# Form **990**

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2018

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Inte	rnal Reven	ue Service	GO to www.iis.gov/i	Form990 for Instructions and	the latest in	ioimation.		inspection
Α	For the	2018 calen	ar year, or tax year beginning	07/01 , 2018	, and ending	06/	30	, 20 19
В	Check if	applicable:	Name of organization JEWISH COMI	MUNITY FOUNDATION OF GR	REATER HAP	RTFORD IN	D Employ	er identification number
	Address	change	Doing business as					06-1372107
	Name ch	nange	Number and street (or P.O. box if mail is	not delivered to street address)	Room/suite		<b>E</b> Telepho	ne number
	Initial ret	urn 3	33 Bloomfield Avenue Suite D					860-523-7460
	Final retur	m/terminated	City or town, state or province, country,	and ZIP or foreign postal code	41			
	Amended	d return	est Hartford, CT, 06117				G Gross re	eceipts \$ 8,213,210
	Application	on pending F	Name and address of principal officer:	JACOB A SCHREIBER		H(a) Is this a gro	up return for	subordinates? Yes 🗹 No
		10	3 BLOOMFIELD AVENUE, SUITE	D, WEST HARTFORD, CT 06	117			s included? Yes No
	Tax-exen	npt status:	✓ 501(c)(3)		Attenues :	If "No," attac	ch a list. (s	ee instructions)
J	Website		tford.org			H(c) Group	exemption	number >
ĸ			Corporation Trust Association	Other ► L Y	ear of formatio	n: <b>1993</b>	M State	of legal domicile: CT
	art I	Summa						
			ribe the organization's mission	or most significant activities	s: The Jew	ish Commu	nity Fou	Indation promotes
ģ			y, manages the Greater Hartford	_				
Activities & Governance			needs and innovations.					PLANTED PROPERTY.
Ĭ.	2		oox ▶☐ if the organization disc	continued its operations or u	disposed of	more than	25% of	its net assets.
ŏ			voting members of the governir				3	15
S.			ndependent voting members o				4	15
Se			er of individuals employed in ca				5	15
V,			er of volunteers (estimate if nec	- · · · · · · · · · · · · · · · · · · ·			6	80
cţi			ted business revenue from Part	• •			7a	34,326
⋖							7b	34,320
_	b	net unreia	ed business taxable income from	II FUIII 990-1, line 36 .		Prior Yea		Current Year
		O = 1 = 1 = 1 = 1 = 1	and events (Dort VIII line 1h)					
ne			ns and grants (Part VIII, line 1h)			5,	164,051	2,477,058
/en	1	_	rvice revenue (Part VIII, line 2g)	0.4	<del>-</del>		0	0 000 000
Revenue			income (Part VIII, column (A), Iir ue (Part VIII, column (A), Iines 5	· ·			722,438	3,962,302
_	1			159,749	172,079			
			e-add lines 8 through 11 (must				046,238	6,611,439
	1		similar amounts paid (Part IX, c			4,	243,126	4,619,600
	1		d to or for members (Part IX, co				0	0
S	15	Salaries, ot	er compensation, employee bene	efits (Part IX, column (A), line:	s 5–10)	1,	324,112	1,388,247
Expenses	16a	Profession	l fundraising fees (Part IX, colur	mn (A), line 11e)			0	0
χĎ	b	Total fundr	ising expenses (Part IX, columr	n (D), line 25) ►4	167,212	0.3413/21	Well Service	
щ	17	Other expe	nses (Part IX, column (A), lines 1	l1a-11d, 11f-24e)	🗀		533,262	537,232
	18	Total expe	ses. Add lines 13–17 (must equ	ıal Part IX, column (A), line 2	25) .	6,	100,500	6,545,079
	19	Revenue le	s expenses. Subtract line 18 fr	om line 12			945,738	66,360
e se					Ве	ginning of Cur	rent Year	End of Year
Net Assets Fund Balanc	20	Total asset	(Part X, line 16)			124,	082,668	124,531,330
d As	21	Total liabili	es (Part X, line 26)			16,	761,746	17,168,151
울춘	22	Net assets	or fund balances. Subtract line:	21 from line 20		107,	320,922	107,363,179
Pi	art II	Signatu	e Block					
Un tru	der penalt	ties of perjury,	declare that I have examined this return Declaration of preparer (other than office	n, including accompanying schedul er) is based on all information of wi	les and stateme hich preparer h	ents, and to th as any knowle	e best of r dge.	my knowledge and belief, it is
_			-41	700			110	6/20
Sig	ın l	Signatu	e of officer			Date	6/6	120
		100	/ /	ID OUISE EVEOUTIVE OFFIC				/
Here  JACOB A SCHREIBER, PRESIDENT AND CHIEF EXECUTIVE OFFIC  Type or print name and title								
			ATOMESON AND AND AND AND AND AND AND AND AND AN	parer's signature	Date		T .	PTIN
Pa	iid	T amo type	Toparer a name	Par or a arginasuro	Date		Check [	if [
Pr	eparei					1	self-emp	pioyed
Us	e Only						s EIN ▶	
		Firm's add		C Vincinia inclusive con	Α	Phor	e no.	Пу П.
Ma	y the IR	S discuss t	is return with the preparer show	wn above? (see instructions	5)		× × ×	Yes No

Part	
1	Check if Schedule O contains a response or note to any line in this Part III
,	•
	The Jewish Community Foundation of Greater Hartford unlocks the trans-formative power of individuals and collective philanthropy
	to address problems, strengthen community organizations, and provide permanent support for the Jewish Community of Greater
	Hartford.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
7	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1,710,681 including grants of \$1,710,681 ) (Revenue \$)
	Community Building (Expenses: \$1,710,681 including grants of \$1,710,681) The Foundation awarded grants, mostly in the Greater
	Hartford area, to support general operations of agencies and programs, meet critical needs for basic human services and support
	core functions in furtherance of the key strategic objectives designed to strengthen the Jewish community. The largest grantee is
	the Jewish Federation of Greater Hartford.
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	A SAME AND A MAN AND AND AND AND AND AND AND AND AND A
4b	(Code: ) (Expenses \$ 779,305 including grants of \$ 779,305 ) (Revenue \$ 0 )
	Human Services and Health (Expenses: \$779,305 including grants of \$779,305). Grants in this program area cover a wide array of
	services. Programs include services for the disabled, food and hunger alleviation, medical research, case management and
	counseling, therapy, sports and recreation. Grantees include Jewish Family Services of Greater Hartford, the Joyce D. and
	Andrew J. Mandell Jewish Community Center and the Jewish Association for Community Living.
	<u></u>
	***************************************
4 :-	(Code) \(\(\text{Compared }\)
4c	(Code: ) (Expenses \$ 855,581 including grants of \$ 855,581) (Revenue \$ 0)
	Education (Expenses: \$855,581 including grants of \$855,581) The Foundation supports numerous institutions whose focus is on
	Jewish education. The largest proportion goes to area Jewish day schools for general operating support, scholarships and
	curriculum enhancement. Other grants include literacy for at-risk youth, supplemental religious school education, college
	scholarships and general support of secular secondary and college institutions. Grantees include Solomon Schechter Day School,
	Bess and Paul Sigel Hebrew Academy, Hebrew High School of New England, Jewish Teen Learning Connection, Children's
	Reading Partners and the Jewish Federation of Greater Hartford's Commission on Jewish Education and Leadership.
	Treating 1 draint 3 drie 3 dwist 1 decreases of dreater transfer 3 dominission of 36Wish Education and Leadership.
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 2
•	(Expenses \$ 2,014,534 including grants of \$ 1,274,140 ) (Revenue \$ 172,079 )
4e	Total program service expenses ► 5,360,101

Part	V 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	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
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		/
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		/
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	1	
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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	1	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V$	10	1	
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		1
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	1	
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		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	1	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		/
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		1
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		1
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		1
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		1
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		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	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	0.1		

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<b>✓</b>	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>✓</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		<b>✓</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>√</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	i erroj Marija		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
24	conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		V
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
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	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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	35b		
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	36		1
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	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part				ببندوا
	Check if Schedule O contains a response or note to any line in this Part V			Ш
	Falsatha association in Box 2 of Form 1000 Falsa 2 Mark and Salar		Yes	No
1a h	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 7  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	100		
b c	Did the organization comply with backup withholding rules for reportable payments to vendors and		F5.2 1	
C	reportable gaming (gambling) with backup withholding rules for reportable payments to vendors and	1c	1	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
			Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		783	20		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 15	1000	5 W.S			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1			
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	ence.	of t	100		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	1			
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		1		
b	If "Yes," enter the name of the foreign country: ▶	cord	1000	5.00		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	81,0				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			Ĺ		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1		
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).	10000		18381		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	985		1100		
	and services provided to the payor?	7a		_		
	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		Const.		
d	If "Yes," indicate the number of Forms 8282 filed during the year	mon	MI S	86		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		-		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		-		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		-		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	na si			
	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the					
	sponsoring organization have excess business holdings at any time during the year?	8	SATUR	<b>V</b>		
	Sponsoring organizations maintaining donor advised funds.	00	1000	(SECTION)		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b	-	+		
	Section 501(c)(7) organizations. Enter:	30	DES:			
	Initiation fees and capital contributions included on Part VIII, line 12					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b					
11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders		Perci	Akir.		
	Gross income from other sources (Do not net amounts due or paid to other sources	TENS!	600	35		
	against amounts due or received from them.)		12			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1.85	14.1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			12.00		
	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.	7.	Sta	200		
b	Enter the amount of reserves the organization is required to maintain by the states in which			Rate		
	the organization is licensed to issue qualified health plans	1533	108	37		
	Enter the amount of reserves on hand	37,6				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or					
	excess parachute payment(s) during the year?	15		1		
	If "Yes," see instructions and file Form 4720, Schedule N.	W 15	MIL.	J. C.		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		1		
	If "Yes." complete Form 4720, Schedule O.			1836		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Sc	ee ins	tructi	ions.					
Secti	on A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15	11.162	144	21-1					
	If there are material differences in voting rights among members of the governing body, or	gerity.	150,0	15					
	if the governing body delegated broad authority to an executive committee or similar	1		100					
	committee, explain in Schedule O.		Mr.						
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 15			67.8					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1					
3	3 Did the organization delegate control over management duties customarily performed by or under the direct								
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		<b>/</b>					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		/					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5 6		1					
6	Did the organization have members or stockholders?	ь		<b>V</b>					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7a		1					
l.	one or more members of the governing body?	1a		<u> </u>					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			/ - B					
	the year by the following:	3.17	36,71						
а	The governing body?	8a	<b>√</b>						
b	Each committee with authority to act on behalf of the governing body?	8b	<b>✓</b>						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1					
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)						
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		1					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1875							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 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	1						
13	Did the organization have a written whistleblower policy?	13	1						
14	Did the organization have a written document retention and destruction policy?	14	1						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	310	18	91					
а	The organization's CEO, Executive Director, or top management official	15a	1						
b	Other officers or key employees of the organization	15b	1						
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	68016	100	(distribution)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40.							
	with a taxable entity during the year?	16a	11.	V					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the								
	organization's exempt status with respect to such arrangements?	16b		_					
	on C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶ CT								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.			y, and					
20	State the name, address, and telephone number of the person who possesses the organization's books and re-								
	Jacob A Schreiber- President & Chief Executive Officer, Jewish Community Foundation of Grtr Hartf, (860)523-7460	)							

Dogo /

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

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

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

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

Check this box if neither the organization		d org	aniz	atio	on c	ompe	nsa	ited any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, unle		unless perso er and a direc		nore than one son is both an rector/trustee)  Forme  Key en		(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
LEIGH A NEWMAN	3.00									
CHAIR	1.00	1		1				0	0	0
LEE D POLLOCK	2.00									
SECRETARY	an— paseannasaseasas	✓		✓				0	0	0
RANDALL H WEINSTOCK	2.00									
TREASURER		✓		✓				0	0	0
THEODORE N KAPLAN	2.00									
VICE CHAIR		✓		1				0	0	0
JESSICA FISH	1.00									
TRUSTEE	1.00	✓						0	0	0
GERALD B GOLDBERG	2.00									
TRUSTEE		✓						0	0	0
WALTER L HARRISON	1.00									
TRUSTEE		✓						0	0	0
MERRILL KATE MANDELL	2.50									
VICE CHAIR	1.50	✓		1				0	0	0
STEVEN PIAKER	1.00									
TRUSTEE		<b>✓</b>		_				0	0	0
DAVID M ROTH	2.00									
TRUSTEE		✓						0	0	0
CYRAL SHELDON	1.00									
TRUSTEE		<b>✓</b>						0	0	0
JULIE R SPIVAK	1.00									
TRUSTEE		<b>✓</b>						0	0	0
GAYLE TEMKIN	2.00									
TRUSTEE		<b>✓</b>						0	0	0
SIDNEY ULREICH	1.00									
TRUSTEE		<b>✓</b>						0	0	0

Part VII Section A. Offi	cers, Directors, Trus	tees, Key E	mploy	yees	s, ar	nd H	lighes	st C	ompensated E	mployees (conti	nued)	Ŷ.		
	(C)													
(A)		(B)	/			ition			(D)	(E)		(	F)	
Name and	title	Average	١,				than of is both		Reportable	Reportable		Estir	nated	
		hours per					or/trust		compensation	compensation from			unt of	
		week (list any hours for	오코	둜	앜	8	육.플	77	from the	related organizations	, ا		her ensatio	'n
		related	Individual trustee or director	🛱	Officer	Key employee	ples	Former	organization	(W-2/1099-MISC)		fron	n the	
		organizations	cto	g	)	l di	/ee	٦	(W-2/1099-MISC)				ization elated	
		below dotted line)	) trug	<u>a</u>		) Vec	ğ				١,		zation	
			tee	Institutional trustee		"	Highest compensated employee							
				ď			Ē							
ROBERT K YASS		2.00												
TRUSTEE			✓						0	0				0
JACOB A SCHREIBER		40.00												
PRESIDENT AND CEO FROM	VI 9/1/18	2.00			<b>✓</b>	_		_	195,743	0			1	5,344
RHONA H MORGAN		42.50												
VICE PRESIDENT FINANCE					<b>✓</b>				152,523	0	-		2	5,028
MICHAEL ELFENBAUM		37.50				١,								00/12/22/2
VICE PRESIDENT GRANTS I	PROGRAM			-	_	<b>✓</b>		-	104,972	0	-		-	4,893
Susan Lotreck		30.00				١,			440 407					
Vice President Operations		0.00		-	-	<b>/</b>		_	113,167	0	-		9	4,736
***************************************														
				Н							-			
Control of the Contro								Г						
***************************************														
Calcon And Electric Method of Land of the Virginian Control								Г						
·														
1b Sub-total			(9)	30	(e)	•	0.80		566,405				5	0,001
	ation sheets to Part				•									
	and 1c)							<b>•</b>	566,405				5	0,001
	ividuals (including bu		d to th	ose	e list	ted	above	e) w		ore than \$100,0	00 of			
reportable compens	sation from the organ	ization					_	_	4				Yes	No
	1	cc:					I		-1			17 - 2	103	NO
	n list any <b>former</b> of a? If "Yes," complete										.eu	3		1
											. h	ŭ	-	1000
	sted on line 1a, is the elated organizations											2.1		
										iedule 3 idi sa	1011	4	1	
	d on line 1a receive o									zation or individ	ual	153	600	
	d to the organization											5		1
Section B. Independent C														
	for your five highest	compensat	ed in	den	end	lent	contr	act	ors that receive	ed more than \$1	00.00	00 of		
	the organization. Re													ax
year.	g								, ,					
	(A)								(B)			(C)		
	Name and business add	dress							Description of s	ervices	Con	npens	ation	
None														
( <del></del>						_								
								_						
:	-							-						
O Tetal most of the	donondent seeties.	ana /immirral!	aa L	.4 -	0+	lier !	tod t		nono linted et	ovo) who	UPS4	H25	Was	0.00
	dependent contractors \$100.000 of compens							י נו	nose listed ab	OVE) WITO				

Par	t VIII	Statement of Rev		pages or note to	any line in this	Dart VIII		, in
		Check if Odrieddie C	State Assessment	poinse of flote to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts	1a	Federated campaign	s 1a	0		400円数点效	Name of the last of the	ATTACK SIDE
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		0				
s, G	С	Fundraising events .	1c	0				
Gifts, ilar An	d	Related organizations	s 1d	0				
imil	е	Government grants (cor		0				
tior r.S	f	All other contributions, g						
ibu		and similar amounts not inc	cluded above 1f	2,477,058				
Contributions, and Other Sim	g	Noncash contributions inclu		597,367				
_	h	Total. Add lines 1a-1	1f	E E E E	2,477,058			
Program Service Revenue				Business Code	P. 10 25 78 1		STAN SHIPTING WILL	not be described to the Wi
eve	2a							
ě. E.	b							
ĬŽ.	C	***************************************	************	-				
န္တ	d			-				
Iran	e f	All other program ser	vico rovonue	-				
Proč	'g	Total. Add lines 2a-2			0	G. T. CORRECTION	DAKEN SONATA	lo producto (suo
	3	Investment income						
		and other similar amo	ounts)		1,053,875	o	o	1,053,875
	4	Income from investmen	nt of tax-exempt b	ond proceeds ►	0	0	0	0
	5	Royalties	8_ 848_ 900 840 Hz 47	. 10 10 10 10 ►	0	0	0	0
			(i) Real	(ii) Personal	a Canada	115 25 115 25 24		
	6a	Gross rents	0	0				
	b	Less: rental expenses	0	0				
	С	Rental income or (loss)	0	0			A TOTAL MEN	
	d	Net rental income or		# # # # <b>&gt;</b>	0	0	0	0
	7a	Gross amount from sales of	(i) Securities	(ii) Other			AS-PURSON	
		assets other than inventory	4,510,198	0				
	b	Less: cost or other basis						
		and sales expenses .	1,585,109					
	С	Gain or (loss)	2,925,089			(A) (A) (A) (A) (A) (A)		
	d	Net gain or (loss)		•	2,908,427	0	34,326	2,874,101
venue	8a	Gross income from fuevents (not including \$	•					
Other Revenu		of contributions report. See Part IV, line 18 .		0				
托	b	Less: direct expenses	s <b>b</b>	0	TV-11-2/14	STATE OF THE PARTY	and alvert	is surveyed in 125.
•	С	Net income or (loss) f		events -	0	The state of the s	0	0
	9a	Gross income from ga		l l				
		See Part IV, line 19 .		0				
	b	Less: direct expenses					BE COTTON	
	С	Net income or (loss) f		vities <b>&gt;</b>	0	0	0	0
	10a	Gross sales of in						
		returns and allowance			AVAILA STATE			
	b	Less: cost of goods s						
	С	Net income or (loss) f			0	0	0	0
	110	Miscellaneous R	revenue	Business Code	150,000	150,000		
	11a	Administrative Fees		900099	153,069	153,069	0	0
	b	•••••		-				
	c d	All other revenue .			19,010	19,010	0	0
	e	Total. Add lines 11a-			172,079	19,010	Breznatska	Things Early Trees
	12	Total revenue. See in			6,611,439	172,079	34,326	3,927,976
					-, - , 0 , 00		0.70=0	

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and (D) (A) Total expenses (B) Program service Do not include amounts reported on lines 6b, 7b, Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . 4,457,000 4.457.000 2 Grants and other assistance to domestic individuals, See Part IV, line 22 . . . . . . 162,600 162,600 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . 4 Benefits paid to or for members . . . . 0 Compensation of current officers, directors, trustees, and key employees . . . . . 876,317 412.852 237.646 225,819 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 0 n 7 Other salaries and wages 283,092 101,048 88,137 93,907 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 10,028 9.842 35,688 15,818 Other employee benefits . . . . . . 9 100,905 44,726 28,353 27,826 10 Payroll taxes . . . . . . . . . 92,245 40,887 25,920 25,438 11 Fees for services (non-employees): Management . . . . . . . . а 3,846 0 b Legal . . . . . . . . . . . 3,846 0 C Accounting . . . . . . . . 30,335 0 30,335 0 Lobbying . . . . . . . . . 0 0 0 0 Professional fundraising services. See Part IV, line 17 0 0 е Investment management fees . . . . . 148,286 0 148,286 0 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . 0 26,114 0 26,114 12 Advertising and promotion . . . 18,289 33,253 14,964 0 13 13,595 Office expenses . . . . 48,384 21,446 13,343 14 Information technology 56,254 24,934 15,807 15,513 15 Royalties . . . . . . . . 0 0 0 0 0 16 47,915 0 47,915 17 2,429 8,096 2,429 3,238 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 0 19 Conferences, conventions, and meetings . 14,528 5,811 5,811 2,906 20 0 0 0 0 21 0 0 0 0 22 Depreciation, depletion, and amortization . 0 0 0 0 0 23 0 12,297 12,297 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Professional Membership Fees 4,055 2,027 2,028 Community Endowment Campaign - Aime Chai 8,543 8,543 0 0 3,871 0 0 3,871 C CIP Program -JMAP & OP Marketing and Outreach d 89,980 40,491 17,996 31,493 All other expenses 1,475 654 414 407 Total functional expenses. Add lines 1 through 24e 25 5,360,101 717,766 467,212 6,545,079 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

100.25	aitA	Check if Schedule O contains a response or note to any line in this Pa	rt X		
			<b>(A)</b> Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	3,704,457	2	5,224,504
	3	Pledges and grants receivable, net	1,232,934	3	919,782
	4	Accounts receivable, net	4,943	4	4,784
	5	Loans and other receivables from current and former officers, directors,		0.3	
		trustees, key employees, and highest compensated employees.		BULL	ALL STREET STREET
		Complete Part II of Schedule L	0	5	0
s	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or		this i	THE PARTY OF THE P
		other basis. Complete Part VI of Schedule D 10a 0		546	
	b	Less: accumulated depreciation 10b 0		10c	0
	11	Investments—publicly traded securities	106,621,434	11	110,289,823
	12	Investments—other securities. See Part IV, line 11	12,354,923	12	7,912,862
	13	Investments—program-related. See Part IV, line 11	0	13	***************************************
	14	Intangible assets	0	14	
	15	Other assets. See Part IV, line 11 [	163,977	15	179,575
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	124,082,668	16	124,531,330
	17	Accounts payable and accrued expenses	39,433	17	4,658
20	18	Grants payable	949,647	18	628,673
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	15,562,727	21	16,327,298
es	22	Loans and other payables to current and former officers, directors,		STATE OF	
Ħ		trustees, key employees, highest compensated employees, and		ALC: U	
Liabilities		disqualified persons. Complete Part II of Schedule L	0	22	0
-1	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	209,939	25	207,522
	26	Total liabilities. Add lines 17 through 25	16,761,746	26	17,168,151
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			
aŭ	27	Unrestricted net assets	107,176,384	27	107,242,744
Bal	28	Temporarily restricted net assets	144,538	28	120,435
힏	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
35	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
\$	32	Retained earnings, endowment, accumulated income, or other funds .		32	
₽	33	Total net assets or fund balances	107,320,922	33	107,363,179
	34	Total liabilities and net assets/fund balances	124,082,668	34	124,531,330
					Form 990 (2018)

					_
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				V
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,61	1,439
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,545,07		5,079
3	Revenue less expenses. Subtract line 2 from line 1	3		66	6,360
4					
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-2	4,103
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1	07,36	3,179
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	G 76 %	01 BL 14		
			-	Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 📝 Accrual 🔲 Other		500	100	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	1000	6 B	
	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 com-	piled or		9	
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			200	
b	Were the organization's financial statements audited by an independent accountant?		2b	<b>✓</b>	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	77/119	339	
	separate basis, consolidated basis, or both:		11000	(rt 3)	
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		Day	11.4	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent account	ıntant?	2c	<b>✓</b>	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in	5107	10.00	
	Schedule O.		DE-A	2. 74	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b	211	
			Forn	n <b>990</b>	(2018)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

Employer identification number

OMB No. 1545-0047

Open to Public Inspection

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC 06-1372107 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/8% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . . . Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing other support (see support (see document? instructions) instructions) above (see instructions)) Yes No (A) (B) (C) (D) (E)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 4,568,006 3,828,055 3,848,561 5,164,051 2,477,058 19,885,731 revenues levied for organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 0 0 Total. Add lines 1 through 3. . . . 2.477.058 19,885,731 4 4,568,006 3,828,055 3.848.561 5.164.051 The portion of total contributions by 5 each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . 4,058,715 Public support. Subtract line 5 from line 4 15,827,016 Section B. Total Support (d) 2017 (e) 2018 (f) Total Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 Amounts from line 4 . . . . . . 4,568,006 3.828.055 3.848.561 5,164,051 2,477,058 19,885,731 7 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . 896,860 940,942 775,527 1,017,468 1,053,875 4,684,672 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . 0 0 0 0 0 Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 0 **Total support.** Add lines 7 through 10 24,570,403 11 Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) . . . . 14 15 15 70.17 16a 331/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . 17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line



Tax Year 2018 (7/1/2018 - 6/30/2019)
Form 990 Schedule A
Part II. Line 5 (f)

Part II, Line 5 (f)  Donors	Total Gifts 990 Tax Years IRS 990 Year 2014- 2018	2% Line 11 (f)	Excess Support
Donors			
The Doris and Simon Konover Family Foundation	\$2,249,441	\$491,408	\$1,758,033
David and Wendy Savin	\$1,060,840	\$491,408	\$569,432
The Zachs Family Foundation, Inc.	\$996,618	\$491,408	\$505,209
Rodney and Janice Reynolds	\$937,126	\$491,408	\$445,718
Louis H. Cohen (deceased)	\$740,120	\$491,408	\$248,712
Estate of Esther Sima Cohen	\$645,861	\$491,408	\$154,453
The Harry E. Goldfarb Family Foundation, Inc.	\$626,000	\$491,408	\$134,592
Betty Gilman	\$615,169	\$491,408	\$123,761
Rona Gollob	\$610,213	\$491,408	\$118,805
Total	\$8,481,388	\$4,422,673	\$4,058,715

 $S: \WORD\FINANCE\Tax\ Matters\990\ Returns\ -\ Federal\ and\ State\990\ fye\ 6-30-2019\Schedule\ A\ Part\ II\ Line\ 5(f)\ and\ Support\Revised\_FY2019.xlsx$ 

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

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

Secti	ion A. Public Support	diadi ilio id	oto noted bei	ow, picase of	ompioto i art	,	
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees	(4) 2014	(6) 2010	(0) 2010	(4) 2017	(6) 2010	1.7
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
3	organization's tax-exempt purpose						
3	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	<b>Total.</b> Add lines 1 through 5						
7 a	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		li l				
_							
С 8	Add lines 7a and 7b	Bernary and Arrest	PERSONAL PROPERTY.	SHIP THE WATER STORY	(ESSETS STORYSON	CONTRACTOR OF THE PARTY	
U	line 6.)						
Secti	on B. Total Support		THE STATE OF THE STATE OF	STATE OF STREET	HILVS - WELL TO		
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	(a) Lott	(4) 2010	(0) 2010	(4) 2011	(4) 23 13	(1) 1010.
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,					1	
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is 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 her					<u> </u>	▶ □
-	on C. Computation of Public Suppor						
15	Public support percentage for 2018 (line 8		-				%
16	Public support percentage from 2017 Sch			* * * * *	* * * * *	16	%
-	on D. Computation of Investment Inc			U 40 :	(0)	147	
17	Investment income percentage for 2018 (I			•		17	<u>%</u>
18	Investment income percentage from 2017					18	%
19a	331/3% support tests – 2018. If the organi						
_	17 is not more than 33½%, check this box						
b	331/3% support tests - 2017. If the organiz						
	line 18 is not more than 331/3%, check this b	•	_	•			
20	Private foundation. If the organization did	a not check a	box on line 14	, 19a, or 19b, c	neck this box	an <b>a</b> see instru	ctions 🕨 🗌

## 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
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			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	3a	ÞÆ.	10
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		70
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с	OIGE,	W.
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		R90
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		# 3
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5а		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	88	e de la
6	Substitutions only. Was the substitution the result of an event beyond the organization's control?  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.	5c		
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).	7	(100 ) (100 )	-610
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a	MAN C	
b	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	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 <b>Part VI</b> .	9с		
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.	10a	PSI .	
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.)	10b	ija:	

Part	V Supporting Organizations (continued)			
-			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	(12)		J.E.
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1200		100 to
	below, the governing body of a supported organization?	11a	_	
	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	_	
Secti	on B. Type I Supporting Organizations		Vaa	NI-
	Did the division to the second such as the second such as the second to	FR300	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	675		844
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or	100		
	controlled the organization's activities. If the organization had more than one supported organization,		18 180	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	100	170791
2	Did the organization operate for the benefit of any supported organization other than the supported	1000	Mar.	
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>		1110	P5)
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	70		257
	supervised, or controlled the supporting organization.	2	120	
Section	on C. Type II Supporting Organizations			-
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	TO CALL	HILL OF	
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control		With	IIE.
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
	The state of the s		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	15%		E W
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	V COV		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	12		
	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	7FNY		1257
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	W.		
	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		9=35	
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	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 <b>Part VI</b> how you supported a government entity (	100		_
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	8	NOT	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		1	
	those supported organizations and explain how these activities directly furthered their exempt purposes,		100	
	how the organization was responsive to those supported organizations, and how the organization determined	is u	10.50	S.S.
	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			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	aniq.		
	reasons for the organization's position that its supported organization(s) would have engaged in these	123	VASTE.	
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			0.5
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	85m)	286	
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		Mary.	100 P
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	tru:	st on Nov. 20, 1970 (exp	lain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	nizat	ons must complete Sect	
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			gerseel W
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	the committee of the	and the second
2 Enter 85% of line 1.	2	PRODUCTION SEAL AS	2.1
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		(3)
4 Enter greater of line 2 or line 3.	4	Andrew Andrewski	
5 Income tax imposed in prior year	5	Manufacture of the Control of the Co	100
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		COLOR DE CONTRACTOR POR LOS	
emergency temporary reduction (see instructions).	6		101
7 Check here if the current year is the organization's first as a non-functional	ly int	egrated Type III support	ing organization (see
instructions).	_	31	,

1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2018 from Section C, line 6 10 Line 8 amount divided by line 9 amount  (ii) Underdistributions  Distributions  Distributions  Distributions	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set- aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2018 from Section C, line 6 10 Line 8 amount divided by line 9 amount  Section E – Distribution Allocations (see instructions) 1 Distributable amount for 2018 from Section C, line 6 2 Underdistributions, if any, for years prior to 2018 (reasonable cause required – explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2018 a From 2013	nt Year
organizations, in excess of income from activity  3. Administrative expenses paid to accomplish exempt purposes of supported organizations  4. Amounts paid to acquire exempt—use assets  5. Qualified set-aside amounts (prior IRS approval required)  6. Other distributions (describe in Part VI). See instructions.  7. Total annual distributions. Add lines 1 through 6.  8. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.  9. Distributable amount for 2018 from Section C, line 6.  10. Line 8 amount divided by line 9 amount  Section E—Distribution Allocations (see instructions)  1. Distributable amount for 2018 from Section C, line 6.  2. Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.  3. Excess distributions carryover, if any, to 2018  a From 2013	
4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI), See instructions. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI), See instructions. 9 Distributable amount for 2018 from Section C, line 6 10 Line 8 amount divided by line 9 amount  Section E—Distribution Allocations (see instructions) 1 Distributable amount for 2018 from Section C, line 6 2 Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2018 a From 2013	
5 Cualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2018 from Section C, line 6 10 Line 8 amount divided by line 9 amount  Section E—Distribution Allocations (see instructions) 1 Distributable amount for 2018 from Section C, line 6 2 Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2018 a From 2013 b From 2014 c From 2016 e From 2016 e From 2017 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2018 from Section D, line 7: s Applied to 2018 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2018, if any, Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.  6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.  7 Excess distributions carryover to 2019. Add lines 3j	
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and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.  7 Excess distributions carryover to 2019. Add lines 3j	
AND THE PROPERTY OF THE PROPER	
8 Breakdown of line 7:	
a Excess from 2014	7 MB. E
b Excess from 2015	
c Excess from 2016	
d Excess from 2017	Anglijes.
e Excess from 2018	

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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#### **SCHEDULE D** (Form 990)

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes" on Form 990,

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number Name of the organization JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC 06-1372107 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . 1 180 914 2 Aggregate value of contributions to (during year) 1,142,376 1,334,682 3 Aggregate value of grants from (during year) . 2,489,573 2,130,134 Aggregate value at end of year . . . . . . 4 37,046,770 70,316,409 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 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 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 (e.g., 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 easement on the last day of the tax year. Total number of conservation easements . . . . . . . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . . С Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ► Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 . . . . . . . . . . . . . . . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 

Part	Organizations Maintaining	Collections of	Art, Historical T	reasures, or Ot	her Similar Ass	ets (continued)
3	Using the organization's acquisition,	accession, and otl	her records, chec	k any of the follow	ving that are a sig	nificant use of its
	collection items (check all that apply):		. 🗆			
a	Public exhibition		_	or exchange progi		
b	Scholarly research		e 🗌 Other			************
C	Preservation for future generations	} '1				t numero in Dort
4	Provide a description of the organizat XIII.					
5	During the year, did the organization					
	assets to be sold to raise funds rather		ined as part of the	e organization's co	llection?	☐ Yes ☐ No
Part	IV Escrow and Custodial Arra	ingements.				
	Complete if the organization	answered "Yes"	' on Form 990, F	Part IV, line 9, or	reported an amo	ount on Form
	990, Part X, line 21.					
1a	Is the organization an agent, trustee,					
	included on Form 990, Part X?					✓ Yes  ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following to	able:	1	
						ount
С	Beginning balance					15,562,727
d	Additions during the year					1,716,800
е	Distributions during the year					952,229
f	Ending balance					16,327,298
2a	Did the organization include an amoun					
	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the explanation	n has been provide	ed on Part XIII	100 00 V
Par				Dark IV / Brown 4.0		
	Complete if the organization		(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
	D. I. I. C.	(a) Current year				2000 1000
1a	Beginning of year balance	70,161,065	65,548,518		63,333,564	63,132,619
b	Contributions	1,334,682	1,615,244	1,201,233	1,300,915	3,273,285
С	Net investment earnings, gains, and losses				4 400 000	75 470
		2,535,692	5,961,833	8,196,335	-1,492,885	75,172
d	Grants or scholarships	2,130,134	1,667,370	1,981,807	1,477,532	1,766,593
е	Other expenditures for facilities and programs		-7.070		05.000	450.002
		163,353	-57,279		-25,932	150,982
f	Administrative expenses	1,425,228	1,354,439		1,503,949	1,229,937
9	End of year balance	70,312,724			60,186,045	63,333,564
2	Board designated or quasi-endowmen			j, column (a)) nelu i	a5.	
a	Permanent endowment		3 70			
b c	Temporarily restricted endowment	0.2 %				
C	The percentages on lines 2a, 2b, and		nn%			
За	Are there endowment funds not in the			at are held and ad	ministered for the	
ou	organization by:	o poodoolon on an	o organization in			Yes No
	(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					
Pari						
	Complete if the organization		" on Form 990. I	Part IV. line 11a.	See Form 990, F	Part X, line 10.
	Description of property	(a) Cost or ot			Accumulated	(d) Book value
	2 decembration of property	(investm	1 ' '		epreciation	
1a	Land			1.6971.00	Electric of SHE	
b	Buildings					
c	Leasehold improvements					
d	Equipment	• >				
e	Other	0				
	Add lines 1a through 1e. (Column (d) r.		90, Part X, column	n (B), line 10c.) .	3. 3. 3. <b>&gt;</b>	

Part VII	Investments Other Securities.		
	Complete if the organization answered "Yes" on Form 990, Part I		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives	0	End-of-Year Market Value
(2) Closely-h	neld equity interests	0	End-of-Year Market Value
(3) Other Pr			End-of-Year Market Value
(A) Ventu			End-of-Year Market Value
	e International Equity	262,393	End-of-Year Market Value
(C)			
(D) (E)			
(F)			
(G)			
(H)			
	b) must equal Form 990, Part X, col. (B) line 12.) ▶	7,912,862	
Part VIII	Investments – Program Related.	110121002	
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11c. See F	orm 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			SOURCE AND DESCRIPTION OF THE PARTY.
	b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.	/ lime 44 al Oce E	000 David V. lina 45
	Complete if the organization answered "Yes" on Form 990, Part I	v, line 11a. See F	(b) Book value
(4)	(a) Description		(D) BOOK Value
(1)			
(2)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colur	mn (b) must equal Form 990, Part X, col. (B) line 15.)	e ne de ne (200 Se) (30	<b>&gt;</b>
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" on Form 990, Part I' line 25.	V, line 11e or 11f.	See Form 990, Part X,
1.	(a) Description of liability		(b) Book value
(1) Federal in	come taxes		
(2) Split-inte	erest Agreements		207,522
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	A COO D. A.V 1 /D.V 05 1 P.		Walter words
Total. (Column (b	r) must equal Form 990, Part X, col. (B) line 25.) ▶		207,522

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Part				Retu	rn.		
	Complete if the organization answered "Yes" on Form 990,			1	C 454 COC		
1 2	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12:				6,454,686		
a	Net unrealized gains (losses) on investments	2a	l 0				
b	Donated services and use of facilities	2b	0				
c	Recoveries of prior year grants	2c	0				
d	Other (Describe in Part XIII.)	2d	-8,467				
e	Add lines 2a through 2d	-		2e	-8,467		
3	Subtract line <b>2e</b> from line <b>1</b>			3	6,463,153		
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	148,286				
b	Other (Describe in Part XIII.)	4b	0				
С	Add lines 4a and 4b			4c	148,286		
_ 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	6,611,439		
Part				r Re	turn.		
	Complete if the organization answered "Yes" on Form 990,						
1		* *	* * * * * * *	1	6,396,793		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 -	1				
a	Donated services and use of facilities	2a	0				
b	Prior year adjustments	2b	0				
C	Other losses	2c 2d	0				
d	Other (Describe in Part XIII.)			2e			
е 3	Add lines 2a through 2d	2 4		3	6,396,793		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	î î		3 1/0/12	0,330,733		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	148,286				
b	Other (Describe in Part XIII.)	4b	0				
c	Add lines 4a and 4b			4c	148,286		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	6,545,079		
Part							
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar						
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	t to pro	ovide any additional in	forma	ation.		
Sched	lule D, Part IV, Line 1b - Schedule D, Part IV, Line 1b - As part of our agency e	ndowm	ent program, the Found	dation	holds, administers		
	nanages certain charitable funds established and owned by beneficiary agenc						
local	synagogues as part of a commingled investment pool. These funds are treated	d as as	sets and liabilities on th	ne bo	oks of the Foundation.		
	fule D, Part IV, Line 2b - As part of our agency endowment program, the Foun						
	able funds established and owned by beneficiary agencies of the Jewish Fede				synagogues as part		
of a co	ommingled investment pool. These funds are treated as assets and liabilities	on the	books of the Foundatio	<u>n.</u>			
					£ 41 : £4 :		
	dule D, Part V, Line 4 - The 1,364 charitable funds held by the Foundation are u						
	ng them. Unrestricted community funds help meet the most pressing and cha				,54,000,000		
	estricted community funds rest with the Board of Trustees of the Foundation. etitive grant application process in accordance with Foundation grant-making						
	ally made upon the recommendation of donors, after review and approval by						
	outes a list of selected funding expressed by donors at the time the gifts were						
	of charitable projects. These and other funding ideas are made available on t						
	are made to carry out the charitable intentions expressed by donors at the tir						
			<b></b>				
Sched	fule D, Part X, Line 2 - Schedule D, Part X, Line 2 - The Foundation is classified	by the	e Internal Revenue Serv	rice (I	RS) as a tax		
*******	pt organization exempt from incomes taxes under Section 501(a)(1) of the Inte						
	sion for income taxes has been made in the accompanying financial statemen						
	ncome tax returns for unrelated business income, which represent the major tax jurisdictions of the Foundation. Federal and state tax years						
	through 2018 remain open under the statutes of limitations.						
	dule D, Part XI, Line 2d - \$14,010 Loss recovery of noncollectable pledges to the			aign,	\$1,626 change in		
cash	surrender value of life insurance contracts, -\$24,103 Change in value of the sp	lit-inte	rest agreements				

#### SCHEDULE I (Form 990)

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

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

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

2018

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC						06-1372107	
Part I General Information on Grants and Assistance							
<ol> <li>Does the organization mainta the selection criteria used to a Describe in Part IV the organi</li> </ol>	award the grants	or assistance?				-	
Part II Grants and Other As Part IV, line 21, for an	sistance to Do y recipient that	mestic Organia received more t	zations and Dom han \$5,000. Part	nestic Governm Il can be duplica	ents. Complete if	the organization	n answered "Yes" on Form 990
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assista	
(1) See Schedule I Statement 1	00-000000	501 (c) (3)	4,163,807	0	Cash		Various
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section				line 1 table	* * * * * * * * *		





# Jewish Community Foundation of Greater Hartford,Inc

Name, address, and zip	EIN	IRC Code	Cash Grant	Purpose of Grant or Assistance
10,000 Degrees 1650 Los Gamos Drive, Suite 120 San Rafael, CA 94903	95-3667812	501(C)(3)	\$24,430.00	scholarships
Achievement First 495 Blake Street New Haven, CT 06515	65-1203744	501(C)(3)	\$20,000.00	general operating support - Hartford schools
AIDS Connecticut 110 Bartholomew Avenue, Suite 3050 Hartford, CT 06106	22-3014883	501(C)(3)	\$8,000.00	general operating support
All Faiths Food Bank 8171 Blaikie Court Sarasota, FL 34240	65-0115814	501(C)(3)	\$5,000.00	program support
Allied Jewish Federation of Colorado 300 S. Dahlia Street, Suite 300 Denver, CO 80246	84-0402662	501(C)(3)	\$25,000.00	PJ Library
American Civil Liberties Union Foundation 125 Broad Street, 18th Floor New York, NY 10004-2400	13-6213516	501(C)(3)	\$10,000.00	general operating support
American Israel Education Foundation 251 H Street, NW Washington, DC 20001	52-1623781	501(C)(3)	\$5,000.00	general operating support
Anti-Defamation League 1952 Whitney Avenue, Suite 3 Hamden, CT 06517-1209	13-1818723	501(C)(3)	\$10,400.00	general and program support
Asbury Park Music Foundation 621 Lake Avenue, Suite 1C Asbury Park, NJ 07712	45-2675974	501(C)(3)	\$5,000.00	Jewish Family and Children's Services
Beth El Temple of West Hartford	06-0699241	501(c)(3)	\$81,151.92	general operating support

2626 Albany Avenue West Hartford, CT 06117-2331			
The Bridge Family Center, Inc. 1022 Farmington Avenue West Hartford, CT 06107	23-7013563	501(C)(3)	\$6,000.00 general and program support
The Brigid Alliance P.O. Box 58, Planetarium Station New York, NY 10024	82-3843989	501(C)(3)	\$10,000.00 general operating support
Chabad House of Greater Hartford 2352 Albany Avenue West Hartford, CT 06117	06-1030000	501(C)(3)	\$14,059.75 general and program support
Charter Oak Cultural Center 21 Charter Oak Avenue Hartford, CT 06106	06-1026597	501(C)(3)	\$197,508.66 general, program and capital support
Children and Families First 2005 Baynard Boulevard Wilmington, DE 19802	51-0065731	501(C)(3)	\$10,000.00 program support
Children's Law Center of Connecticut 30 Arbor Street, 2nd Floor Hartford, CT 06106	06-1381700	501(C)(3)	\$5,000.00 general operating support
Circle of Friends 40 King Street Norwalk, CT 06851	47-4152491	501(C)(3)	\$5,000.00 general operating support
Congregation Beth Israel 701 Farmington Avenue West Hartford, CT 06119-1724	06-0692758	501(C)(3)	\$48,463.42 general and program support
Congregation Kol Haverim 1079 Hebron Avenue Glastonbury, CT 06033-0473	22-2586288	501(C)(3)	\$8,653.35 general and program support
Connecticut Children's Medical Center Foundation 282 Washington Street Hartford, CT 06106	06-0646755	501(C)(3)	\$175,984.67 general and research support
Connecticut Public Broadcasting, Inc. 1049 Asylum Avenue Hartford, CT 06105-2411	06-0758938	501(C)(3)	\$5,000.00 general operating support

Emanuel Synagogue 160 Mohegan Drive West Hartford, CT 06117	06-0675032	501(c)(3)	\$14,957.49 general and program support
Farmington Valley Jewish Congregation 55 Bushy Hill Road Simsbury, CT 06070	06-6080265	501(C)(3)	\$12,000.00 general and program support
Federation Homes, Inc. 156 Wintonbury Avenue Bloomfield, CT 06002	06-1019012	501(C)(3)	\$20,383.44 program support
Foodshare, Inc. 450 Woodland Avenue Bloomfield, CT 06002	22-2474771	501(C)(3)	\$12,496.00 general operating support
Gifts of Love P.O. Box 463 Avon, CT 06001	06-1309318	501(C)(3)	\$5,000.00 program support
Grace Academy 277 Main Street Hartford, CT 06106	27-1673012	501(C)(3)	\$10,500.00 program and scholarship support
Maurice Greenberg Center for Judaic Studies 200 Bloomfield Avenue West Hartford, CT 06117-1599	06-0731360	501(C)(3)	\$8,535.66 general and program support
Hadassah Hartford Chapter 43 Carlyle Road West Hartford, CT 06117	13-1656651	501(C)(3)	\$5,243.13 general operating support
Harold Grinspoon Foundation 67 Hunt Street, Suite 100 Agawam, MA 01001	04-6685725	501(C)(3)	\$25,000.00 PJ Library
Hartford Hospital 80 Seymour Street Hartford Hartford, CT 06101-9960	06-0646668	501(C)(3)	\$6,746.00 nursing education and professional development
Hartford Stage 50 Church Street Hartford, CT 06103	06-0790484	501(C)(3)	\$8,500.00 general operating support
Hartford Symphony Orchestra	06-0637319	501(C)(3)	\$5,800.00 general operating support

166 Capitol Ave Hartford, CT 06106

Hebrew Senior Care One Abrahms Boulevard West Hartford, CT 06117-1525	06-0646672	501(C)(3)	\$467,353.76 general, program and capital support
Hillel: The Berman Jewish University Center of Pittsburgh 4607 Forbes Avenue Pittsburgh, PA 15213	25-6065236	501(C)(3)	\$6,000.00 general and program support
The Hole in the Wall Gang Camp 555 Long Wharf Drive New Haven, CT 06511	06-1157655	501(C)(3)	\$7,500.00 general operating support
JAFCO Foundation 5100 N. Nob Hill Road Sunrise, FL 33351	65-0334267	501(C)(3)	\$5,000.00 program support
Jewish Association for Community Living 900 Asylum Avenue Hartford, CT 06105	06-1068312	501(C)(3)	\$61,572.48 general and program support
Jewish Family Services of Greater Hartford 333 Bloomfield Avenue, Suite A West Hartford, CT 06117	06-0653062	501(C)(3)	\$232,613.95 general, program and capital support
Jewish Federation of Greater Hartford 333 Bloomfield Avenue, Suite C West Hartford, CT 06117	06-0655482	501(C)(3)	\$1,298,638.56 general, program and capital support
Jewish Federation of Greater Portland 6680 SW Capitol Highway Portland, OR 97219	93-0386825	501(C)(3)	\$20,000.00 PJ Library
Jewish Federation of Greater Washington 6101 Executive Blvd. North Bethesda, MD 20852	53-0212445	501(C)(3)	\$10,000.00 general operating support
Jewish Federation of South Palm Beach County 9901 Donna Klein Blvd. Boca Raton, FL 33428-1788	59-1945109	501(C)(3)	\$5,000.00 PJ Library
Jewish Federation of the Berkshires 196 South Street Pittsfield, MA 01201	04-2131409	501(C)(3)	\$9,500.00 general and program support

Jewish Historical Society of Greater Hartford 333 Bloomfield Avenue, Suite B West Hartford, CT 06117	06-1217339	501(C)(3)	\$46,903.27 general and program support
Jewish Social Service Agency 200 Wood Hill Road Rockville, MD 20850	53-0196598	501(C)(3)	\$15,000.00 program support
Jewish Teen Learning Connection 333 Bloomfield Avenue, Suite C West Hartford, CT 06117	06-1329245	501(C)(3)	\$12,073.77 general and program support
JFACT Fund, Inc. 40 Woodland Street Hartford, CT 06105	06-1491945	501(C)(3)	\$21,526.42 general and program support
Kingswood-Oxford School 170 Kingswood Road West Hartford, CT 06119	06-0646688	501(C)(3)	\$25,700.00 general support and scholarships
The Loomis Chaffee School 4 Batchelder Road Windsor, CT 06095	06-0653119	501(C)(3)	\$56,000.00 general support and scholarships
Mandell Jewish Community Center 335 Bloomfield Avenue West Hartford, CT 06117-1543	06-0662142	501(C)(3)	\$187,042.80 general, program and capital support
National Philanthropic Trust 1 Ropemaker Street London, Great Britain, EC2Y9HT	23-7825575	501(C)(3)	\$10,000.00 World Jewish Relief - Ukraine assistance
Hebrew High School of New England 300 Bloomfield Avenue West Hartford, CT 06117	06-1455973	501(C)(3)	\$249,722.13 general, program and capital support
Nutmeg Big Brothers-Big Sister 30 Laurel Street Hartford, CT 06106	06-0850379	501(C)(3)	\$45,500.00 general operating support
OneTable 79 Madison Avenue, FL 8 New York, NY 10016	46-4715368	501(C)(3)	\$6,000.00 OneTable Hartford
The Open Hearth Association	06-0646773	501(C)(3)	\$5,000.00 general operating support

150 Charter	Oak Avenue
Hartford, CT	06106-5102

Operation Smile 3641 Faculty Boulevard Virginia Beach, VA 23453-8000	54-1460147	501(c)(3)	\$5,000.00 general operating support
P.E.F. Israel Endowment Funds, Inc. 630 Third Avenue, Suite 1501 New York, NY 10017	13-6104086	501(C)(3)	\$9,000.00 Jerusalem Hills Therapeutic Centers
Planned Parenthood of Delaware 625 N. Shipley Street Wilmington, DE 19801	51-0066725	501(C)(3)	\$5,000.00 general operating support
Playing on Air 210 West 101st Street, PH 9 New York, NY 10025	47-4064875	501(C)(3)	\$5,000.00 program support
Reconstructing Judaism 1299 Church Road Wyncote, PA 19095	23-1710675	501(C)(3)	\$35,000.00 Rabbinic Entrepreneurship Initiative
Rensselaer Polytechnic Institute P.O. Box 3164 Boston, MA 02241-3164	14-1340095	501(C)(3)	\$5,000.00 Student Assistance Grant Program
Saint Francis Hospital and Medical Center Foundation Inc 95 Woodland Street Hartford, CT 06105-1299	06-1008255	501(C)(3)	\$6,000.00 general operating support
Bess and Paul Sigel Hebrew Academy 53 Gabb Road Bloomfield, CT 06002	06-0665199	501(C)(3)	\$43,067.41 general operating support
Solomon Schechter Day School of Greater Hartford 26 Buena Vista Road West Hartford, CT 06107	06-0873657	501(C)(3)	\$124,241.26 general, program and capital support
STEP-GTP 54 Beals Street Brookline, MA 02446	82-4390203	501(C)(3)	\$5,000.00 tuition for graduate students
Synchronicity Theatre 1389 Peachtree Street NE, Suite 350 Atlanta, GA 30309	58-2352047	501(C)(3)	\$5,000.00 general operating support

Temple B'nai Abraham P.O. Box 745 Meriden, CT 06450	06-0719649	501(c)(3)	\$44,370.48 general, program and capital support
Temple Chai 4645 East Marilyn Road Phoenix, AZ 85032	94-2381671	501(C)(3)	\$7,500.00 general operating support
Temple Sinai 41 West Hartford Road Newington, CT 06111	06-6011131	501(C)(3)	\$8,263.81 general, program and capital support
Temple Sinai Brookline 50 Sewall Avenue Brookline, MA 02446	04-2123667	501(C)(3)	\$9,790.00 general and program support
Trinity College 300 Summit Street, Room TC243 Hartford, CT 06106	06-0646927	501(C)(3)	\$5,906.79 program support
Trinity College Hille 74 Vernon Street Hartford, CT 06106	52-1844823	501(C)(3)	\$15,704.63 general and program support
United States Holocaust Memorial Museum 60 E. 42nd Street, Suite 1000 New York, NY 10165	52-1309391	501(C)(3)	\$5,000.00 general operating support
United Synagogue of Hoboken 115 Park Avenue Hoboken, NJ 07030		501(C)(3)	\$10,000.00 PJ Library
Universities Allied for Essential Medicines 641 S Street NW Washington, DC 20001	01-0833168	501(C)(3)	\$10,000.00 general operating support
University of Connecticut Foundation, Inc. 2390 Alumni Drive, Unit 3206 Storrs, CT 06269	06-6070722	501(C)(3)	\$64,000.00 program support and scholarships
University of Connecticut Hillel 54 N. Eagleville Road Storrs, CT 06268	06-6071635	501(C)(3)	\$26,261.01 general operating support
University of Hartford Hillel	06-0731360	501(C)(3)	\$10,863.35 general operating support

200 B	loomfield	Αν	enue
West	Hartford,	СТ	06117

University of Pennsylvania - The Penn Fund 2929 Walnut Street, Suite 300 Philadelphia, PA 19104	23-1352685	501(C)(3)	\$6,150.00 general support and scholarships
Voices of Hope 20 Waterside Drive, Suite 100 Farmington, CT 06032	81-4736138	501(C)(3)	\$16,877.32 general and program support
Watkinson School 180 Bloomfield Avenue Hartford, CT 06105-1096	06-0655136	501(C)(3)	\$7,350.00 general support and scholarships
Yale University School of Medicine Box 7611 New Haven, CT 06519-0611	06-0646973	501(C)(3)	\$50,000.00 spinal cord research

TOTAL

\$4,163,806.69

Type of Grant	# Recipients	Cash Grants
College Scholarships	39	\$114,600
Israel Scholarships	8	\$48,000
TOTALS	47	\$162,600

0.0

Part III Grants and Other Assistance to De Part III can be duplicated if additional			e organization answ	vered "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 assistance
1 See Schedule I, Part IV, Statement 1					
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provide	the information	required in Part I, li	ne 2; Part III, colum	n (b); and any other addit	ional information.
Schedule I, Part I, Line 2 - Schedule I, Part I, Line 2 - Th					
diverted from their intended use. The processes vary s	*************************	***********			
is approved, a letter agreement, outlining the terms and					
recipient's governing board. These grants are approve	on the basis of a p	roposal as submitted	The recipient of any gra	ant from the Foundation must	agree to use the funds awarded for
the specific project and in accordance with the budget					
Foundation's Grant Payment Request Form. The Foundation					
make progress towards the intended project goals. The	Foundation also re	quires the submission	of a final report on the	grant, which includes a deta	iled accounting of how the funds were
expended compared to the original budget. Any reques	ts for a modificatior	in use of funds must	be submitted in writing	to the Foundation for approv	al in advance. Funds not used in the
manner specified in the letter agreement, project, may	be retained by the F	oundation or be appro-	ved for reallocation by	the Foundation. Grants award	ded but unpaid are cancelled. The
grant recipient must agree to notify the Foundation of a					
grant recommendations and follows additional due dili	gence procedures to	assure that grants are	e made to qualified cha	arities for proper purposes an	d impermissible material benefits to
donors are not present. Grant recommendations are pr	ocessed and approv	red or denied in accord	lance with the Foundat	tion's Donor Advised Fund Gu	uidelines. All grants from donor
advised funds are reported to the Board of Trustees on	a quarterly basis. C	rants to qualified char	ities made for general	operating support are paid or	nce the grant has been approved.
Grants to qualified charities made for specific projects	are paid after the re	cipients demonstrate t	hat the funded project	was completed and submit p	aid invoices accompanied by the
Foundation's Grant Payment Request Form. Grants aw	arded but unpaid ar	e cancelled. Designate	d Funds. Grants from o	designated funds are paid to d	qualified charities in accordance with
the terms of the applicable gift instruments. Foundation	n staff confirms the	tax exempt status and	legal existence of char	ritable beneficiaries of grants	before grants are paid to them.
Schedule I, Part III - Grants for scholarships are paid di	rectly to the institut	on the student is atter	nding Payment of scho	larshin awards is conditioned	t upon proof of enrollment and, where
appropriate, receipt of a transcript for the most recently					
		***************************************			
				*************	

Schedule I, Part IV, Statement 1

## JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Form: Schedule I (2018)

EIN: 06-1372107

Part III

Page: 2

Description of Grants and Other Assistance to Individuals in the United States

		Number of recipients	Amt. of cash grant	Amt. of non- cash asst.
Type of grant	Grants for scholarships are paid directly to the institution the student is attending. Payment of scholarship awards is conditioned upon proof of enrollment and, where appropriate, receipt of a transcript for the most recently completed semester, as well as satisfaction of any other ongoing qualifications for the scholarship.	39	114,600	0
Method of valuation	Cash			
Desc. of Non-Cash Asst.				
Type of grant	Israel Scholarships	8	48,000	0
Method of valuation	Cash			
Desc. of Non-Cash Asst.				

#### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection Employer identification number

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

06-1372107

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form		7.3	(Sen
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	100		5 44
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			VIELS
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees	90.00		
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
		1000	19.55	158/4
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment		loans	154
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
		653	3,55	Total I
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			35
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a		8 III	1
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		12.5	3.
	☑ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study		10	100
	✓ Form 990 of other organizations     ✓ Approval by the board or compensation committee			13.1
				Total Control
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			134
	organization or a related organization:		0.0070	THE OWNER OF THE OWNER
а	Receive a severance payment or change-of-control payment?	4a	-	1
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	-	1
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	OHESTI	V
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		1/2=	180
•	compensation contingent on the revenues of:		6E	
2	The organization?	5a	-	1
a b	Any related organization?	5b		1
D	If "Yes" on line 5a or 5b, describe in Part III.	9.5	WALE.	100
	The straine said ob, describe in that in.		W.X.	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	16.3	1704	1
•	compensation contingent on the net earnings of:			24
а	The organization?	6a		1
b	Any related organization?	6b		1
	If "Yes" on line 6a or 6b, describe in Part III.		10.00	
		5118	7	
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			,
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		<b>/</b>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," described		1	<b>,</b>
	in Part III	8	_	<b>/</b>
	and a contract of the contract			N. K.
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

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

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

	1	(B) Breakdown of	W-2 and/or 1099-MISC	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
JACOB A SCHREIBER,	(i)	195,743	0	744	0	15,344	211,831	0	
PRESIDENT AND CEO FROM	(ii)	0	0	0	0	0	0	0	
MICHAEL ELFENBAUM, VICE	(i)	104,972	0	774	3,969	923	110,638	0	
PRESIDENT GRANTS 2 DDOCDAM Susan Lotreck, Vice President	(ii)	0	0	0	0	0	0		
Susan Lotreck, Vice President	(i)	113,167	0	334	3,854	882	118,237	0	
Operations 3	(ii)	0	0	0	0	0	0		
RHONA H MORGAN, VICE	(i)	152,523	0	0	6,103	18,925	177,551	0	
4 PRESIDENT FINANCE	(ii)	0	0	0		0	0		
	(i)				•	0			
5	(ii)				***************************************				
· ·	(i)								
6	(ii)		***************************************						
	(i)								
7	(ii)		**********************						
,	(i)								
8	(ii)								
8	(i)								
9	(ii)								
9	(i)								
10	(ii)								
10	(i)								
le e	(ii)								
11									
	(i)					****************			
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)						verse ette ette ette ette ette ette ette		
15	(ii)								
	(i) [								
16	(ii) [								

Page 3

Part III	Supplemental	Information
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Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part or any additional information.
Schedule J, Part I, Line 3 - The Foundation has adopted a policy for setting the compensation for it's chief executive, and key employees. The policy is designed to ensure that the Foundation's executive compensation are reasonable. It includes three components: 1) review and approval by a committee designed by the Board of Trustees, provided that persons with conflicts of interest are not involved in this review or approval; 2) use of data as to comparable compensation for similarly qualified persons in functionally comparable positions at similarly situated organizations; and 3) contemporaneous documentation and record keeping with respect to the deliberations and decisions.

# **SCHEDULE M** (Form 990)

# **Noncash Contributions**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

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

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Inspection Employer identification number

06-1372107

Part	Types of Property	111						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			-
1	Art—Works of art							
2	Art—Historical treasures							
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	<b>✓</b>	19	597,367	AVG MKT V	ALUE		
10	Securities—Closely held stock .							
11	Securities — Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate-Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies						_	
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens						_	
24	Archeological artifacts							
25	Other ► ()							_
26 27	Other ► () Other ► ()							
28	Other ► ( )							_
29	Number of Forms 8283 received	by the ore	unization during the tay v	year for contributions for				
29	which the organization completed				29			
	Willow the organization completed	1 01111 0200	, ran ir, bonoo namama	agomoni		7	Yes	No
30a	During the year, did the organizat 28, that it must hold for at least the							
	to be used for exempt purposes f					30a		1
b	If "Yes," describe the arrangement					1800	17.7	11027
31	Does the organization have a contributions?	gift accep	, ,			31	1	
32a	Does the organization hire or use	third parti	es or related organizations	s to solicit, process, or se	ell noncash			
L	contributions?					32a	N-2-1	(Garage
	If "Yes," describe in Part II.			المستعدد المناولية المستعدد المناولية المستعدد ا	ا مامداده ما		Wala.	A STATE
33	If the organization didn't report an	amount in o	column (c) for a type of pro	perty for which column (a) I	s спескеа,	Vin-		9-17

Schedule M, Part I, Line 9 - This represents the number of non-cash donations received in 2018-2019.	
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#### SCHEDULE O (Form 990 or 990-EZ)

#### 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.

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC Form 990, Part VI, Section A, Line 7b - The Jewish Community Foundation was established as the Endowment Foundation of the Jewish Federation of Greater Hartford, Inc. in 1972. In 1993, the Foundation became an independent nonprofit entity with a separate and distinct Board of Trustees. The Bylaws of the Foundation continue to require that a percentage of the Board members of the Foundation be directors, community trustees, life community trustees, or members of committees or task forces of the Federation Form 990, Part VI, Section B, Line 11b - A draft IRS Form 990 prepared by the Foundation's VP Finance with input from the President, was distributed to the Audit Committee and the Foundation's independent auditors for review and comment. Suggested changes were then incorporated and a final Form 990 was distributed as a PDF document by email to the Board of Trustees for review prior to submission to the IRS. Form 990, Part VI, Section B, Line 12c - The Foundation has adopted a code of ethics and conflict of interest policy that: (1) defines conflicts of interest; (2) defines individuals within the Foundation covered by the policy; (3) facilitates disclosure of information that may help identify conflicts of interest and potential conflicts; and (4) specifies procedures to be followed in managing conflicts of interest. Each year the Foundation distributes its Code of Ethics and Conflict of Interest Policy to its Board of Trustees, members of its Audit, Budget and Finance, Investment and Grants Committees and staff, along with an annual disclosure statement. The completed statements are collected and kept in a locked file. It is the responsibility of Trustees, committee members, staff and members of their families associated with the Foundation to be alert to situations in which a conflict of interest could arise. The Foundations conflict of interest policy requires disclosure of financial and other interests prior to any discussion of the matter under consideration and mandates abstention from decision-making actions when a potential for conflict exists. The Board or committee whose member may have a conflict has the right to review and discuss the matter of a conflict or potential without the affected individual being present. Trustees and committee members who believe that someone may have violated the Foundation's conflict of interest policy are directed to express their concern to the Chair of the Audit Committee or to the Chair of the Board of Trustees. Staff would report the issue to the Foundation's President. Steps would then be taken to determine whether a conflict or the potential for conflict exists, and whether to: (1) take no action; (2) assure full disclosure to the Board, committee or others; (3) ask the individual to recuse him/herself from participation in discussions or decision making concerning the matter at hand; or (4) ask the individual to resign from his or her position or, if the individual refuses to resign, become subject to possible removal in accordance with the Foundation's bylaws. The Foundation's President and Vice President Finance monitor proposed and ongoing transactions for conflicts of interest and would disclose them to the Chair of the Audit Committee and Chair of the Board of Trustees in order to deal with potential or actual conflicts, whether discovered before or after the transaction has occurred Form 990, Part VI, Section B, Line 15 - The Foundation has adopted a policy for setting the compensation for its chief executive, officers, and "key employees." The policy is designed to ensure that the Foundation's executive compensation arrangements are reasonable. It includes three key components: (1) review and approval of compensation by a committee designated by the Board of Trustees, provided that persons with conflicts of interest are not involved in their review or approval; (2) use of data as to comparable compensation for similarly qualified persons in functionally comparable positions at similarly situated organizations; and (3) contemporaneous documentation and record keeping with respect to the deliberations and decisions. Form 990, Part VI, Section C, Line 19 - The Foundation publishes its audited statements on its website. The Foundations Certificate of Incorporation is available through the office of the Secretary of the State of Connecticut. Its code of ethics and conflict of interest policy and bylaws are published on our website.

Schedule O, Statement 1

# JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Form: Form 990 (2018)

EIN: 06-1372107

Page: 1

Header Section

#### **Reasonable Cause Explanations**

Explanation

The IRS approved the Foundation's request (Form 8868) for an automatic extension to May 15, 2020 on January 6, 2020 Notice Number (CP211A)

Schedule O, Statement 2

## JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Form: Form 990 (2018) EIN: 06-137210

EIN: 06-1372107 Part III, Line 4d

Page: 2

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
<u>u</u>	Other Programs and Services (Expenses: \$2,014,534 including grants of \$1,274,140) These include the balance of grants awarded through community grantmaking programs, donor advised program and designated giving in program areas that include Arts and Culture, Social Justice, programs in Israel, Seniors, Religious and Spiritual Development and Outreach.	2,014,534	1,274,140	172,079
Total:		2,014,534	1,274,140	172,079