED UPON BY EXECUTIVE COMMITTEE AND BOARD. THIS COMPENSATION SETTING PROCESS AND SUBSEQUENT DECISIONS ARE DOCUMENTED IN MEETING MINUTES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	COPIES OF GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE GENERAL PUBLIC UPON WRITTEN OR VERBAL REQUEST TO THE COLUMBUS JEWISH FOUNDATION, FOR THE SAME PERIOD OF TIME AS SET FORTH IN THE INTERNAL REVENUE CODE SECTION 6104(D)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CSV CHANGE OF LIFE INSURANCE 284,857

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
COLUMBUS JEWISH FOUNDATION

Employer identification number
31-1384772

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

(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

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1)EBNER FAMILY FOUNDATION 1175 COLLEGE AVE COLUMBUS, OH 43209 33-1050370	RENTAL OF OFFICE SPACE TO SUPPORTED ORGANIZATIONS	OH	501(C)(3)	LINE 12A, I N/A			No
(2)JEWISHCOLUMBUS 1175 COLLEGE AVE COLUMBUS, OH 43209 83-2103988	MANAGEMENT AND ADMINISTRATIVE FUNCTIONS	OH	501(C)(3)	LINE 12C, III-FI N/A			No
(3)JEWISH FEDERATION OF COLUMBUS 1175 COLLEGE AVE COLUMBUS, OH 43209 31-0838745	FOSTER THE WELFARE OF THE ENTIRE JEWISH COMMUNITY	OH	501(C)(3)	LINE 7 JEWISHCOLUMBUS			No

Part III 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) SR ASSOCIATES 5510 ASHFORD DRIVE DUBLIN, OH 43017 31-1262334	RENTAL REAL ESTATE	OH	COLUMBUS JEWISH FOUNDATION	UNRELATED	1,802	3,791,360		No			No	60 000 %

Part IV 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUST (7)	CHARITABLE TRUST	OH	COLUMBUS JEWISH FOUNDATION					Yes	
(2) CHARITABLE LEAD TRUST (2)	CHARITABLE TRUST	OH	COLUMBUS JEWISH FOUNDATION					Yes	

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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)

c 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)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l 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)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o 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)

s Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b No

1c No

1d No

1e No

1f No

1g No

1h No

1i No

1j No

1k No

1l No

1m No

1n No

1o Yes

1p Yes

1q No

1r No

1s No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)SR ASSOCIATES	A	1,802	SCHEDULE K-1
(2)JEWISH FEDERATION OF COLUMBUS	O	13,023	FMV (NET TRANSFERS)
(3)JEWISH FEDERATION OF COLUMBUS	P	102,400	FMV (NET TRANSFERS)

Schedule R (Form 990) 2018

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.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation