OMB No 1545-0047

Return of Organization Exempt From Income Tax

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

2019

Form 990 (2019)

Open to Public

(Rev January 2020).

Department of the Treasury Sinternal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public. Inspection ▶ Go to www.irs.gov/Form990 for instructions and the latest information. 20 2019, and ending For the 2019 calendar year, or tax year beginning D Employer identification number Check if applicable C Name of organization Yehuda & Anne Neuberger Foundation, Inc. 27-1040796 Doing business as Address change E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite Name change 410-727-4828 101 West Mount Royal Avenue Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Baltimore, MD 21201-5708 G Gross receipts \$ 1.220.034 Amended return H(a) is this a group return for subordinates? Yes X No Application pending F Name and address of principal officer H(b) Are all subordinates included? Tyes No 4947(a)(1) or If "No," attach a list (see instructions) Tax-exempt status X 501(c)(3) 501(c) () ◀ (insert no) Website: ▶ H(c) Group exemption number ▶ Form of organization X Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation 2009 M State of legal domicile MD Summary Part I Briefly describe the organization's mission or most significant activities The Foundation was created to carry out the charitable, educational and religious purposes of The Associated Jewish Community Federation of Baltimote, Inc. (The Associated) Activities & Governance The Foundation makes grants to public charitable organizations in furtherance of the mission of The Associated Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 2 Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part W. line-1b 4 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) RECEIVED 5 0 5 6) 6 Total number of volunteers (estimate if necessary) 5 Total unrelated business revenue from Part VIII, column (C), line 12 7a JUL 1 5 2020 7.b Net unrelated business taxable income from Form 990-T, line 39 Prior-Yea **Current Year** OGDEN, UT Contributions and grants (Part VIII, line 1h) 8 185,000 Revenue 9 Program service revenue (Part VIII, line 2g) 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,035,034 10 1,128,776 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,220,034 12 1,128,776 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1,925,000 601,000 13 Benefits paid to or for members (Part IX, column (A), line 4) . 14 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part iX, column (A), lines 11a-11d, 11f-24e) 11,984 3,864 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 1,936,984 604,864 18 Revenue less expenses Subtract line 18 from line 12 (808,208) 615,170 19 Assets or Balances Beginning of Current Year End of Year SCANNED MAY 2 4 202 Total assets (Part X, line 16) 20 47,614,091 48,266,049 21 Total liabilities (Part X, line 26) 0 Net A Net assets or fund balances Subtract line 21 from line 20 22 47,614,091 48,266,049 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge, and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on-all any knowledge 7/8/20 Sign offid Signature of 333 Q **1 5** 2020 Here Marc B President errill Type or print name and title Preparer's signature OGDEN. Print/Type preparer's name Check I if **Paid** self-employed Preparer Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		<u> </u>
_	The Foundation was created to carry out the charitable, educational and religious purposes of The Associated Jewish Commun	itv	
	Federation of Baltimore, Inc. (The Associated). The Foundation makes grants to public charitable organizations in furtherance		
	mission of The Associated		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	☐ Yes	🗓 No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		_
	services?	☐ Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocated the total expenses, and revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 601,000 including grants of \$ 601,000) (Revenue \$		· · · · · -
44	Provide grants to public charitable organizations in furtherance of the mission of The Associated Jewish Community Federation		
	of Baltimore, Inc		
			.
	•		
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	·		
	······································		
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
		- 	
			••
4d	Other program services (Describe on Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)		
4e	Total program service expenses ▶		601,000

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a	Did the organization maintain an office, employees, or agents outside of the officed States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	140		X
b	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		x
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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	ļ	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21 	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

22 bit the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Pain IX, column (A), line 2? If "Yes," compilete Schedule I, Parts and III and III and organization are sure "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," compilete Schedule I, Part III and outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and compilete Schedule K If "No," go to line 25a bit to defease any face-exempt bonds." 24b Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any face-exempt bonds? 25c Section 501(q3), 501(q4), and 501(q1)) and 501(q1) organization with a disqualified person during the year? If "Yes," complete Schedule L, Part I II bit the organization wave that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II II bit the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or 3% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV II	Part	V Checklist of Required Schedules (continued)			
Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization swern "Yes" to Part IVI, 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 L Part IVI and the was issued after December 31, 2002? If "Yes," amover lines 24b through 24d and complete Schedule K If "No," go to line 25a 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the lest slay of the year, Intelligence of the organization have a tax-exempt bond susteen than a refunding secrow at any time during the year to defease any tax-exempt bonds. Provided the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part II 25b 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 sprior forms 900 or 990-EZZ If "Yes," complete Schedule L. Part II 25c IVI and the transaction are provided and you of the organization sprior forms 900 or 990-EZZ If "Yes," complete Schedule L. Part III 27b Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or organization endored, substantial contributor or employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28b Arms of the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV 29c Affect of the organization organization receive contributions of art, historical treasures, or other similar assets, or qu				Yes	No
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 \$10,000 as of the last day of the year, think was issued after December 31, 2002? If 'Yes,'' amswer lines 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? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest as in 'on behalf of' issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person unit in the substantial form the pear? If 'Yes,' complete Schedule L. Part I? 25b List the organization and any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L. Part II? 27c Did the organization produce a grant or other assistance to any current or former fifteer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L. Part II? 28c Vax to produce the schedule L. Part II? 29c Was the organization expert you be used as separate from the organization contributions? If 'Yes,' complete Schedule L. Part II? 29c Was the organization expert which the produced	22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? C Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization as as an "on behalf of" issuer for bonds outstanding at any time during the year' 25a Section 901(x)3, 501(x)4, and 501(x)29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year. "Yes," complete Schedule I, Part I' b is the organization aware that it engaged in an excess benefit transaction with a disqualified person outling the year." "Yes," complete Schedule I, Part I' Did the organization report any amount on Part X. line 5 or 22, for receivables from or payables to any current or former officer, fursice, they employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?" If "Yes," complete Schedule I, Part II' Did the organization reported a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule I, Part II' Was the organization aparty to a business transaction with one of the following parties (see Schedule I, Part IV' A Simple Schedule I, Part IV' Was 'complete Schedule I, Part IV' Was 'complete Schedule I, Part IV' This trustions, for applicable filing thresholds, conditions, and exceptions) A current of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule II, Part IV' Was 'complete Schedule I, Part IV' This trustion of any individual described in line 28a or 28b? If "Yes," complete Schedule II II' Did t	23	organization's current and former officers, directors, trustees, key employees, and highest compensated	23	x	
\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. "I'\" No" og to the 25e b	242			<u> </u>	
b Did the organization inwest any proceeds of fax-exempt bonds beyond a temporary period exception? C Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any fax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 258 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I b Is the organization and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule I., Part I and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule I., Part II and that the transaction report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contribution or employee thereof), a grant selection committee member, or to a 35% controlled entity foncluding an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I., Part II VI instructions, for applicable filing thresholds, conditions, and exceptions. A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule I., Part IV 28	17 0	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24a		Х
to defease any tax-exempt bonds? d Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization access benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I is is the organization averaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I., Part II of the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of ramily member of any of these employee, creator or founder, substantial contributor or employee thereot, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part II or instructions, for applicable fling thresholds, conditions, and exceptions) A current or former officer, director, trustee, key employee, creator or founder or founder, or substantial contributor? If "Yes," complete Schedule L. Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part II 31 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part II 32 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part II 33 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part II 34 Was the organization inducate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M. Part II 35 Did the orga	b		24b		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I 25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I., Part II 25b X	С	to defease any tax-exempt bonds?			
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 spore or year, and that the transaction has not been reported on any of the organization spore forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I and the transaction has not been reported on any of the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof), or family member of any of these persons? If "Yes," complete Schedule L, Part III. 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule N, Part II b A family member of any individual described in line 28a? If "Yes," complete Schedule N, Part II b A family member of any individual described in line 28a? If "Yes," complete Schedule N, Part II b A family member of any individual described in line 28a? If "Yes," complete Schedule N, Part II b A family member of any individual described in line 28a? If "Yes," complete Schedule N, Part II b A family member of any individual described in line 28a individual described in line 28a indivi	d		24d		
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III The second of the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I., Part III Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule I., Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV Did the organization receive more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule I., Part IV Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II Did the organization on vions 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 II, III, or IV, and Part V, line 1 Did the organization related to any tax-exempt or taxable	25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26	b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b	:	X
employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part III IV instructions, for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization higuidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 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 II, III, or IV, and Part V, line 1 To the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 To the organization orduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2 To the organization complete Schedule R, Part V, line 2 To the organization complete Schedule R, Part V, line 2 To the organization complete Schedule R, Part V, line 2 To the organization complete Schedule R, Part V, line 2 To the organization complete Schedule R, Part V, line 2 To the organization complete Schedule R, Part V, line 2 To the organization complete Sched	26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		X
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV Instructions, for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Part I and the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I are 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 II, III, or IV, and Part V, line 1 35a Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35b Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501c()(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization? If "Yes," complete Schedule R, Part V, line 2 38 Did the organization complete Schedule R, Part V, line 2 39 Did the organization of conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2 39 Did the organization of con	27	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		х
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19° Note: All Form 990 filers are required to complete Schedule O Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19° Note: All Form 990 filers are required to complete Schedule O Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable De Enter the num	28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 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 32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 Ly 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Lif "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization complete Schedule R, Part V, line 2 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 59 Did the organization comply with backup withholding r	а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		X
#Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 III, or IV, and Part V, line 1 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35c Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI III and 19° Note: All Form 990 filers are required to complete Schedule O The organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19° Note: All Form 990 filers are required to complete Schedule O Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization c	b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
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conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Inne 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Inne 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Inne 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Table Total Tenter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and	29		29		X
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23 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-37 if "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and		-	31		X
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or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and	33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Test No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and		or IV, and Part V, line 1	_	Х	<u>v</u>
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and	35a		35a		_ X
related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 10 Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable be Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and complete Schedule D in the series of the serie	b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and	36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and	37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	_	X
Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and		19? Note: All Form 990 filers are required to complete Schedule O	38	X	
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and	Part				
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and		Officers in Confedence of Containing a responde of flotte to any line in the flotte of		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and	1a	——————————————————————————————————————			
	b				
	С		1c		

Fart	Statements Regarding Other IRS Finings and Tax Compliance (Continued)								
_	The state of the s	Yes No							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return 2a								
	Otatomorto, mod for the edichad year enemy with a firm the year events of	2b							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?								
0-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3a X							
b		30							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a X							
L	If "Yes," enter the name of the foreign country								
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)								
E.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a X							
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b X							
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c 1							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
6a	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 contributions or								
	gifts were not tax deductible?	6b							
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 goods and services provided to the payor?	7a X							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	required to file Form 8282?	7c X							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
е									
f									
g									
h	· · · · · · · · · · · · · · · · · · ·								
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?								
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter	三等 對此日韓							
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter								
а	Gross income from members or shareholders								
b	Gross income from other sources (Do not net amounts due or paid to other sources								
	against amounts due or received from them)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O								
þ	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								
С	Enter the amount of reserves on hand								
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 on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15 X							
	If "Yes," see instructions and file Form 4720, Schedule N								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16 X							
	If "Yes," complete Form 4720, Schedule O	713 2							

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 to response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change								
	Check if Schedule O contains a response or note to any line in this Part VI				X				
Secti	on A. Governing Body and Management								
		ر ایدا		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 6							
	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 on Schedule O								
b	Enter the number of voting members included on line 1a, above, who are independent	1b 5							
b									
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?		2	X					
3	Did the organization delegate control over management duties customarily performed by or								
	supervision of officers, directors, trustees, or key employees to a management company or o		3		X				
4									
5 6	Did the organization have members or stockholders?	JII 5 assets	5	X	X				
_	Did the organization have members, stockholders, or other persons who had the power to	elect or appoint	<u> </u>						
7a	one or more members of the governing body?		7a	Х					
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?	l by) members,	7b	X					
8	Did the organization contemporaneously document the meetings held or written actions un	dertaken during							
	the year by the following								
а	The governing body?		8a	X					
b	Each committee with authority to act on behalf of the governing body?		8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be a supplyed and seed and see		9		37				
Socti	the organization's mailing address? If "Yes," provide the names and addresses on Schedule on B. Policies (This Section B requests information about policies not required by the		_	nde l	X				
Section	on B. Policies (This Section B requests information about policies not required by the	e internal rever	<i>uc</i> 0	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?		10a		X				
ь	If "Yes," did the organization have written policies and procedures governing the activities o	f such chapters							
•	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	X					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12b						
С	Did the organization regularly and consistently monitor and enforce compliance with the	policy? If "Yes,"							
	describe in Schedule O how this was done		12c						
13	Did the organization have a written whistleblower policy?		13		X				
.14	Did the organization have a written document retention and destruction policy?		14		X				
15	Did the process for determining compensation of the following persons include a review and independent persons, comparability data, and contemporaneous substantiation of the deliberation								
а	The organization's CEO, Executive Director, or top management official		15a		Х				
b	Other officers or key employees of the organization		15b		X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim with a taxable entity during the year?	llar arrangement	16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization								
	participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?	to safeguard the	16b						
Secti	on C. Disclosure		1		,				
17	List the states with which a copy of this Form 990 is required to be filed ▶ Nonc			-					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable								
	(3)s only) available for public inspection. Indicate how you made these available. Check all that \square Own website. \square Another's website. \square Upon request. \square Other (explain on Section 2).	t apply chedule O)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing doci and financial statements available to the public during the tax year				OIICY				
20	State the name, address, and telephone number of the person who possesses the organization Marilyn Loux 101 West Mount Royal Avenue Baltimore, MD 21201	on's books and re	cords	>					

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

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

X

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

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

Check this box if neither the organization no	or any relate	d org	anız	_		ompe	ensa	ted any current	officer, director,	or trustee
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	offic Individua	unles	Pos neck ss pe	rson	e that highest compensated	n an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Marc B Terrill	15					ă				
President and Public Director	40 0	х		x				0	588,356	191,200
(2) Yehuda Neuberger Vice President and Donor Director	15	Х		х				0	0	0
(3) Anne Neuberger	15									
Secretary/Treasurer and Donor Director		X		X	ļ <u> </u>		L_	0	0	0
(4) Bruce Sholk	15									_
Public Director		X		\vdash			-	0	0	0
(5) Genine Macks Fidler Public Director	15	X						0	0	0
Public Director (6) Lawrence M Katz	15							<u>-</u>	· · · · · ·	
Public Director	1	X		l				. 0	Q	0
(7)										
(8)					-					
(9)										
(10)										
(11)			<u>-</u>							
(12)										
(13)						<u></u>				
(14)							 -			

Part	VII Section A. Officers, Directors,	rustees,	Key I	Eml	oloy	yee	s, an	d F	lighest Compe	nsated	Emplo	yees (contu	าued)
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	office Individual	unles	Pos neck ss pe	rson	e that sort Highest compensated employee	oth an Reportable compensation		from related organizations		(F) Estimated ami of other compensation from the organization arelated organization.		ion and
(15)												•		
(16)														
(17)									 					
(18)														
(19)														
(20)		-										<u></u>		
(21)														
(22)														
(23)														
(24)														
(25)														
С	Subtotal Total from continuation sheets to Part	VII, Sectio	n A				<u>L</u>	<u> </u>	0		588,356			91,200
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (including but		to th	ose	lıst	ed	above	e) w	ho received more		588,356 00,000	of	1'	91,200
	reportable compensation from the organ	zation >							 				Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete							mpl	loyee, or highes	t compe	ensated	3		<u>x</u> .
4	For any individual listed on line 1a, is the organization and related organizations individual												X	
5	Did any person listed on line 1a receive of for services rendered to the organization									ion or inc	dıvıdual	1		<u>~</u>
Secti	on B. Independent Contractors	11 163, 6	,ompi	CIC	007	1001	10 0 1	0, 3	sacri persori					
1	Complete this table for your five high compensation from the organization Rep													
	(A) Name and business add		54101	51				,,,	(B) Description of serv			(C)		<u>, 501</u>
None														
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed above	e) who				

F 04	00 (0040									, Dono C
	90 (2019 VIII	Statement of Rev	Anu							Page
rait	VIII	Check if Schedule	•		spon	se or note to ar	IV line in this Pa	rt VIII	,	
	. "	·	-		, ,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	, (D) Revenue excluded from tax under sections 512–514
ants	1a b	Federated campaign	ns	,	1a 1b		unidadamas iin uu vuon en			ւրայուրայան է Իրանիայան դեպասար
S, Gr	C	Fundraising events Related organization			1c 1d		aurimpin) finifikiti (Teerimen j			a radiologie zwiekow w rad mod
ᄪ	d	Government grants		ributions)	1e					
i, iE	٠.	All other contribution			16				200	
utior ier S	' 1	and similar amounts no			1f	185,000	r om en en de de particular La come en en de de de particular de		ne ne accommonation de la commonation della comm	ардиналионда, Чийиновой И
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributio	ns in	cluded in	1g	\$	ka etti martii tan martii ta		handakentamananarketeke jalan	managara managan pangan 1700
ပ္က ၕ၂	h	Total. Add lines 1a-	1f			>	185,000			
e S	2a	- 1		1	-	Business Code	unitati in	TANDARAMAN CANDONICATION		
ان څَـ	b									
S ⊑	С								-	
Program Service Revenue	d							,		
Pg S	е									
<u>r</u>	f	All other program se		revenue					STREAM LATE OF NOT	18.0%&500000000000000000000000000000000000
	g	Total. Add lines 2a-				<u> </u>	0		\$ 100 m	
	3	Investment income other similar amount	ls)			•	1,035,962			1,085,86
	4 5	Income from-investm Royalties	nent o	of tax-exem	npt-bo	nd-proceeds-► ►	,			
	•	'		′ (i) Rea	١ .	(ii) Personal .		and the second second	n il distinguished a natur sin	
	6a	Gross rents	6a						建筑 个水流	
	b	Less rental expenses	6b					abondania maraka		To the Verminanian and Angel
	С	Rental income or (loss)		<u> </u>	0	0	Toron da jih di jijik kidan 24 (ar your way and a second second	网络	Ablandennam
	d	Net rental income or	(los			6) Other	0	?*************************************		
	7a	Gross amount from sales of assets	7.	(i) Securit		(ii) Other		About de la contraction de la	and the second s	The second secon
a le	b	other than inventory Less cost or other basis	7a 		(928)					
Ver	_	and sales expenses	7b 7c		(000)	. 0	and the second second second		and a Sitile remaining of participating and	
&	c d	Gain or (loss)	-/-		(928)	<u> </u>	(928)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	<u> </u>	(02)
Other Revenue	8a	Gross income from		ndraising		, ,	#40000mmin.in		ŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢŢ	uuniteeningaaningaaningaaningaaningaaningaaningaaningaaningaaningaaningaaningaaningaaningaaningaaningaaningaani
\cdot	*	events (not including) of contributions rep		d on line						4 3
		1c) See Part IV, line		(1 1,111 1111)	8a	. '		7		
	b	Less direct expense		•	8b		alignation to discuss the control of	leading increase days dates youthing the one	and an arrange of the second control	Taran mumbi
	. с	Net income or (loss)		n fundraisin	$\overline{}$	nts 🕨	0		Station Williams	Legaros av.
	9a	` '	rom	gaming	9a	r				
	b	Less direct expense			.9b	<u> </u>				
.	C	Net income or (loss)		n gaming ai		es .	0			and the second s
, ·	10a	Gross sales, of in	vent	•	-				The state of the s	n versa ses ses i hompromitorio.
	. L	returns and allowand			10a 10b	г 1			Complete of the Company of Company	Valley Law Market
٠	b	Less cost of goods Net income or (loss)				orv 🕨	0	CAN S 2000 WHERE WASHING	वेशीकार (१०४४ व की sirdhard रहे हैं 4 % e " है कि	PANTONIO DE LA CANTONIO DEL CANTONIO DEL CANTONIO DE LA CANTONIO DEL CANTONIO DE LA CANTONIO DEL CANTONIO DE LA CANTONIO DEL
		riet income or (ioss)		, 50103 Ut II		Business Code		ANTAL COLLEGE		
aneous enue	11a		•	•			CONTRACTOR OF THE STATE OF THE	WAS END SERVICES	COLLEGE A COLORD A SCHOOL	The second second of the second secon
aneo	b	1 2 1								- 3.12

<u>▶</u>

.1,220,034

d All other revenue

e Total. Add lines 11a–11d

Total revenue. See instructions

Form 9	90 (2019)				Page 10
	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must comp			must complete colu	
	Check if Schedule O contains a response of include amounts reported on lines 6b, 7b, p, and 10b of Part VIII.	e or note to any line (A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
'	and domestic governments See Part IV, line 21	601,000	601,000		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		-		
10	Payroll taxes				
11	Fees for services (nonemployees)				
а	Management				_
b	Legal				
۲ C	Accounting			•	
d e	Lobbying Professional fundraising services See Part IV, line 17				
f	Investment management fees	3,864		3,864	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)		· · · · · · · · · · · · · · · · · · ·	3,000.	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16 17	Occupancy Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization Insurance				
24	Other expenses litemize expenses not covered above (List miscellaneous expenses on line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				- AJ2 , 40A A000-000
_	(A) amount, hat line 24e expenses on schedule (C.)	er neddet i - adutututu Yasut i muu võõ - mi		Mathdaliss, diffuedsockists to hitelefathiologic assuming	nssièssofongmingessessonanggel Delfalkoaggang
a h					

c d

25

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)

3,864

601,000

604,864

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	irt X		
		•	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	<u>,</u>	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	346,768	4	87,512
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	An proposition of the state of	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	8-London market militari di Salamani (1964)
ģ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	· · · ·	8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	0
	11	Investments—publicly traded securities	87,078	11	189,010
	12	Investments—other securities See Part IV, line 11	47,180,245	1	47,989,527
	13	Investments—program-related See Part IV, line 11	()	13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	47,614,091	16	48,266,042
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	anthumination and home to recognize the state of the stat	22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	- 0	26	0
nces		Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.			
la	27	Net assets without donor restrictions	47,614,091	27	48,266,049
Ä	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
S	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund .		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
et	32	Total net assets or fund balances	47,614,091	32	48,266,049
_	33	Total liabilities and net assets/fund balances	47,614,091	33	48,266,049
	C		_		. Form 990 (2019)

Page	1	2
raye		_

Total revenue (must equal Part XII, column (A), line 12) 1 Total revenue (must equal Part XII, column (A), line 25) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 6 Investment expenses 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Other changes in net assets or fund balances (explain on Schedule O) 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990 ☑ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis c If "Yes" to line 2 or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O 3a As a result of a federal award,	Part	XI Reconciliation of Net Assets								
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 3 615,177 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII 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 \(\) Cash \(\) Accrual \(\) Other \(\) If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? \(\) If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both \(\) Separate basis \(\) Consolidated basis, or both \(\) Separate basis \(\) Consolidated basis, or both \(\) Separate basis \(\) Consolidated basis, or both \(\) Separate basis \(\) Consolidated basis \(\) Both consolidated and separate basis \(\) Engenate basis \(\) Consolidated basis \(\) Both consolidated and separate basis \(\) Engenate basis \(\) Consolidated basis \(\) Both consolidated and separate basis \(\) Engenate basis \(\) Consolidated basis \(\) Both consolidated and separate basis \(\) Engenate basis \(\) Consolidated basis \(\) Both consolidated and separate basis \(\) Engenate basis \(\) Consolidated basis \(\) Both consolidated and separate basis \(\) Engenate basis \(\) Consolidated basis \(\) Both consolidated and separate basis \(\) Engenate basis \(\) Consolidated basis \(\) Both consolidated and separate basis \(\) Engenate basis \(\) Engenate basi		Check if Schedule O contains a response or note to any line in this Part XI				•				
Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990 \(\mathbb{N} \) Cash \(\mathbb{A} \) Accrual \(\mathbb{Other} \) The organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both \(\mathbb{Separate basis} \mathbb{Consolidated basis} \mathbb{Distribution} \	1	Total revenue (must equal Part VIII, column (A), line 12)				1,22	20,034			
A Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 11 Accounting method used to prepare the Form 990 \(\text{ Cash} \) \(\text{ Accounting method used to prepare the Form 990 \(\text{ Cash} \) \(\text{ Accounting from a prior year or checked "Other," explain in Schedule O 12 Were the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 13 Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis \(\text{ Consolidated basis} \) \(\text{ Both consolidated and separate basis} \) \(\text{ Vere the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis \(\text{ Consolidated basis} \) \(\text{ Both consolidated and separate basis} \) \(\text{ Consolidated basis} \) \(\text{ Consolidated basis} \) \(\text{ Both consolidated and separate basis} \) \(\text{ Consolidated basis} \) \(Co	2	Total expenses (must equal Part IX, column (A), line 25)	_2			60	4,864			
Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Pror period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990 \(\) Cash \(\) Accrual \(\) Other \(\) Other or or checked "Other," explain in Schedule O Accounting method used to prepare the Form 990 \(\) Cash \(\) Accrual \(\) Other \(\) Other \(\) If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both \(\) Separate basis \(\) Consolidated basis \(\) Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis \(\) Both consolidated and separate basis Or If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis \(\) Both consolidated and separate basis If the organization of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O 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? If "Yes," did the organization undergo the required audit or audits? If the organiz	3	Revenue less expenses Subtract line 2 from line 1	3		615,1					
6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990 \(\) Cash \(\) Accrual \(\) Other \(\) Other \(\) If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis \(\) Consolidated basis, or both \(\) Separate basis \(\) Consolidated basis, or both \(\) Separate basis \(\) Consolidated basis \(\) Both consolidated and separate basis c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis \(\) Consolidated basis \(\) Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on 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? 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 on Schedule O and describe any steps taken to undergo such audits	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))								
7 Investment expenses 7 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 48,266,145 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	5	Net unrealized gains (losses) on investments								
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII 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 \(\text{X}\) Cash \(\text{Accrual}\) Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both \(\text{Sparate basis}\) Consolidated basis \(\text{Dothot}\) Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both \(\text{Separate basis}\) Consolidated basis \(\text{Dothot}\) Both consolidated and separate basis c if "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on 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? 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 on Schedule O and describe any steps taken to undergo such audits	6	Donated services and use of facilities								
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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 2019

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

Yehı	<u>ıda &</u>		Veuberger Foundation,					27-1040796		
Pa	rt I	Rea	son for Public Chai	rity Status (All	organizations must	comple	te this p	art) See instructio	ns.	
The	orgar	nization	is not a private founda	tion bécause it i	s (For lines 1 through	12, chec	k only or	ne box)	<u>`</u>	
1		A churcl	n, convention of church	nes, or associati	on of churches descri	bed in se	ection 17	0(b)(1)(A)(i).)	
2	\Box	A schoo	described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	Z(x)	/	
3			al or a cooperative hos							
4			al research organization						iii). Enter the	
_	_		s name, city, and state	•	,				/	
5			nization operated for t		college or university	owned o	r operate	d by a government	al unit described in	
		section	170(b)(1)(A)(iv). (Comp	olete Part II)					ar unit described ii	
6 7										
8		A comm	unity trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II)				
9		An agne	ultural research organi	zation described	I in section 170(b)(1)	do (xi)(A)	erated in	conjunction with a la	and-grant college	
	(or unive universit	rsity or a non-land-grai y	nt college of agr	iculture (see instruction	ons) Ente	r the nan	ne, city, and state of	the college or	
10	An organization that normally receives (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)									
11			nization organized and							
12			nization organized and						ny out the nurnoses	
17			or more publicly suppo							
			ne box in lines 12a thro							
_				•	* * * * * * * * * * * * * * * * * * * *	-	_			
а	L	the s	e I. A supporting organ supported organization orting organization	(s) the power to	regularly appoint or e	lect a ma	jority of t			
b	, г	Type	H. A supporting organ	nzalion supervis	ed or controlled in co	nnection	with its s	upported organization	on(s), by having	
_	_		rol or management of t							
			nization(s) You must				•		• • • • • • • • • • • • • • • • • • • •	
_	г	•	e III functionally integ	•			onnection	with and functiona	Illy integrated with	
C	_	ıts sı	upported organization(s) (see instructio	ns) You must comp	lete Part	IV, Secti	ons A, D, and E.		
d	L	that	e III non-functionally i is not functionally integ irement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ition requirement and		
e	Ē	. Che	ck this box if the organ tionally integrated, or T	zation received	a written determination	on from th	ne IRS th	at it is a Type I, Type	ılı, Type III	
•				• •	cionally integrated 3dp	oporting (J. 90		1	
'			number of supported one in the contraction of the following information of the following information of the following in the		orted erganization(s)				1	
9						F.,				
	(i) N	ame of su	pported organization	(iı) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
						Yes	No			
7	The ^	L ccoctata	d Javreh							
(A) 🖁	ne A	associate	ed Jewish Gederation of Baltimore	52-0607957	10	X		115,000	0	
	JOHH	numity 1	edetation of Datumore	32-0001931	10			115,000		
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- ota		t C	duction Act Notice	the Instructions f	or Form 000 or 900 E7		A F15*		sm 990 os 990 E7\ 2019	

Part							
	(Complete only if you checked the						alify under
	Part III If the organization fails to	qualify unde	er the tests lis	ted below, p	lease comple	ete Part III)	
	on A. Public Support					_	/_
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f)∕Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	_					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4				<u>/</u>		
	on B. Total Support	 			·		· · · · · · · · · · · · · · · · · · ·
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017/	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4			/			<u></u>
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on		/	/			
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc				661- 1	12	= F01/a\/2\
13	First five years. If the Form 990 is for the organization, check this box and stop he	-	i's first, secon	a, tnira, tourtr	i, or iiπn tax y	ear as a section	n 501(c)(3) ► □
Socti	on C. Computation of Public Suppor		· · · · · · · · · · · · · · · · · · ·	•			
14	Public support percentage for 2019 (line			1 column (f))		14	%
15	Public support percentage from 2018 Sch			1, coldiiii (i))		15	%
16a	331/3% support test—2019. If the organi			on line 13, ar	nd line 14 is 33		
	box and stop here. The organization qua						▶ □
b	331/3% support test—2018. If the organithis box and stop here. The organization					ıs 33 ¹ /3% or m	ore, check
17a	10% -facts-and-circumstances test—2 10% or more, and if the organization meets the organization	ets the "facts facts-and-circ	-and-circumstaumstances" te	ances" test, cl est The organi	neck this box a zation qualifies	and stop here s as a publicly	. Explain in supported ▶ □
b	10%-facts-and-circumstances test—2: 15 is 10% or more, and if the organization resupported organization Private foundation. If the organization defined as a second secon	ation meets the meets the "fac	e "facts-and-d ts-and-circum: 	circumstances stances" test.	" test, check The organizati	this box and some on qualifies as	stop here. s a publicly ► □
18	instructions	u not check a	DOX ON HITE 13	, 10a, 10b, 17c	a, or iro, cnec	R UIIS DUX AIIU	▶ □
_	matructions /	<u> </u>					

Schedule A (Form 990 or 990-EZ) 2019

Part	(Complete only if you checked the lifthe organization fails to qualify	ne box on line	e 10 of Part I	or if the orgai			nder Part II
Secti	on A. Public Support	under the te	sts listed bei	Jw, piease cc	implete rait	'''./	/
	dar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	(4) 2010	(3) 2010	(9) 20		(0,000	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 `	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						,
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons			/			
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			. /			
с 8	Add lines 7a and 7b Public support. (Subtract line 7c from line 6)					y	
	on B. Total Support		/			r	T
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016/	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI).						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop he	re		d, third, fourth	, or fifth tax y	ear as a section	on 501(c)(3) ► □
	on C. Computation of Public Suppor					145	· · · · · · · · · · · · · · · · · · ·
15 16	Public support percentage for 2019 (line 8 Public support percentage from 2018 Sct	nedule A, Part	III, line 15	13, column (f))	•	15	<u>%</u>
	on D. Computation of Investment In			audina 40 aada		47	0/
17 18 19a	Investment income percentage for 2019 (Investment income percentage from 2018 331/3% support tests—2019. If the organ 17 is not more than 331/3%, check this box	Schedule A, ization did not	Part III, line 17 check the box	k on line 14, a	nd line 15 is m		
b	33 ¹ / ₃ % support tests—2018. If the organize line 18 is not more than 33 ¹ / ₃ %, check this	ation did not d	heck a box on	line 14 or line	19a, and line 16	s is more than	33 ¹ /3%, and
20	Private foundation. If the organization di						_

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

- 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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Part	Supporting Organizations (continued)		V	NI.
	in the state of the state of the following paragraph	\$200m*490	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		2. 244 3.455.54	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	144 a	Elec G	X
		11a		X
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		X
Secti	on B. Type I Supporting Organizations			
		285	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	23.		
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	33.	70 300	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year			5. CA
	•	1	X	4.841.253
2	Did the organization operate for the benefit of any supported organization other than the supported		\$.XX	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	NO.		W. 44
	supervised, or controlled the supporting organization	2	X	
Secti	on C. Type II Supporting Organizations			
		777	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1.00 (A)	· · · · · · · · · · · · · · · · · · ·	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	40,32740		
	or management of the supporting organization was vested in the same persons that controlled or managed	ni i		
	the supported organization(s)	1		
Secti	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	The same		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	- A		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		1000	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	333		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	20 86.7		
	significant voice in the organization's investment policies and in directing the use of the organization's	12		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	1 22 ×	2000	
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ctions	s)
а	☐ The organization satisfied the Activities Test Complete line 2 below			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity is	(see ın:	struct	ions)
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	200		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	179		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		200	
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	3		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	(1.3%) (1.3%)		
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	1)(3A) 2)	477	200
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? Provide details in Part VI .	3a	السطائدة السا	Sincial Control
1.		Ja	75n. 2	1 2 1 1 2
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
	TO US SUBDICIDED CALISTICATIONS IL 163. DESCRIPE ILLI DIL VILLE TUE VIDVEU UV UIG VIVONAGIONI IL ILLI ILGIO IC			

instructions)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Function	gani	izations	, age t
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		,
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		<u> </u>
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	1	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	1 7	· ————————————————————————————————————	
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	y int	egrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally integrated 509(a)(3	Supporting Organ	zations (continued)	
Secti	on D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity		orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	inizations	
4	Amounts paid to acquire exempt-use assets	-	1	
5	Qualified set-aside amounts (prior IRS approval required)			h ,
6	Other distributions (describe in Part VI) See instructions	,		
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to whic (provide details in Part VI) See instructions	h the organization is res	sponsive	- 15
9	Distributable amount for 2019 from Section C, line 6			,
10	Line 8 amount divided by line 9 amount	4		
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2019		4 (4.00)	
a	From 2014			
_b	.From 2015	1.2 = 5.345		有。据得 其
С	From 2016	为是一人的		
d	From 2017			
е	From 2018 .		and the second	
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			4
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2019 from Section D, line 7 \$			
<u>.</u> a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			E. WOODSHIELD CO. O'S COMMISSION OF STREET BOOKS OF SCHOOL SECTION OF STREET
C	Remainder Subtract lines 4a and 4b from 4		4.0	
5	Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions			
6	Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions		700 7000	,
.7	Excess distributions carryover to 2020. Add lines 3j and 4c			
8	Breakdown of line 7			
а	Excess from 2015	THE SECOND SECOND		PAGE 1
, p	Excess from 2016	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		100
- с	Excess from 2017	A 10 A 2	The state of the s	设置 基金基 厚
d	Excess from 2018		POWER .	
- е	Excess from 2019	The state of the s		

III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)
Part IV, Section A, Line 6 -
The Supported Organization works to preserve and enhance Jewish Life It addresses charitable, educational, religious, humanitarian,
health, cultural and social service needs of the Jewish community locally, nationally, in Israel and throughout the world. In furtherance
of that mission, the Supported Organization encourages families to establish supporting organizations in partnership with it, in
order to engage interested donors and succeeding generations in philanthropic pursuits and enhance both the Jewish and
general communities in keeping witht he Jewish tradition of repairing the world All grants are made to tax-exempt
charitable organizations registered with the Internal Revenue Service
Part IV, Section B, Line 2 -
Grants to organizations, other than the Supported Organization, are made at the discretion of the Board of Directors of the Supporting
Organization and are made in furtherance of the mission of the Supported Organization to support Jewish, cultural, educational
and social justice work
•••••

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of organization

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

Section 501(c)(4), (5), or (6) organizations Complete Part III

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

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

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

	a & Anne Neuberger Foun		- 44-	27-104079	
Part		e organization is exempt und			
1	Provide a description of definition of "political can	the organization's direct and incompaign activities")	direct political cai	mpaign activities in P	
2	Political campaign activity	y expenditures (see instructions)		•	\$
3		cal campaign activities (see instruc			
Part		e organization is exempt und			
1		excise tax incurred by the organiza			\$
2		excise tax incurred by organization			\$
3		ed a section 4955 tax, did it file For	m 4720 for this ye	ar?	Yes No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part			· · · · · · · · · · · · · · · · · · ·	
Part		e organization is exempt und			01(c)(3).
1	activities	ly expended by the filing organiz		•	\$
2	527 exempt function activ		_	•	\$
3	Total exempt function e line 17b	expenditures Add lines 1 and 2	Enter here and	on Form 1120-POL,	\$
4	Did the filing organization	i file Form 1120-POL for this year	? .		∐ Yes No
5	organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, on intributions received that were pro- fund or a political action committee	enter the amount property	paid from the filing organication delivered to a separate	anization's funds. Also enter e political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2019

Pa	rt l	II-A	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and file	d Form 5768 (ele	ection under
A	Ch	eck 🕨		s to an affiliated group (and list in Part IV each affi	liated group memb	er's name,
		•	· · · · · · · · · · · · · · · · · · ·	hare of excess lobbying expenditures))
В	Ch	eck 🕨	☐ if the filing organization checked	ed box A and "limited control" provisions apply		
			Limits on Lobby	ring Expenditures	(a) Filing	(b) Affiliated
			(The term "expenditures" me	ans amounts paid or incurred.)	organization's totals	group totals
1	а	Total le	obbying expenditures to influence i	public opinion (grassroots lobbying)		
	b	Total le	obbying expenditures to influence a	a legislative body (direct lobbying)	100,000	
	С	Total le	obbying expenditures (add lines 1a	and 1b)	100,000	
	d	Other	exempt purpose expenditures		501,000	
	е	Total e	exempt purpose expenditures (add	lines 1c and 1d)	601,000	
	f	Lobby	ing nontaxable amount. Enter the	he amount from the following table in both		
	_	colum	ns .		115,150	
		If the a	mount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	L	Not ove	r \$500,000	20% of the amount on line 1e		
	L	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	L	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	L	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
			7,000,000	\$1,000,000	7.4	
	g	Grassr	oots nontaxable amount (enter 25%	% of line 1f)	28,788	
	h	Subtra	ict line 1g from line 1a. If zero or les	ss, enter -0-	0	
	i	Subtra	ct line 1f from line 1c If zero or les	s, enter -0-	0	
	j		e is an amount other than zero on greation 4911 tax for this year?	on either line 1h or line 1i, did the organization	file Form 4720	Yes No
				ar Averaging Period Under Section 501(h)	af tha fire a alum	na halaw

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period											
	Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total					
2a	Lobbying nontaxable amount	287,100	224,000	246,250	115,150	872,500					
b	Lobbying ceiling amount (150% of line 2a, column (e))			NAME OF THE PARTY		1,308,750					
С	Total lobbying expenditures	61,000	115,000	75,000	100,000	351,000					
d	Grassroots nontaxable amount	71,775	56,000	61,563	28,788	218,126					
е	Grassroots ceiling amount (150% of line 2d, column (e))					327,189					
f	Grassroots lobbying expenditures	0	0	0	0	C					

Schedule C (Form 990 or 990-EZ) 2019

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	1 5768		
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	
	aption of the lobbying activity	Yes	No	Aı	mount	t
1 a b	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c d e	Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements?					
g h i	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				_	
j	Total Add lines 1c through 1i		:: <u>```</u>			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			The Marie		
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	<u> </u>				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			156.4		
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), (or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3		L
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."		Part		ine 3	, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?		4			
	Taxable amount of lobbying and political expenditures (see instructions)		5			
5			1 5 1			

Provide the descriptions 2 (see instructions), and			ist), Part II-A, lines 1 and
r			
	4		

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization 27-1040796 Yehuda & Anne Neuberger Foundation, Inc Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure ☐ Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Part									
3	Using the organization's acquisition, collection items (check all that apply)	accession, and ot	her reco	ords, chec	k any of th	e follow	ring that make	significant u	se of its
а	☐ Public exhibition		d	☐ Loan	or exchang	ge prog	ram		
b	☐ Scholarly research								
С	Preservation for future generations	S							
4	Provide a description of the organizar		and expl	ain how t	hev further	the ora	anization's exe	empt purpose	e in Part
-	XIII				.,				
5	During the year, did the organization	solicit or receive	donatio	ns of art	historical ti	reasure:	s. or other sim	ılar	
•	assets to be sold to raise funds rather								☐ No
Part									
T GIV	Complete if the organization 990, Part X, line 21		" on Fo	rm 990, I	Part IV, line	e 9, or	reported an a	mount on F	orm
1a	Is the organization an agent, trustee included on Form 990, Part X?	, custodian or oth	er interr	nediary fo	or contribut	tions or	other assets i	not Yes	□ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	ollowing t	able				
/								Amount	
С	Beginning balance					1c			
d	Additions during the year .					1d			
е	Distributions during the year					1e			-
f	Ending balance					1f			
2a	Did the organization include an amount	nt on Form 990. Pa	art X. line	e 21. for e	escrow or co	ustodiai	account liabilit	tv? ☐ Yes	□ No
	If "Yes," explain the arrangement in P							, –	
Pari							-		
	Complete if the organization	answered "Yes"	" on Fo	rm 990, I	Part IV, line	e 10			
		(a) Current year		or year	(c) Two year		(d) Three years ba	ck (e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
c	Net investment earnings, gains, and losses								
d	Grants or scholarships					•			
e	Other expenditures for facilities and								
_	programs								
f	Administrative expenses					_		1	
g	End of year balance								
2	Provide the estimated percentage of t	he current vear en	nd halan	re (line 1o	L column (a		98		
a	Board designated or quasi-endowmer	-		30 (IIII) 19	,, column (c	ijj ricia t	20		
h	Permanent endowment ►	%	'0						
0	Term endowment ▶ %	/0							
С	The percentages on lines 2a, 2b, and	2c should equal 1	00%						
20	Are there endowment funds not in the			ization th	at are held	and ad	ministered for t	he	
Ja	organization by	e possession or th	ie organ	ization the	at are new	and ad	ininstered for t		es No
	•								25 140
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related o							3b	
4	Describe in Part XIII the intended uses		on s ena	owment	unas				
Part			" - -	000 1	Dard IV / June	- 44 - 9	C	. Dad V I.a	- 10
	Complete if the organization								
	Description of property	(a) Cost or ot (investm		, ,	or other basis (other)		Accumulated preciation	(d) Book v	alue
	 	- lineatin						· · · · · · · · ·	
1a	Land			 					
b	Buildings .								
C	Leasehold improvements								
d	Equipment								
е	Other .								
Total.	Add lines 1a through 1e (Column (d) r	nust equal Form 9	90. Part	X columi	n (B) line 10)c)	▶		

Part VII	'Complete if the organization answered "Yes" on Fo	orm 990 Part IV line	e 11b. See Form	990 Part X line 12
•	(a) Description of security or category	(b) Book value	(c) Met	hod of valuation
	(including name of security)		Cost or end	-of-year market value
(1) Financia				
	neld equity interests			
(3) Other		700 507	F 1 6	
	tment - Jewish Community Investment Funds	-	End-of-year marl	
	ments in Limited Partnerships	47,200,000	Fair market value	<u> </u>
(C) (D)		 		,
(E)				<u> </u>
(E) (F)			•	
(G)				
(-) (H)				
	mn (b) must equal Form 990, Part X, col (B) line 12)	47,989,527		
Part VIII	Investments—Program Related.	11,505,527		
	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	e 11c See Form	990, Part X, line 13
	(a) Description of investment	(b) Book value		hod of valuation
	.,	''	Cost or end	-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				•
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets.	000 0 1 114 1	4410 5	000 5 4 7 4 4 5
	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	e 11d See Form	
	(a) Description			(b) Book value
(1)				
(2)	<u></u>			
(3)				
(4)				
(5)				<u> </u>
(6) (7)	· · · · · · · · · · · · · · · · · · ·			
_(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 15)		•	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	e 11e or 11f See	e Form 990, Part X,
	line 25			
1.	(a) Description of liability			(b) Book value
(1) Federal II	ncome taxes	·		
(2)				
(3)				
(4)				<u>-</u> .
(5)			·-·	
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 25)		<u> </u>	<u> </u>
	r uncertain tax positions. In Part XIII, provide the text of the footi			
organization'	s liability for uncertain tax positions under FASB ASC 740 Chec	ck here if the text of the	tootnote has been	provided in Part XIII

Part	XI Reconciliation of Revenue per Audited Financial Stat	ements With Reven	ue per Return.	
	Complete if the organization answered "Yes" on Form 9			
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	6	
b	Donated services and use of facilities .	2b		
c	Recoveries of prior year grants .	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u> </u>	
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I,		5	
Part	XII Reconciliation of Expenses per Audited Financial Sta	=	ises per Return.	
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 12a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	A			
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
с 5	Add lines 4a and 4b Total expenses Add lines 3 and 4c . (This must equal Form 990, Part		4c 5	
c 5 Part	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information.	I, line 18)	5	t X line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	rt X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	rt X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line
c 5 Part Provid	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1.	I, line 18) a and 4, Part IV, lines 1b	5 and 2b, Part V, line 4, Par	t X, line

SCHEDULE (Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22 Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

► Attach to Form 990.

Employer identification number-

Yehuda &

Part I

Department of the Treasury Internal Revenue Service Name of the organization

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

Nune Neuberger Foundation, Inc.	1040796	
es the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ance, and	
selection criteria used to award the grants or assistance?	⊠ Yes	№

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II

Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	iy recipient that i	received more the	an \$5,000 Part l	II can be duplica	ted if additional s	space is needed	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) The Women's Network for Single Parents 204 Avenue Brooklyn NY 11230	s 20-5555166	501(c)(3)	250,000				Operating Support
(2) The Associated JCFB 101 W Mt Royal Ave Balto MD 21201	52-0607957	501(c)(3)	115,000				Operating Support
(3) American Israel Public Affairs Committee 251 H Street NW Washington DC 20001 53-0217164	e 53-0217164	501(c)(3)	100,000				Operating Support
(4) Bais Yaakov School for Girls 6300 Smith Ave Baltimore MD 21209	52-0613700	501(c)(3)	20,000				Operating Support
(5) Suburban Orthodox Congregation 7504 Seven Mile Lane Balto MD 21208	52-1012261	501(c)(3)	20,000				Operating Support
(6) Talmudical Academy of Balumore 4445 Old Court Rd Balto MD 21208	52-0591676	501(c)(3)	36,000				, Operating Support
(7)	·						
(8)							
(6)							
(10)			3				
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1 501(c)(3) and gov	vernment organiza	ations listed in the li	ine 1 table			9
ב בווכן נסנמ וותווספן טו סנוופן טוקמוובמנוטוא וואפת וון נוופ ווויפ ו נמסים	il gai il zationi s il ster	יוו וווכ וומסוו					

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

Schedule I (Form 990) (2019)

Schedule I (F	Schedule I (Form 990) (2019)					
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed	mestic Individu space is needed	als. Complete if the	organization answ	ered "Yes" on Form 990,	Part IV, line 22
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistan
-						
2						
က						
4						
'n						

The Foundation will request and receive periodic reports and updates from the grantees regarding how grants are utilized, and take such information	Grant requests are reviewed to ensure that they are permissible and in accordance with applicable laws and regulations
	oundation will request and receive periodic reports and updates from the grantees regarding how grants are utilized, and take such information

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

Schedule I (Form 990) (2019)

SCHEDULE J (Form 990)

Compensation Information

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

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

▶ Attach to Form 990.

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

2019

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Yehud	a & Anne Neuberger Foundation, Inc	27-1040796			
Part	Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regard	ing these items			
	☐ First-class or charter travel ☐ Housing allowance or residence ☐ Travel for companions ☐ Payments for business use of per ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or init	ersonal residence lation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid	, cnauπeur, cnet)			
b	If any of the boxes on line 1a are checked, did the organization follow a written poli- or reimbursement or provision of all of the expenses described above? If "No," explain		1b		
•			Ý.	346	335
2	Did the organization require substantiation prior to reimbursing or allowing expedirectors, trustees, and officers, including the CEO/Executive Director, regarding the 1a?		2		
				7.50 Gra	
3	Indicate which, if any, of the following the organization used to establish the compensation		EST.		
	organization's CEO/Executive Director Check all that apply Do not check any boxes for related organization to establish compensation of the CEO/Executive Director, but explain			X.	
	☐ Compensation committee ☐ Written employment contract				
	☐ Independent compensation consultant ☐ Compensation survey or study		1 38CV	22	
	Form 990 of other organizations Approval by the board or compe	nsation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with resorganization or a related organization	pect to the filing			
а	Receive a severance payment or change-of-control payment?		4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	X	
С	Participate in, or receive payment from, an equity-based compensation arrangement?		4c	. Te	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for ear	ch item in Part III			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization compensation contingent on the revenues of				
а	The organization?		5a	2000	X
b	Any related organization?		5b	-	X
,	If "Yes" on line 5a or 5b, describe in Part III				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organizatio compensation contingent on the net earnings of	n pay or accrue any			
а	The organization?		6a		X
b	Any related organization?		6b	Same of the	X
	If "Yes" on line 6a or 6b, describe in Part III				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization payments not described on lines 5 and 6? If "Yes," describe in Part III	provide any nonfixed	7	<u>k</u>	Silliani V
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contra	act that was subject	7		X
•	to the initial contract exception described in Regulations section 53 4958-4(a)(3)				
	ın Part III		8	(iii tait	X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption pr	ocedure described in			
	Regulations section 53 4958-6(c)?		9		l .

~ Page ,

Schedule J (Form 990) 2019

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Part II For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(F) Compensation in column (B) reported as deferred on prior Form 990 Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual 779,556 (E) Total of columns (B)(I)–(D) 30,000 (D) Nontaxable benefits 161,200 (C) Retirement and other deferred compensation 20,030 Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, (III) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII 75,000 (ii) Bonus & incentive compensation (ı) Base compensation ΞΞ Ξ \equiv E€ Ξ ≘≘ (€ € E ΞΞ E€ Ξ €€ ≘≘ (E) Ξ |€ € (A) Name and Title 1 Marc B Terrill 5 9 6 7 73 8 က œ 9 4 15 9 £

Schedule J (Form 990) 2019

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this par or any additional information
The Directors of the Yehuda & Anne Neuberger Foundation, Inc. receive no compensation for their services. However, one of the Directors is employed
y the supported entity, The Associated: Jewish Community Federation of Baltimore, Inc. (The Associated) All of the compensation and benefits are
and by The Associated, none of it is attributable to the service as a Director and/or Officer of the Foundation
art I, Line 4b
Marc B Terrill participates in a nonqualified deferred compensation plan. No amounts were vested during the year.
One hundred and fifty thousand dollars (\$150,000) was deferred and 1s included on Form 990, Part VII, Column F and Schedule I, Part II, Column C
A new five-year contract was executed for Marc B Ternil beginning January 1, 2017. The terms and conditions of the deferred compensation
olan are outlined in the contract.

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.

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

OMB No 1545-0047 2019 Open to Public

Inspection Internal Revenue Service Name of the organization Employer identification number Yehuda & Anne Neuberger Foundation, Inc. 27-1040796 Form 990 Part VI, Section A, Line 2 - There are family relationships among the Donor Members and Directors Yehuda Neuberger and Anne Neuberger have a family relationship Line 6 - The organization has two classes of members, a Public Member - The Associated Jewish Community Federation of Baltimore, Inc. and Donor Members consisting of Yehuda Neuberger and Anne Neuberger Line 7a - The Members appoint the Board of Directors The Public Member appoints the majority and Donor Members appoint the remainder Line 7b - Amendments to the Bylaws are subject to change or recission by the Members before they are adopted Form 990 Part VI, Section B, Line 11a - The Form 990 and supporting schedules are distributed to the officers and directors upon completion for review and comments prior to filing Line 12c - The supported organization monitors and enforces the potential of any conflict of interest by regularly reviewing the Board of Directors, its actions and the investment of assets to ensure it complies with the conflict of interest policy of The Associated Line 15 - Marc B Terrill participates in a nonqualified deferred compensation plan. No amouns were paid out during the year. One hundred and fifty thousand dollars (\$150,000) was deferred and is included on Form 990 Part VI, Column F and Schedule J, Part II, Column C. A new five-year contract was executed for Marc B Terrill beginning January 1, 2017. The terms and conditions of the deferred compensation plan are outlined in the contract with The Associated Form 990 Part VI, Section C, Line 19 - The organization makes its governing documents and financial statements available to the public upon request

SCHEDULE R (Form 990)

Yehuda & Anne Neuberger Foundation, Inc

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

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

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

2019

OMB No 1545-0047

Open to Public Inspection Employer identification number

27-1040796

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2019 (f)
Direct controlling
entity Ŷ × Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year Yes (f)
Direct controlling
entity (e) End-of-year assets A/NPublic charity status (if section 501(c)(3)) (d) Total income Identification of Disregarded Entities. Complete of the organization answered "Yes" on Form 990, Part IV, line 33 <u>e</u> (d) Exempt Code section (c)
Legal domicile (state
or foreign country) 501(c)(3) (c) Legal domicile (state or foreign country) Maryland (b) Pnmary activity Exempt organization (b) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1) The Associated Jewish Community Federation of Baltimore, Inc. 101 West Mount Royal Avenue Baltimore, MD 21201 (a)Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization Parti Part II (2) € 8 ල **4** <u>2</u> 9 € 9 0 ପ 3

Part III

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

(k) Percentage ownership							:		irt IV,	(I) Section 512(b)(13) controlled entity?	S No								Schedule R (Form 990) 2019
(j) General or managing partner?	Yes No								on Form 990, Part IV,	(h) Percentage Seciownership	Yes								ule R (Form
(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									d "Yes" on Forr	(g) Share of end-of-year assets own									Sched
(h) Disproportionate allocations?	Yes No	•			ī				answered ar	Share of total income end-									
(g) Share of end-of- year assets									ganization the tax year										
Share of total Sha					-				ete if the or ust during	(e) Type of entity (C corp, S corp, or trust)									
				,				<u> </u>	t. Comple ation or tr	(d) Direct controlling entity									
(e) Predominant income (related, unrelated, excluded from tax under sections 512—514)									n or Trus a corpor				_						
Direct controlling entity se				:					Corporations treated as	(c) Legal domicile (state or foreign country)									
									a ble as a ganization	ctivity									
(c) Legal domicile (state or foreign country)									ons Tax	(b) Primary activity									
(b) Prmary activity									elated Organizati had one or more re	organization									
(a) Name, address, and EIN of related organization		N/A					,		Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" line 34, because it had one or more related organizations treated as a corporation or trust during the tax year	(a) Name, address, and EIN of related organization		N/A							
		£	(2)	<u>6</u>	4	(2)	9	(5)	Ра			5	(2)	<u></u>	4	(5)	(9)	(2)	

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

					Ļ	
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	,	•	! :	-	Sal	o l
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-107	or more related organ	iizations listed in Part	ZAHI S	╬	╬	
a Receipt of (i) interest, (ii) annuties, (iii) royalties, or (iv) rent from a controlled entity				+	十	×
b Gift, grant, or capital contribution to related organization(s)	•		•	1b	×	
c Gift, grant, or capital contribution from related organization(s)			•	10	-	×
d Loans or loan quarantees to or for related organization(s)				1d		$ _{\bowtie}$
				4	ľ	>
e Loans or ioan guarantees by related organization(s)				ש	7	4
				7		þ
t Dividends from related organization(s)		•		=	1	4
g Sale of assets to related organization(s)		•		1g		×
h Purchase of assets from related organization(s)				1	-	×
i Exchange of assets with related organization(s)			-	1i	-	×
i Lease of facilities, equipment, or other assets to related organization(s)				=		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
		•		=		$ _{\bowtie}$
m Performance of services or membership or fundraising solicitations by related organization(s)				13		,×
				2		
			•	+	\	
o snaring of paid employees with related organization(s)				┦	4	
				÷		>
		•		2 ,	1	<u>{</u> ;
q Reimbursement paid by related organization(s) for expenses				19		$_{\!$
				-		×
s Other transfer of cash or property from related organization(s)			•	1s		\bowtie
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	omplete this line, incli	uding covered relation	nships and transaction	on thres	splous	"
(a)	(q)	(c)	(p)			
Name of related organization	Transaction type (a—s)	Amount involved	Method of determining amount involved	ig amount i	involve	20
(1)						
(2)						
16)						
(5)						
(4)						
(5)		,				
***			Schedule R (Form 990) 2019	R (Form 9	990) 2	019

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

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

,			,		ı					
(a) Name, address, and EIN of entity	(b)	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of		(h) Disproportionate	(i) Code V—UBI	(j) General or	, (k) Percentage
		(state or foreign country)	income (related, unrelated, excluded	section 501(c)(3)		end-of-year assets	allocations?	amount in box 20 of Schedule K-1	manağıng partner?	ownership
-			sections 512—514)	Yes No			Yes No	()	Yes No	
(1)										
(2)										
(3)	2 1									
(4)										
(5)					-					
(9)		,								
(2)										
(8)	,									
(6)										
(10)										
(11)										
(12)										
(13)	,									
(14)										
(15)							,			
(16)										
								Sche	dule R (For	Schedule R (Form 990) 2019