Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

Do not enter social security numbers on this form as it may be made public 10

Open to Public

Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service 9/1/2018 and ending 8/31/2019 For the 2018 calendar year, or tax year beginning C Name of organization Hand in Hand American Friends of the Center for Jewish-Ara D Employer identification number Check if applicable Doing business as Address change Room/suite Number and street (or P O box if mail is not delivered to street address) 93-1269590 Name change E Telephone number PO Box 80102 ZIP code Initial return City or town (503) 892-2962 Portland OR 97280 Final return/terminated Foreign postal code Foreign country name Foreign province/state/county 6.781.647 Gross receipts \$ Amended return F Name and address of principal officer Application pending H(a) is this a group return for subordinates? Lee Gordon PO Box 80102, Portland, OR 97280 H(b) Are all subordinates included? If "No," attach a list (see instructions) 527 Tax-exempt status X 501(c)(3) 501(c) () < (insert no) 4947(a)(1) www handinhandk12 ord Website: ▶ H(c) Group exemption number X Corporation K Form of organization Trust Association Other • L Year of formation M State of tegal domicile 1999 OR Part I Summarv Briefly describe the organization's mission or most significant activities In the context of a difficult situation in Activities & Governance Israel with continued conflict between Jewish & Arab communities, HIH is building its model of Jewish-Arab partnership by expanding its network of integrated schools is bet asse Check this box If the organization discontinued its operations or disposed 2 Number of voting members of the governing body (Part VI, line 1a) 11 Number of independent voting members of the governing body (Part VI, line 1b) 11 7 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 75 Total number of volunteers (estimate if necessary) OGDEN Total unrelated business revenue from Part VIII, column (C), line 12 0 Net unrelated business taxable income from Form 990-T, line 38 0 Prior Year **Current Year** 3,907,246 6,730,708 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 620 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 40,289 50,939 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3.948.155 6.781.647 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4.027.450 4,466,000 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 192,653 229,154 Professional fundraising fees (Part IX, column (A), line 11e) 16a 1,698 Total fundraising expenses (Part IX, column (D), line 25) ▶ b 224,973 204,332 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) 4,445,076 4,901,184 Revenue less expenses Subtract line 18 from line 12 -496,921 1,880,463 19 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 1,971,243 3,837,678 21 Total liabilities (Part X, line 26) 5,660 4,225 Net assets or fund balances Subtract line 21 from line 20 1.965.583 3,833,453 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 somplete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge علا Sian Signature of office 2020 Executive Director Here Gordon Lee Type or print name and title Pnnt/Type preparer's name Date Check X Paid 7/7/2020 self-employed Kathryn Donaldson P01318306 Preparer Firm's name Firm's EIN ▶ **Use Only**

For Paperwork Reduction Act Notice, see the separate instructions.

Firm's address ► 1924 SE 35th Avenue, Portland, OR 97214

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

Form 990 (2018)

X Yes

No

503-233-6078

Phone no

Form 9	90 (2018) Hand in Hand American Friends of the Center for Jewish-Arab Education in Israel	93-1269590 Pag	e 2
Pa	Statement of Program Service Accomplishments	F.	
	Check if Schedule O contains a response or note to any line in this Part III	<u>· · · · · · · · · · · · · · · · · · · </u>	<u>(</u>
1	Briefly describe the organization's mission		
	providing support for integrated schools and providing funding for and assisting in program development in connection with Israeli nonprofits with similar missions		
	development in connection with israeli nonprofits with similar missions		
_ <u></u>	Did the organization undertake any significant program services during the year which were not listed or	n	
	the prior Form 990 or 990-EZ?	X 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 X	No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program service expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and		
	the total expenses, and revenue, if any, for each program service reported	anocations to others,	
	the total expended, and revende, it diff, for each program out the reported		
4a	(Code) (Expenses \$ 4,466,000 including grants of \$ 4,466,000) (Rev	renue \$ 0)	
	GRANTS IN ISRAEL. The grants made to the Hand in Hand organization in Israel enabled the creation		
	supported the growth of the existing six Hand in Hand schools in Israel During the 2018-2019		
	year, Jewish and Arab student enrollment grew by over 10%. In addition, plans were laid for the establishment of a 7th school in the twin Israeli towns of Rosh Ha'Ayın-Kfar Kassım, due to open		
	in Contombor 2020		
	in September 2020		
	(Code) (Expenses \$ 71,855 including grants of \$ 0) (Rev	ronue \$ 0.\	
40	EDUCATIONAL WORK IN THE US Executive Director, Lee Gordon, made over 50 presentations about		
	Jewish-Arab relations in Israel across the U.S. in syagogues, churches, parlor meetings,	`	
	universities and high schools. Over 1,000 people attended these forums		

	•••		
4c	(Code) (Expenses \$ including grants of \$) (Rev	renue \$)	
		•	
			
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
40	Total program service expenses • 4 537 855		

1260500

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Checklist of Required Schedules Part IV No Yes 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 X х Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 candidates for public office? If "Yes," complete Schedule C, Part I 3 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 Y 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 98-197 If "Yes," complete Schedule C, Part III 5 Х 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 Х "Yes," complete Schedule D, Part I 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х complete Schedule D, Part III 8 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 9 Х negotiation services? If "Yes," complete Schedule D, Part IV 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 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 b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more Х of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b 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 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 Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х Schedule D. Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," 12b and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 Х 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 Х 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 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Х 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 Х 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Х If "Yes," complete Schedule G, Part III 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a Х 20b b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II

Part	Checklist of Required Schedules (continued)			
		ightharpoonup	Yes	No
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		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	l		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	24a		х
	24b through 24d and complete Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u>^</u>
	Did the organization invest any proceeds of tax-exempt borius beyond a temporary period exception. Did the organization maintain an escrow account other than a refunding escrow at any time during the year.	240		
C	to defease any tax-exempt bonds?	24c		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
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	j		
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
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? If "Yes," complete Schedule L, Part II	26		Х
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			١
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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)	200		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		 ^ -
b	Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	-00		<u> </u>
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			۱.,
	III, or IV, and Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	35b		
26	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	330		\vdash
36	organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
J 1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
38	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
Par				
ı aı	Check if Schedule O contains a response or note to any line in this Part V			
	Chiesian deliberate d'acceptance d'acceptance de l'acceptance		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 11			1
та 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			
ū	gaming (gambling) winnings to prize winners?	1c	Х	
	and the second section of the second			(2018)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
**		1 1		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				33
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 7	XXX		22
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	turns? .	2b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ons)			No.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedu		3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	a financial account in a foreign country (such as a bank account, securities account, or other financial	cial account)?	4a	- 1 v60 a 450	X
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 Account				1310,40
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	saction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c	L	↓
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	I the			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions or			1
	gifts were not tax deductible?		6b	12 Table 19	4-34-
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or goods	With the	16.00	
	and services provided to the payor?		7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	<u> </u>	-
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was	1_		١.,
	required to file Form 8282?	1 = . 1	7c	IONI.	X R-2888
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	Ser.		M
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co		7f	-	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 86		7g		╁
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of the organization of cars, boats, airplanes, or other vehicles, did the organization of the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, airplanes, airpl		7h	添加水	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain	ned by the		3498	23835
_	sponsoring organization have excess business holdings at any time during the year?		8 11744	2012513	Nath Pile
9	Sponsoring organizations maintaining donor advised funds.		- Annual Control	Lang.	19552
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a 9b		╁
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	•	30	GEX.	
10	Section 501(c)(7) organizations. Enter	10a		63.73 2008	
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	27.5	1999	
b		[100]			
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders	11a	15 Earl		10 m
a b	Gross income from other sources (Do not net amounts due or paid to other sources				
U	against amounts due or received from them)	11Ь			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo		12a	ALCOHOL:	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	*4.3	学学家	****
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			3.5	
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		1020
a	Note. See the instructions for additional information the organization must report on Schedule O		38.00	SEE SEE	
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			
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sched	ule O	14b	T	Ť
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remu				<u> </u>
10		noradon or	15		×
	excess parachute payment(s) during the year		\$6,16%	1414	**************************************
	If "Yes," see instructions and file Form 4720, Schedule N		37.11	No. of Parties	12-65-68
16	Is the organization an educational institution subject to the section 4968 excise tax on net investme	ent income?	16	1,440.52	X X
	If "Yes." complete Form 4720, Schedule O		海路	WELL ST	整

Part VI

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

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 0 Enter the number of voting members included in line 1a, above, who are independent 10 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? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, director, sor trustees, or key employees to a management company or other person? 4 Did the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 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? 7 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 9 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 9 Did the organization charges of the governing body? 9 Did the organization charges of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization smalling address? If "res," provide the names and addresses in Schedule O. 10 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 secure branches and the proposes, I any used by the organization to review the Form 190 to lall members of its governing body before filing the form? 10 Did the organization have a written whister long-activation secure that personal secure to participate in a joint venture or simi	Sect	ion A. Governing Body and Management				
if there are maternal differences in voting rights among members of the governing body delegated voroal authority to an executive committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 10 11 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, directors, trustees, or key employees 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 3 Did the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization base significant diversion of the organization assests? 5 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 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? 5 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 5 Each committee with authority to act on behalf of the governing body? 5 Each committee with authority to act on behalf of the governing body? 5 Each committee with authority to act on behalf of the governing body? 5 Each committee with authority to act on behalf of the governing body? 6 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 organizations procedure and branches to ensure their operations are consistent with the organization and decision? 10 Did the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations		Tutantha manha of makes an area of the account hadrons to the send of the territoria	40	11	Yes	No
diff the governing body delegated broad authority to an executive committee or similar committee, explain in Schedulie O b. Einter the number of voting members included in line 1a, above, who are independent 10 did any officer, director, trustee, or key employee? 3 Did the organization delegate control over management dutes customarily performed by or under the direct supervision of officers, director, trustee, or key employees to a management company or other person? 4 Did the organization delegate control over management dutes customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 5 Did the organization have members or key employees to a management company or other person? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or operanization or ontemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 5 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 5 Each committee with authority to act on behalf of the governing body? 5 Each committee with authority to act on behalf of the governing body? 6 Each committee with authority to act on behalf of the governing body? 7 Each committee with authority to act on behalf of the governing body? 8 If "Yes' do the organization have written policies and procedures governing the activities of such chapters, and the process of the organization of the following persons include a reward to the committee with a transfer and activities of such chapters, and transfer and activities of such chapters, and transfer and activities of such cha	1a	· · · · · · · · · · · · · · · · · · ·	1a			
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20 State the name, address, and telephone number of the person who possesses the organization's books and records Lee Gordon 503-892-2962	19		conflict of interest	policy, ar	nd	
Lee Gordon 503-892-2962						
	20			• • • • • • • • • • • • • • • • • • •		
2929 SW Multnomah Blvd, Suite 204, Portland, OR 97219			503-892-296) <u>Z</u>		

Form 990 (2018)	Hand in Hand American Friends of	the Center for J	Jewis	h-Ar	ab I	<u>Edu</u>	cation	ın	Israel	93-12695	90 Page 7
Part VII	Compensation of Officers, Dire	ctors, Truste	es, k	(ey	En	nple	oyee	s, ł	lighest Comp	ensated	
`	Employees, and Independent C		•	•			•				
	Check if Schedule O contains a re		te to	an	y lir	ne II	n this	Pa	art VII		. 🔲
Section A.	Officers, Directors, Trustees, Key E	mployees, and	High	est	Сог	npe	nsate	ed E	mployees		
1a Complete	this table for all persons required to be									with or within the	
organization's	· · · · · · · · · · · · · · · · · · ·								, ,		
List all	of the organization's current officers, di	rectors, trustees	(whe	ethe	rino	divid	duals (or o	rganizations), re	gardless of amo	unt
	ion Enter -0- in columns (D), (E), and (i	•	•						,,	•	
	of the organization's <mark>current</mark> key emplo										
who received	organization's five current highest con reportable compensation (Box 5 of Fort	•	•	•							yee)
•	and any related organizations			. L			~				
	of the organization's former officers, ke eportable compensation from the organ		_					ea e	empioyees who r	eceived more th	an
	of the organization's former directors of	-			-			44.	as a former direc	stor or trusteo of	tho
	more than \$10,000 of reportable compe										irie
=	n the following order individual trustees								-		
	employees, and former such persons	or anoctors, ms	,	, i ai	03		o, om	JU1 (, no, employees	5, Inglicat	
,, ·	s box if neither the organization nor any	v related organiz	etion	cor	nne	nca	ted ar	nv c	urrent officer du	ector or trustee	
Oneck un	3 DOX II TICKHEL (HE O'GAINZAUOT HOL AN)	Telated organiz	I					., .	I I I I I I I I I I I I I I I I I I I	l lastee	
						C) sition					
	(A)	(B)	(do not check more						(D)	(E)	(F)
	Name and Title	Average hours per	box, unless person officer and a direct						Reportable compensation	Reportable compensation	Estimated amount of
		week (list any					_		from	from related organizations (W-2/1099-MISC)	other
		hours for related	dividual t	Institutional	Officer	y er	hes	Former	the organization		compensation from the
		organizations	ici ual	g	ļ `	employee	yee		(W-2/1099-MISC)	,	organization
		below dotted line)	Individual trustee or director	Ē	1	yee	mpe	ĺ			and related organizations
		ŕ	ee	trustee			Highest compensated employee				
			Į	"			E E				
(1) Stuart I	Brown	5 00									
Chair & Board	Member	0 00	Х	<u> </u>	X		L				
(2) Emile E	Bendit	2 00						ŀ			
Board Membe	er	0 00			Ш	L		_			
1-6	BLumenfeld	2 00	1			l	1				
Board Member		0 00		_	_	<u> </u>		<u> </u>	<u> </u>		
(4) Julie I E		2 00									
Board Member		0 00		\vdash	⊢	-	<u> </u>	-	<u> </u>		
(5) Dan Cı		2 00		l	1	ł		}			
Board Membe		0 00 2 00		┢	\vdash	┢	 				
Board Member	Eisenberg	0 00									
	Kaplan Freedman	2 00	_	-	╁─	\vdash		\vdash	 -		
Board Member		0 00		l	ĺ	ļ		1			
(8) Seth Ja		2 00			t	T	 				
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	othman	2 00	_					\vdash		7.0.	
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(11) Jay Ste	ınfeld	2 00	_		Γ	Γ]		
Board Membe		000	Х		L_			_			
(12) Lee Go	rdon	45 00									
Executive Dire		0 00		$oxed{}$	X	oxdot		L	76,000	0	2,289
(13) Patty S		40 00	1			1					
Corporate Se	cretary	0 00			X	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$		L.	45,300	0	1,327

Page 8

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Positio (do not check moto box, unless perso officer and a director Institutional trustee or director		ition more rson irecto	ıs both an		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)		other compensatio		of tion e on ed	
(15)														
(16)								-						
(17)														
(18)														
(19)				ļ —						··				
(20)							-							
(21)														
(22)														
(23)														
(24)														
(25)				_										
1b c d	Sub-total Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)		1		i	<u> </u>	ı	> > >	121,300 0 121,300		0 0 0	-A		3,616 0 3,616
2	Total number of individuals (including but not li reportable compensation from the organization		sted a	abov	re) v 0	vho	rece	ved	I more than \$100	,000 of				
3	Did the organization list any former officer, dire employee on line 1a? If "Yes," complete Sched				loye	ee, c	or hig	hes	t compensated	.,		3	Yes	
4	For any individual listed on line 1a, is the sum of the organization and related organizations great individual									h		4		×
5	Did any person listed on line 1a receive or accifor services rendered to the organization? If "Y									ridual		5		X
Sec	tion B. Independent Contractors	00, 00р.о	J. 70 G.				,,, po.		·					
1	Complete this table for your five highest compecompensation from the organization. Report coyear											ax	_	
	(A) Name and business add	ress							(B) Description of ser	vices	C	(C Compen		
								ļ						0
		 -						\vdash						0 0
	- Andrews													0
								L			234% Bake 1.8	thóm, cos A	wise France	0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	_	ted to	tho	se	ıste	o abo O		wno received					

more than \$100,000 of compensation from the organization

Page 9

Par	Check if Schedule O contains a response or note to any line in this Part VIII										
	\$2000 S		NOTALLE OF			(A)	(B)	(C)	(D)		
		To the same of				Total revenue	Related or exempt	Unrelated business	Revenue excluded from		
							function	revenue	tax under sections		
77.7						vial relea esse a ret nount nount nount	revenue	ningunjikanduramunin bohr	512-514		
S.T. Str	¹la b	Federated campaigns . Membership dues	1. 1.		,901 0						
Contributions, Gif's, Grans and Other Similar Amounts	C	Fundraising events	. 1						i miningan manangan manangan Limingan manangan kanangan manangan Limingan manangan ma		
If S.	d	Related organizations	· 1		0						
S, E	e	Government grants (contributions	<u> </u>		0						
to is		All other contributions, gifts, gran									
혈影		similar amounts not included abo	I	f _ 6,723	3,807				n and an and a second s		
ig ig	g	Noncash contributions included in li	nes 1a-1f	. 4	,699						
9 0	h	Total. Add lines 1a-1f			▶	6,730,708			传来等。		
<u>"</u>				Business	oac		area de la completa de la completa La completa de la co				
Program Service Revenue	2a					0					
8	b					0					
	C					0					
Se	d				-	0					
Ta I	e	All About the second of the sec				0					
§		All other program service revenu Total. Add lines 2a–2f	е			0	TOST TOTAL SALVA	VIII Josh Gold (1907)	Trouble at the trop of the first		
\dashv	3	Investment income (including div	idends interes	t and		· · · · · · · · · · · · · · · · · · ·	THE PERSONAL PROPERTY OF THE PERSON NAMED IN	#355-2-2-2-2-3-3-3-3-3-3-3-3-3-3-3-3-3-3-	88'2 318-8-50 80 and 50 color 50.0		
		other similar amounts)		ι, απα	50,939			50,939			
	4	Income from investment of tax-ex	kempt bond pro	ceeds .		0			· · · · · · · · · · · · · · · · · · ·		
	5	Royalties			•	0		1			
			(i) Real	(II) Persor	n <u>a</u> l				nandaega appromada o oga fi		
	6a	Gross rents .									
'	b	Less rental expenses									
	С	Rental income or (loss)	L	0	0						
	_d	Net rental income or (loss)	() Securities	T (1) Otho		0 2-23 the monitorial at every	PARADONE OF PARADONALIS	a_matesiassassassassassassassassassassassassas	utraakii meessi Meessi keessi mi		
	7a	Gross amount from sales of	(i) Securitieș	(II) Othe							
	L	assets other than inventory		0	0						
	b	Less cost or other basis and sales expenses		o	0						
	С	Gain or (loss)		0							
	d	Net gain or (loss)		. 	•	0	Section 1. Care		Section of the sectio		
		,		, ·							
ne .	8a	Gross income from fundraising					a jumpe pagananan gr				
re/		events (not including \$	<u></u> 0								
Re		of contributions reported on line	1c)								
ē		See Part IV, line 18	ā.		0		aran in Minimum in 177		ominentalisti (1 m. 1 m		
Other Reven	b	Less direct expenses)					A CONTRACTOR OF THE PARTY OF TH		
	C	Net income or (loss) from fundra	-		•	U VILVENSKE LUIV IC	Commission (U.S.) 1987 1987 1987 1987 1987 1987 1987 1987				
	9a	Gross income from gaming activ See Part IV, line 19	mes a	,	`\ n				ing deposit, on the deposit of		
	b	Less direct expenses	r I		0			45.86.48			
	C	Net income or (loss) from gaming	_	,	▶	0	1.1.1.2.3.3.3.0.000000000000000000000000		**************************************		
		Gross sales of inventory, less	,								
		returns and allowances	á	ı [0						
	b	Less cost of goods sold	Ł	, [0			76/02/2017 A.S.			
	С	Net income or (loss) from sales of	of inventory		>	0					
		Miscēllaneous Revenue		Business C	Code						
	11a					0	ļ				
	b					0					
	C			-		0					
	d	All other revenue	•	L		. 0	TO THE REAL PROPERTY.	THE NORTH WAT CASE	Der Geren verschaft		
	42	Total. Add lines 11a–11d Total revenue. See instructions			▶	6,781,647	0	. 0	50,939		
	12	TOTAL LEAGUAGE DEC HISTIACIONS			_	0,701,047	1		1 20,333		

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	1			
	ot include amounts reported on lines 6b, 7b, b, 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				
C	domestic governments See Part IV, line 21	0			
	Grants,and other assistance to domestic		<u> </u>		
- F	ndividuals See Part IV, line 22	0	<u> </u>	A Worker of the	
	Grants and other assistance to foreign				
(organizations, foreign governments, and foreign				
ŀ	ndividuals See Part IV, lines 15 and 16	4,466,000	4,466,000		
4 E	Benefits paid to or for members	0		portugination and the	
5 (Compensation of current officers, directors,				
t	trustees, and key employees	124,916	19,572	52,211	53,133
6 (Compensation not included above, to disqualified				
F	persons (as defined under section 4958(f)(1)) and				
ŧ	persons described in section 4958(c)(3)(B)	0			
7 (Other salaries and wages	85,609	12,342	16,981	56,286
8 F	Pension plan accruals and contributions (include				
5	section 401(k) and 403(b) employer contributions)	0			
	Other employee benefits	900		225	675
	Payroll taxes .	17,729	2,659	5,851	9,219
	Fees for services (non-employees)	,			Ì
	Management .	l 0			
	Legal	0			
	Accounting .	13,220		13,220	·
	Lobbying .	0			
	Professional fundraising services. See Part IV, line 17	1,698			1,698
	Investment management fees .	0	2 di etr i di marita de debas y zint de y	az i minye nagaz nagazar nagazar	1,000
	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	2,197		2,197	
	Advertising and promotion	4,636	464	2,107	4,172
	Office expenses	24,090		7,950	
	Information technology .	15,178		651	10,236
	Royalties	13,170			10,230
	Occupancy	13,815		4,559	7,184
	Travel	63,717	9,558	21,026	
	Payments of travel or entertainment expenses	03,717	3,550	21,020	33,133
	for any federal, state, or local public officials	l 0			
	•	22,359	75	9,325	12,959
_	Conferences, conventions, and meetings	22,359		9,323	
	Interest				
	Payments to affiliates	0		440	640
	Depreciation, depletion, and amortization	1,248			
	Insurance	2,959	303	1,604	1,052
	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	ine 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	ANTHY MERCHAN	为了一种企业的企业的企业	in than every	YISHTOLDER ARE
	Educational Program Expense	11,733			ļ
-	Organizational Dues	4,500		1	
-	PR Materials Production	2,699		459	
_	Fees & Misc	21,959		13,931	8,028
e /	All other expenses	0	,		
	Total functional expenses. Add lines 1 through 24e	4,901,184	4,537;855	150,624	212,705
	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	13,433	5,218	1,069	7,146

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_					-
V .	Palanca Chast				

•		Check if Schedule O contains a response or	note to	any line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing .			13,357	1	8,258
	2	Savings and temporary cash investments			506,478	2	639,586
	3	Pledges and grants receivable, net .			148,327	3	1,867,337
	4	Accounts receivable, net			0	4	0
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa-	ated er	nployees		10.00	
		Complete Part II of Schedule L .			0	5	A second control of the Assessment of the Assess
	6	Loans and other receivables from other disqualified person	ns (as o	defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), a					
		sponsoring organizations of section 501(c)(9) voluntary en		es' beneficiary	\$36.76 St. 189. 15 17 17	200	
Assets		organizations (see instructions) Complete Part II of Sche	dule L		0	6	
SS	7	Notes and loans receivable, net			0		0
⋖	8	Inventories for sale or use			0	8	
	9	Prepaid expenses and deferred charges		•	10,724	9	10,359
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	9,908		200	
	b	Less accumulated depreciation	10b	8,095			1,813
	11	Investments—publicly traded securities			645,358	11	646,541
	12	Investments—other securities See Part IV, line	•	644,884	12	663,784	
	13	Investments—program-related See Part IV, line	0		. 0		
	14	Intangible assets	•		0	_	0
	15	Other assets See Part IV, line 11.			0		0
	16	Total assets. Add lines 1 through 15 (must equal	al line	34)	1,971,243		3,837,678
	17	Accounts payable and accrued expenses			5,660		4,225
	18	Grants payable	0	_			
	19	Deferred revenue .	0				
	20	Tax-exempt bond liabilities			0		
	21	Escrow or custodial account liability Complete I			0	21	The service of the se
Liabilities	22	Loans and other payables to current and former					
Ħ		trustees, key employees, highest compensated		yees, and		22	
į		disqualified persons Complete Part II of Schedu			0	22	0
_	23	Secured mortgages and notes payable to unrelate Unsecured notes and loans payable to unrelate			0		0
	24 25	Other liabilities (including federal income tax, pa			<u> </u>		
	25	parties, and other liabilities not included on lines					
		of Schedule D .	11-2	4) Complete Falt X	1 0	25	۱ ،
	26	Total liabilities. Add lines 17 through 25		• •	5,660	26	4,225
		Organizations that follow SFAS 117 (ASC 958	2) aba	ak hara		ALC:	
တ္တ		complete lines 27 through 29, and lines 33 ar		ck nere		3 3	
ညိ			10 57.		1,817,256	27	1.066.116
<u>8</u>	27	Unrestricted net assets .			1,817,256		1,966,116 1,867,337
Õ	28 29	Temporarily restricted net assets	•		146,327		1,007,007
Ä	29	Permanently restricted net assets					
Ē		Organizations that do not follow SFAS 117 (ASC958),	check	here 🕨 🔛 and			
Ö	1	complete lines 30 through 34.					
šet	30	Capital stock or trust principal, or current funds	•		0		
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed			0		
et.	32	Retained earnings, endowment, accumulated in	come,	or other funds	1 205 500		
Z	33	Total net assets or fund balances .			1,965,583		3,833,453
	34	Total liabilities and net assets/fund balances			1,971,243	34	3,837,678

Form 9	190 (2018) Hand in Hand American Friends of the Center for Jewish-Arab Education in Israel	93	3-1269590	Pag	e 12
Part					
•	Check if Schedule O contains a response or note to any line in this Part XI			[
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,781	,647
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	4,901	,184
3	Revenue less expenses Subtract line 2 from line 1	3		1,880	,463
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,965	,583
5	Net unrealized gains (losses) on investments .	5		-12	,593
6	Donated services and use of facilities .	6	·		
7	Investment expenses .	7			
8	Prior period adjustments .	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	;	3,833	<u>,453</u>
Part	Financial Statements and Reporting			,	_
	Check if Schedule O contains a response or note to any line in this Part XII		•		
1	Accounting method used to prepare the Form 990			Yes	No Control
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		2000 P		
	reviewed on a separate basis, consolidated basis, or both				248
	Separate basis Consolidated basis Both consolidated and separate basis				7.04.7
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	ومعدوب
	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 X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			1893	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		х
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		
				990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 601(c)(3) organization or a section 4947(a)(1) nonexempt chantable trust.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

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

Inspection Employer identification number

Name of the organization		Employer identification number								
	land in Hand American Friends of the Center for Jewish-Arab Education in Israel					59590				
Part I Reason for Public Chari										
The organization is not a private foundation						\sim 1				
1 A church, convention of churche	Ť				A)(I).	<i>*</i>)				
2 A school described in section 1					. (
3 A hospital or a cooperative hosp	-					/ /				
4 A medical research organization hospital's name, city, and state	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									
	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 governi	ment or governmen	ital unit described in se	ction 170	(b)(1)(A)(v).					
7 X An organization that normally re described in section 170(b)(1)(m a gover	nmental u	init or from the gene	ral public				
8 A community trust described in	section 170(b)(1)(<i>A</i>	A)(vi). (Complete Part	II)							
9 An agricultural research organizer or university or a non-land-grant university	ation described in s college of agriculti	section 170(b)(1)(A)(ixure (see instructions)) operated Enter the i	l in conjur name, city	nction with a land-gra r, and state of the co	ant college llege or				
An organization that normally re receipts from activities related to support from gross investment is acquired by the organization after the support from gross investment is acquired by the organization after the support of the sup	its exempt function its ex	ns—subject to certain ed business taxable in	exception come (less	s, and (2) s section t	no more than 33 1/3 511 tax) from busine	3% of its				
11 An organization organized and	perated exclusivel	y to test for public safe	ty See se	ction 509	(a)(4).					
An organization organized and of one or more publicly supporte Check the box in lines 12a through	ed organizations de	scribed in section 509	(a)(1) or s	ection 50)9(a)(2). See sectioi	n 509(a)(3).				
a Type I. A supporting organization (some supported organization) You must come organization) the power to regu	larly appoint or elect a	y its supp majority o	orted orga of the direc	anization(s), typically ctors or trustees of th	by giving ne supporting				
b Type II. A supporting organization or management of the organization (s) You must constitute the organization of the organization org	e supporting organi omplete Part IV, S	zation vested in the sa ections A and C.	me perso	ns that co	ntrol or manage the	supported				
c Type III functionally integra	i ted. A supporting o	organization operated i	n connect Part IV. Se	on with, a	ing functionally integ	rated with,				
d Type III non-functionally in that is not functionally integra	tegrated. A suppor	ting organization opera	ated in cor	nection w	ith its supported org	anization(s) entiveness				
requirement (see instructions	s) You must comp	lete Part IV, Sections	A and D	and Part	: V.					
e Check this box if the organiz					Type I, Type II, Typ	e III				
functionally integrated, or Ty		illy integrated supportir	ng organiz	ation		0				
f Enter the number of supported ofg Provide the following information		ed organization(s)			•					
(i) Name of supported organization	(ii) EIN	(ili) Type of organization (described on lines 1–10 above (see instructions))		rganization ir governing nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
			Yes	No						
(A)				,,,,		-				
(B)		· · · · · · · · · · · · · · · · · · ·								
(C)										
(D)										
(E)										
Tatal			 							

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	ino to quainy ar	100, 110 10010 111	<u> </u>	<u></u>	<u></u>	 _
Cale	ndar 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").	3,116,860	3,443,288	3,174,623	3,907,246	6,730,709	20,372,726
2	Tax revenues levied for the	0,110,000	0,110,200	0,171,020	0,001,210	9,700,700	20,012,120
	organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities	-		•			
	furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	3,116,860	3,443,288	3,174,623	3,907,246	6,730,709	20,372,726
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						0.444.404
	shown on line 11, column (f)				omograpiska sociali Tariograpiska socialisti		6,141,104
Sec	Public support. Subtract line 5 from line 4 tion B. Total Support	A the of the factor of the state of the stat		THE REPORT OF THE PERSONS	Same minima of property was 15	CONTRACTOR AND	14,231,622
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	3,116,860			3,907,246	6,730,709	20,372,726
8	Gross income from interest, dividends, payments received on securities loans,	5,115,000				3,	
	rents, royalties, and income from similar sources .	103	1,142	33,611	40,289	50,939	126,084
9	Net income from unrelated business	103	1,142	33,011	40,283	30,333	120,004
•	activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0
11	Total support. Add lines 7 through 10	Lersingraga		Craff Care Care	Water Bally		20,498,810
12	Gross receipts from related activities, etc. (s.	ee instructions)	we trade. This is the " a trade. " The	36. 艾·斯克·斯克·斯达克·斯克·斯	TO THE EXCELSE AND CROSS	12	1,120
13	First five years. If the Form 990 is for the o	•	second, third, fourti	h, or fifth tax year a	is a section 501(c)	···	
	organization, check this box and stop here						· •
	tion C. Computation of Public Su						
14	Public support percentage for 2018 (line 6, c	olumn (f) divided b	y line 11, column (n)	•	14	69 43%
15	Public support percentage from 2017 Sched	ule A, Part II, line	14			15_]	65 77%
	33 1/3% support test—2018. If the organiz and stop here. The organization qualifies as	s a publicly suppor	ted organization			•	. • X
b	33 1/3% support test—2017. If the organiz box and stop here. The organization qualific				is 33 1/3% or more	, check this	▶□
17a	'a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 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 15 is 10% or more, and if the organization me Explain in Part VI how the organization meet	eets the "facts-and	l-circumstances" te	est, check this box	and stop here.		
18	supported organization Private foundation. If the organization did i	not check a hox 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)

Sec	tion A. Public Support				,		
	ndar 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 ")						0
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						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513			'			0
4	Tax revenues levied for the						
	organization's benefit and either paid to					İ	
	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the					`	
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3				Ì		_
	received from disqualified persons						0
ь	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	0		0	, 0	0	0
_	Add lines 7a and 7b	Season Language Property Co.	CEED, NO. MARINEZO			U 13.5458438.6836545	0
8	Public support (Subtract line 7c from line 6)						o
Sec	tion B. Total Support	Manage Contract Contr	Secretary Secretary	ACT will be at 10 300 th of 11 and	93 3 97 103 91 4 4 2 2 1 4 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	AND THE STATE OF STATE OF STATE	<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	/					•
	royalties, and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						!
	acquired after June 30, 1975			,			. 0
C	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business				,		
	activities not included in line 10b, whether	1			}		
	or not the business is regularly carned on						0
12	Other income Do not include gain or						
	loss from the sale of capital assets				1		
	(Explain in Part VI)						0
13	Total support. (Add lines 9, 10c, 11,		0	0	0		_
4.4	and 12)	L	<u> </u>			(3)	0
14	First five years. If the Form 990 is for the organization, check this/box and stop here		secona, triira, iouri	n, or murtax year a	as a section 50 r(c)	(3)	▶□
Sac	tion C. Computation of Public Su		200		<u>·</u>		
15	Public support percentage for 2018 (line 8,	• • • • • • • • • • • • • • • • • • • •		(f))		15	0 00%
	Public support percentage from 2017 Scheo			(1)		16	0 00%
	tion D. Computation of Investmen			· · · · · · · · · · · · · · · · · · ·		<u></u>	
17	Investment/income percentage for 2018 (lin			column (f))		17	0 00%
18	Investment income percentage from 2017 S					18	0 00%
19a	33 1/3% support tests—2018. If the organ					and line 17 is	
	not more than 33 1/3%, check this box and					•	▶ ∐
b	33/1/3% support tests—2017. If the organ						. \Box
,	Ine 18 is not more than 33 1/3%, check this		•	,			•
20/	Private foundation. If the organization did	not check a box on	line 14. 19a. or 19	Bb. check this box a	and see instruction:	S	▶

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated if designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
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10a		
	Market 2	
10b	[l

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting C			
1 Check here if the organization satisfied the Integral Part Test as a qualifying			
instructions. All other Type III non-functionally integrated supporting organ	nızatı	ons must complete Section	s 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	0	O
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	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	1		
instructions for short tax year or assets held for part of year)	器域		WHILE CARSES
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	0	0
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)	1900		
Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	0	C
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 035	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2	加亞大學都的語為語言於最高	0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		<u> </u>
4 Enter greater of line 2 or line 3	4		C
5 Income tax imposed in prior year	5	计多数数数据的图片的	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6	THE PROPERTY OF THE	0
7 Check here if the current year is the organization's first as a non-functional	lly inte	egrated Type III supporting	organization (see
instructions)			

Part.	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continuea)	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
	Amounts paid to perform activity that directly furthers exempt		-	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations	
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			0
8	Distributions to attentive supported organizations to which the	he organization is respoi	nsive	
	(provide details in Part VI) See instructions			
. 9	Distributable amount for 2018 from Section C, line 6			0
10	Line 8 amount divided by line 9 amount		· · · · · · · · · · · · · · · · · · ·	0 000
	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			0
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		W. W. and I millioning a real form of the control of the	Control of the Contro
a_	From 2013			
<u>b</u>	From 2014	T. Transferration of the Control of the Property	The state of the s	AT 12 WINDS A TOWN V AND
С	From 2015			
d	From 2016	The state of the s		Control Control Control Control
	From 2017		Carlo Caracta	
	Total of lines 3a through e	O		
	Applied to underdistributions of prior years		0	
<u>h</u>	Applied to 2018 distributable amount			O
<u> i </u>	Carryover from 2013 not applied (see instructions)			
<u>i</u>	Remainder Subtract lines 3g, 3h, and 3i from 3f	0		
4	Distributions for 2018 from			
	Section D, line 7 \$ 0		对你们是自己的人,不是不是一个人的人	
	Applied to underdistributions of prior years	AND THE WAY AND A STATE OF THE	U	
<u> </u>	Applied to 2018 distributable amount			O CONTRACTOR OF THE PROPERTY OF THE PARTY OF
<u>c</u>	Remainder Subtract lines 4a and 4b from 4	O Descriptor experiencians control		ANTERNATION OF THE THEORY CONTRACTOR
5 -	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2. For result		_	
	greater than zero, explain in Part VI See instructions		U U U U U U U U U U U U U U U U U U U	
6	Remaining underdistributions for 2018 Subtract lines 3h		Charles and the control	
	and 4b from line 1. For result greater than zero, explain in			_
	Part VI See instructions			U Postantina de la Contraction
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c	O 		
8	Breakdown of line /			
a	Excess from 2014 . 0	MACHINE PROPERTY OF THE PROPERTY OF	mile a set pleasured military set and an	CANADA TARAN MANAGANA
<u> </u>	Excess from 2015 0 Excess from 2016 0			
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d	Excess from 2017 U	in the communication of the co		
<u>e</u>	Excess from 2018 0	Day Other Book Brook Brook Control of the Contro	THE RESERVE OF THE PROPERTY OF	Andrew 291 Mills 在西山下外西北州 100 100 All ang ang ang ang ang ang

Schedule A (F	om 990 or 990-EZ) 2018	Hand in Hand American Friends of the Center for Jewish-Arab Education in Iseael 269590	Page 8
Part VI		rmation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part	
		Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section	
•			
		rt IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b,	
		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 Als	so complete this part for any additional information (See instructions)	
•••			
		••••	
			·

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No 1545-0047

2018

Open to Public Inspection

Name	or the organization		-""	ployer identification number
Hand	in Hand American Friends of the Center for Je			93-1269590
Part				or Accounts.
*	Complete if the organization answer			
		(a) Donor advised for		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)		- 	····
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and do			
_	funds are the organization's property, subject			Yes No
6	Did the organization inform all grantees, dono			
	only for charitable purposes and not for the be	enefit of the donor or donor	advisor, or for any o	
	conferring impermissible private benefit?			Yes No
Part	II Conservation Easements.			
	Complete if the organization answer	ed "Yes" on Form 990, F	Part IV, line 7.	
1	Purpose(s) of conservation easements held b			
	Preservation of land for public use (e.g.,			a historically important land area
	Protection of natural habitat	, E	=	a certified historic structure
		L	Freservation of	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization	on held a qualified conserva	ation contribution in	· · · · · · · · · · · · · · · · · · ·
	easement on the last day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements .			2a
b	Total acreage restricted by conservation ease	ments		2b
С	Number of conservation easements on a cert		, ,	2c
đ	Number of conservation easements included		, and not on a	
	historic structure listed in the National Registe			2d
3	Number of conservation easements modified,	transferred, released, extin	guished, or termina	ted by the organization during
	the tax year			
4	Number of states where property subject to co			
5	Does the organization have a written policy re		ring, inspection, har	
	violations, and enforcement of the conservation			∐ Yes ∐ No
6	Staff and volunteer hours devoted to monitoring, in	ispecting, handling of violation	s, and enforcing cons	ervation easements during the year
				
7	Amount of expenses incurred in monitoring, inspe	cting, handling of violations, ar	d enforcing conserva	tion easements during the year
	\$			
8	Does each conservation easement reported of	in line 2(d) above satisfy the	requirements of se	ection 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	•		Yes No
9	In Part XIII, describe how the organization rep			
	balance sheet, and include, if applicable, the		ganization's financia	al statements that describes the
	organization's accounting for conservation ea	sements	· · · · · · · · · · · · · · · · · · ·	
Pari	III Organizations Maintaining Collec			ther Similar Assets.
	Complete if the organization answer	<u>red "Yes" on Form 990, F</u>	Part IV, line 8.	
1a	If the organization elected, as permitted unde	r SFAS 116 (ASC 958), not	to report in its rever	nue statement and balance sheet
	works of art, historical treasures, or other simi	lar assets held for public ex	hibition, education,	or research in furtherance of
	public service, provide, in Part XIII, the text of	the footnote to its financial	statements that des	cribes these items
b	If the organization elected, as permitted unde	r SFAS 116 (ASC 958), to re	eport in its revenue	statement and balance sheet
	works of art, historical treasures, or other simi			
	public service, provide the following amounts		,	
	(i) Revenue included on Form 990, Part VIII,	_		▶ \$
	(ii) Assets included in Form 990, Part X			► \$ ► \$
2	If the organization received or held works of a	rt, historical treasures, or of	her similar assets fo	
-	following amounts required to be reported und			= :
а	Revenue included on Form 990, Part VIII, line			▶ \$
h	Assets included in Form 900. Part Y	•		<u> </u>

Sched	ule D	(Form 990) 2018 Hand in Hand Ameri	ican Fi	riends of the	Center	for Jewish-	Arab Education	on in Isi	rael 93-126	9590		Page 2
Part	Ш	Organizations Maintaining C	ollect	tions of A	rt, Hist	orical Tre	asures, or	Other	Similar Asse	ts (contii	nued)	
3.	Usı	ng the organization's acquisition, acc	cessio	n, and other	records	, check any	of the follow	ing that	are a significan	t use of its	S	
	coll	lection items (check all that apply)				_						
а		Public exhibition			d [Loan or	exchange pro	ograms				
b		Scholarly research			e [Other						
С		Preservation for future generations	,									
4		ovide a description of the organization		lections and	explain	how they fu	urther the orga	anızatıo	n's exempt purp	ose in Pa	art	
	XIII											
5		ring the year, did the organization so sets to be sold to raise funds rather th								Ye	es 🔲	No
Part	١V	Escrow and Custodial Arran										
		Complete if the organization ai	nswer	ed "Yes" c	n Form	1990, Parl	t IV, line 9, c	or repo	rted an amoui	nt on Fo	rm	
		990, Part X, line 21.										
1a	ls t	he organization an agent, trustee, cu	ustodia	n or other in	itermedi	ary for cont	ributions or of	ther ass	ets not			1
	ıncl	luded on Form 990, Part X?			•			•		Y ₀	≥s	No
b	If "	Yes," explain the arrangement in Par	rt XIII a	and complete	e the foll	lowing table	e					
										Amount		
C		ginning balance						10				
d		ditions during the year						10				
е		tributions during the year		•				16				
f	End	ding balance .	•				•		<u>. l</u>		_	, 0
2a	Did	l the organization include an amount	on Fo	m 990, Par	t X, line	21, for escr	row or custodi	ıal acco	unt liability?	Y ₁	es X	No
b	If "	Yes," explain the arrangement in Par	rt XIII	Check here	if the ex	planation h	as been provi	ided on	Part XIII			
Part	V	Endowment Funds.						~~~				
		Complete if the organization as	nswer	red "Yes" c	n Form	990, Par	t IV, line 10.					
				Current year	1	Prior year	(c) Two years	1	(d) Three years bad	k (e) Fo	our years	back
1a	Be	ginning of year balance										
b		ntributions										
С	Ne	t investment earnings, gains,										
	and	d losses					<u></u>					
d	Gra	ants or scholarships							· .			
е	Oth	ner expenditures for facilities										
	and	d programs .										
f	Adı	ministrative expenses			ļ							
g	En	d of year balance		0	<u> </u>	0		0		0		0
2	Pro	ovide the estimated percentage of the	e curre	ent year end	balance	e (line 1g, co	olumn (a)) hel	ld as				
а	Bo	ard designated or quasi-endowment		•	%							
b	Pe	manent endowment		<u>"</u>								
С		mporarily restricted endowment	·	%	-							
		e percentages on lines 2a, 2b, and 2										
3a		e there endowment funds not in the p	osses	sion of the o	organiza	tion that are	e held and adı	mınıstei	red for the			
	org	ganization by								- m	Yes	No
	(i)	unrelated organizations								3a(i)	<u> </u>	
	(ii)	5								3a(ii)	├	
b		Yes" on line 3a(ii), are the related org							•	3b_		L
4		scribe in Part XIII the intended uses		organization	n's endo	wment fund	IS					
Part	· VI	Land, Buildings, and Equipn Complete if the organization a		red "Ves" (n Form	1990 Par	t IV line 11a	a See	Form 990 Pa	rt X line	10	
		Description of property	1	(a) Cost or o			or other basis		Accumulated		ook valu	
		Description of property		(investr			(other)		depreciation	(5, 5		-
1a	Lai	nd				0	0		0			0
b		ıldıngs .	ŀ	- ,		0	0	1	0			0
c		asehold improvements	ŀ			ō	0		0			0
d		uipment .	ľ			0	9,908		8,095			1,813
e		her				0	0		0			0
		ld lines 1a through 1e (Column (d) n	nust ed	ual Form 9!	90. Part	X. column ((B), line 10c)		•			1,813

Part VII				
•	Complete if the organization answere	d "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 Cost or end-of-yea	valuation
(1) Financia	al derivatives	0		
(2) Closely-	-held equity interests	0		
(3) Other	Jewish Community Endowment Pool	663,784	F	
(A)				
(B)				
<u>(C)</u>			-	
(F)		<u></u>		
(G)				
(H)	nn (b) must equal Form 990, Part X, col (B) line 12)	663 784		
Part VIII		000,104	NAME OF TAXABLE PARTIES AND STREET AND STREE	ensettente internationality and straining and strain
r art vill	Complete if the organization answere	d "Yes" on Form 990	Part IV line 11c See Form	990 Part X line 13
			(c) Method of	
	(a) Description of investment	(b) Book value	Cost or end-of-year	
(1)	,			
(2)				· <u>-</u>
(3)				·
(4)		-		
(5)	***			
(6)				
<u>(7)</u>				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX	Other Assets.	d "Voo" on Form 000	Dort IV June 11d See Form	000 Part V line 15
	Complete if the organization answere	escription	Partiv, line 11d. See Form	(b) Book value
(4)	(4) 00			(D) DOOK VAIDE
(1)	,		•	
(3)				-
(4)				
(5)			1	
(6)				
(7)				
(8)				11.
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) lin	e 15)	>	•
Part X	Other Liabilities.			
	Complete if the organization answere	ed "Yes" on Form 990,	Part IV, line 11e or 11f Sec	e Form 990, Part X,
	line 25.		1. The Printing of Pirks, of the linearing day's dishib-	Secretary of the state of the same state of the file of the same state of the same state of the same state of
<u>1. </u>	(a) Description of liability	(b) Book value		
	al income taxes	0		
(2)		-		
(3)				
(4)				
(5)	· · · · · · · · · · · · · · · · · · ·			
<u>(6)</u> (7)				
(8)				
(0)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶

X

- Galcac	Hand in Hand American Friends of the Center for Jewish-Al	ap Eon	cation in israet	93-1269	1590 Page 4
Pari			-	turn.	
<u> </u>	Complete if the organization answered "Yes" on Form 990, Part	IV, line	e 12a.	г. т	
1	Total revenue, gains, and other support per audited financial statements	•	•	1	6,769,054
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2a	-12,593		
a b	Net unrealized gains (losses) on investments Donated services and use of facilities	2b	-12,593		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d .			2e	-12,593
3	Subtract line 2e from line 1			3	6,781,647
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	İ		100	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	_4b			_
_	Add lines 4a and 4b Total revenue Add lines 3 and 4a /This must equal Form 000. Bot 1, line 12.)			4c	6 704 647
5 Part	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) XII Reconciliation of Expenses per Audited Financial Statemen	to Mith	Evponence por		6,781,647
Fart	Complete if the organization answered "Yes" on Form 990, Part		•	return.	
- 1	Total expenses and losses per audited financial statements	10, 11110	, 120.	1 1	4,901,184
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a	l		
b	Prior year adjustments .	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
_	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1	1	I	3	4,901,184
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	40			
a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII)	4a 4b			
	Add lines 4a and 4b	_ 70		4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18))		5	4,901,184
Part	XIII Supplemental Information.				
	le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV, I	ines 1b and 2b, Pa	rt V, line	4, Part X, line
2, Pai	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to pro	ovide ar	iy additional informa	ation	
Part X	Line 2 FIN 48 FOOTNOTE Hand in Hand is organized as an Oregon nonprofit	:			
corpa	ation and have been recognized by the Internal Revenue Service (IRS) as exer	npt from	l 		
		_			
federa	il income taxes under IRC Section 501(a) as an organization described in Intern	al			
Davis	our Code (IDC) Section 501/a)/3) qualify for the aboutable contribution deduction				
Reve	nue Code (IRC) Section 501(c)(3), qualify for the charitable contribution deduction	211			
under	IRC Sections 170(b)(1)(A)(vi) and (viii), and have been determined not to be a				
under	The deciding the (b)(t)(t)(t)(t)) and (till), and have been determined not to be a			~	
privat	e foundation under IRC Sections 509(a)(1) and (3) respectively. The entity is				
~					
annua	illy required to file a Return of Organization Exempt from Income Tax (Form 990) with		*	
the IR	S In addition, the entity is subject to income tax on net income that is derived				
from I	ousiness activities that are unrelated to their exempt purposes. We have determ	ined			
that th	e entity is not subject to unrelated business income tax and have not filed an				
uiai ii	e entity is not subject to unrelated business income tax and have not nied an				
Exem	pt Organization Business Income Tax Return (Form 990-T) with the IRS. An ent	ity files			
-20911	The state of the s				
an Ex	empt Organization Business Income Tax Return (Form 990-T) with the IRS to re	port its	• • • • • • • • • • • • • • • • • • • •	~	
unrela	ted business taxable income			_	

Schedule D (For	rm 990) 2018	Hand in Hand American Friends of the Center for Jewish-Arab Education in Israe 93-1269590	Page 5
Part XIII	Suppleme	ental Information (continued)	
			-
	• • • • • • • • • • • • • • • • • • •		
			
			-
			
		•••••••••••••••••••••••••••••••••••••••	
· ·			

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047 201

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990.

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

Hand in Hand American Friends of the Center for Jewish-Arab Education in Israel

Employer identification number 93-1269590

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part İ Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to X Yes award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of (e) If activity listed in (d) is (f) Total (c) Number of (d) Activities conducted in the (a) Region employees, region (by type) (such as, a program service, expenditures for offices in the describe specific type of and investments region agents, and fundraising, program services, independent investments, grants to recipients service(s) in the region in the region contractors located in the region) in the region Middle East and North grants to recipient in the (1) Africa 0 region 4,466,000 Middle East and North summer camp program service Africa 11,733 0 Middle East and North website, materials (3) Africa production, social media 8,561 0 (4) (5) (6) (7) (8) (9) (10) (11) (12)(13) (14)(15) (16) (17)4.486,294 0 3a Subtotal **b** Total from continuation 0 0 sheets to Part I

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4,486,294

c Totals (add lines 3a and 3b)

Hand in Hand American Friends of the Center for Jewish-Arab Education in Israel (Form 990) 2018

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

(a) Name of organization	(b) IRS code section and EiN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	school support & community outreach	4,466,000	wire transfer ,	0. ,	1	,
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(16) (The second of the second		•				-		. ,
Enter total numb	ber of recipient c	2 - Enter total number of recipient organizations listed abov	ve that are recognized as	as charities by the	ve that are recognized as charities by the foreign country, recognized as tax-exempt	nzed as tax-exempt	•	4

Enter total number of other organizations or entities

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

Part III.

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

Schedule F (Form 990) 2018 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (18) **a** (2) 9 9 (12) (13) (15) (16) (17) Ξ 2 ව 9 8 **6** £

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)	X 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	X 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	X 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	X 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	X 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	X No

Schedule F (Form 990) 2018

Part V S

Supplemental Information

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

Part I Line 2 GRANT MONITORING AFHIH is a "Friends of" organization for the Center for
Jewish-Arab Education in Israel AFHIH requires the Israel Center to submit quarterly
reports on the use of all grant funds (a general report for general funds, or a more
detailed report on the project if for project support) Included in this is an evaluation
of the success and impact of programs and projects. In addition, the Executive Director of
AFHIH has regular phone calls with the staff in Israel, including weekly or biweekly calls
with the Executive Director in Israel, and reviews print and online articles about the
school

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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.

Name of the organization

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

OMB No 1545-0047
2018

Open to Public Inspection

Hand in Hand American Friends of the Center for Jewish-Arab Education in Israel 93-1269590 Form 990, Part III, Line 2 NEW PROGRAM SERVICES One new service program that was supported by grants to Israel is the work being done in preschools and elementary schools that are not part of the Hand in Hand network. Through our grants we are supporting new multicultural curriculum and staff training for non-Hand in Hand teachers so that they can introduce Arabic-Hebrew bilingual programs in their schools Form 990, Part VI, Section B, Line 11b 990 REVIEW PROCESS The Executive Director and the Secretary review the draft with the preparer The final draft is emailed to the entire board to review before filing. If any board member has comments or questions, they contact the Executive Director and the Board Chair to schedule a discussion Form 990, Part VI, Section B, Line 12c CONFLICT OF INTEREST POLICY MONITORING The conflict of interest policy covers officers, directors, and members of committees with board delegated powers The determination of whether a conflict exists is made at the board or board committee level The interested person will leave the meeting while the remaining members of the board or committee determine if a conflict exists. If it is determined that a conflict of interest exists, the following procedures apply 1. The interested person may make a presentation to the governing board or committee, but, after the presentation, s/he shall leave the meeting for the discussion of and the vote on the arrangement or transaction 2 The chair person of the governing board or committee shall, if appropriate , appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement 3. After exercising due diligence, the board or committee shall determine whether AFHIH can obtain with reasonable efforts, a more advantageous transaction or arrangement that would not give rise to a conflict of interest 4. If a more advantageous arrangement is not possible, the governing board or committee shall determine by a majority vote of the disinterested directors whether the arrangement is in the best interest of AFHIH, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination, AFHIH shall decide whether to

enter into the transactor or arrangement

Schedule O (Form 990 or 990-EZ) (2018)	Page	2
Name of the organization	Employer identification number	
Hand in Hand American Friends of the Center for Jewish-Arab Education in Israel	93-1269590_	
Form 990, Part VI, Section B, Line 15 EXECUTIVE COMPENSATION The process for changes	to	
compensation of executive employees included comparison of salaries of similar employees in		
other non-profit organizations, and discussion on part of the Board with the decision made by	·	
the Board as a whole		
Form 990, Part VI, Section C, Line 19 DISCLOSURE Financial statements are available upon		
request Requests for other documents are considered on a case-by-case basis		
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