

Return of Organization Exempt From Income Tax

2019

Open to Public Inspection

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

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

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

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 07/01, 2019, and ending 06/30, 20 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD IN
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
333 Bloomfield Avenue Suite D
 City or town, state or province, country, and ZIP or foreign postal code
West Hartford, CT, 06117

D Employer identification number
06-1372107

E Telephone number
860-523-7460

G Gross receipts \$ 18,210,614

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

H(c) Group exemption number ▶ _____

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ jcfhartford.org

K Form of organization: Corporation Trust Association Other ▶ _____

L Year of formation: 1993

M State of legal domicile: CT

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>The Jewish Community Foundation promotes philanthropy, manages the Greater Hartford Jewish community's charitable endowment and makes grants to support key community needs and innovations.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	16
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	11
	6	Total number of volunteers (estimate if necessary)	6	67
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year <u>2,477,058</u>	Current Year <u>2,530,364</u>
	9	Program service revenue (Part VIII, line 2g)	<u>0</u>	<u>0</u>
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>3,962,302</u>	<u>6,363,039</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>172,079</u>	<u>170,726</u>
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>6,611,439</u>	<u>9,064,129</u>
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<u>4,619,600</u>	<u>4,145,123</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u>0</u>	<u>0</u>
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u>1,388,247</u>	<u>1,264,254</u>
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u>0</u>	<u>0</u>
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>373,807</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u>537,232</u>	<u>467,732</u>
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>6,545,079</u>	<u>5,877,109</u>
19	Revenue less expenses. Subtract line 18 from line 12	<u>66,360</u>	<u>3,187,020</u>	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year <u>124,531,330</u>	End of Year <u>126,674,784</u>
	21	Total liabilities (Part X, line 26)	<u>17,168,151</u>	<u>20,893,036</u>
	22	Net assets or fund balances. Subtract line 21 from line 20	<u>107,363,179</u>	<u>105,781,748</u>

Part II Signature Block

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

Sign Here

Signature of officer _____ Date _____
Jacob Schreiber, President and CEO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name ▶ _____ Firm's EIN ▶ _____
 Firm's address ▶ _____ Phone no. _____

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

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? Yes No

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 1,633,375 including grants of \$ 1,633,375) (Revenue \$ 0)

Community Building (Expenses: \$1,633,375 including grants of \$1,633,375) 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.

4b (Code:) (Expenses \$ 952,166 including grants of \$ 952,166) (Revenue \$ 0)

Human Services and Health (Expenses: \$952,166 including grants of \$952,166). 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.

4c (Code:) (Expenses \$ 735,656 including grants of \$ 735,656) (Revenue \$ 0)

Education (Expenses: \$735,656 including grants of \$735,656) 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.

4d Other program services (Describe on Schedule O.) See Schedule O, Statement 2
(Expenses \$ 1,575,541 including grants of \$ 823,926) (Revenue \$ 0)

4e Total program service expenses **▶** 4,896,738

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part I</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IV</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part VII</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IX</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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)? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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 Statements, filed for the calendar year ending with or within the year covered by this return	2a	11
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	✓
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	✓
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	✓
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	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	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	✓

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
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?		<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?		<input checked="" type="checkbox"/>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		<input checked="" type="checkbox"/>
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	<input checked="" type="checkbox"/>	
8b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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 on Schedule O		<input checked="" type="checkbox"/>

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
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?		
15a	The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
15b	Other officers or key employees of the organization	<input checked="" type="checkbox"/>	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<input checked="" type="checkbox"/>
16b	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?		

Section 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-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ►

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JACOB A SCHREIBER PRESIDENT AND CEO	45.00 0.00			✓			207,463	0	25,144	
RHONA H MORGAN VICE PRESIDENT FINANCE	43.00 0.00			✓			155,106	0	27,031	
Kathryn L Gonnerman Vice President Development	40.00 0.00				✓		123,709	0	7,380	
Michael Elfenbaum Vice President Grants Programs	36.00 0.00				✓		108,561	0	4,995	
Susan Lotreck Vice President Operations	30.00 0.00				✓		101,269	0	5,322	
LEIGH A NEWMAN CHAIR	4.00 2.00	✓					0	0	0	
CYRAL SHELDON TRUSTEE	1.00 1.00	✓					0	0	0	
JULIE R SPIVAK TRUSTEE	1.00 1.00	✓					0	0	0	
GAYLE TEMKIN TRUSTEE	2.00 3.00	✓					0	0	0	
SIDNEY ULREICH TRUSTEE	1.00 1.00	✓					0	0	0	
LEE D POLLOCK SECRETARY	2.00 2.00	✓					0	0	0	
ROBERT K YASS TRUSTEE	2.00 2.00	✓					0	0	0	
RANDALL H WEINSTOCK TREASURER	2.00 2.00	✓					0	0	0	
THEODORE N KAPLAN VICE CHAIR	2.00 1.00	✓					0	0	0	

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 0						
	b	Membership dues	1b 0						
	c	Fundraising events	1c 0						
	d	Related organizations	1d 0						
	e	Government grants (contributions)	1e 0						
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 2,530,364						
	g	Noncash contributions included in lines 1a-1f	1g \$ 538,275						
	h	Total. Add lines 1a-1f ▶		2,530,364					
	Program Service Revenue				Business Code				
2a									
b									
c									
d									
e									
f		All other program service revenue . .		0	0	0	0		
g	Total. Add lines 2a-2f ▶		0						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		756,624	0	0	756,624		
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	0	0		
	5	Royalties ▶		0	0	0	0		
	6a	Gross rents	(i) Real						
			(ii) Personal						
			6a	0					0
			6b	0					0
	c	Rental income or (loss)	6c	0	0				
	d	Net rental income or (loss) ▶		0	0	0	0		
	7a	Gross amount from sales of assets other than inventory	(i) Securities						
			(ii) Other						
			7a	14,752,900					0
			7b	9,109,895					36,590
	c	Gain or (loss)	7c	5,643,005	-36,590				
	d	Net gain or (loss) ▶		5,606,415	0	0	5,606,415		
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	8a	0					
	b	Less: direct expenses	8b	0					
c	Net income or (loss) from fundraising events . . ▶		0		0	0			
9a	Gross income from gaming activities. See Part IV, line 19	9a	0						
b	Less: direct expenses	9b	0						
c	Net income or (loss) from gaming activities . . . ▶		0	0	0	0			
10a	Gross sales of inventory, less returns and allowances	10a	0						
b	Less: cost of goods sold	10b	0						
c	Net income or (loss) from sales of inventory . . . ▶		0	0	0	0			
Miscellaneous Revenue				Business Code					
	11a	Administrative Fees from Agency Accounts	900099	166,311	0	0	166,311		
	b								
	c								
	d	All other revenue		4,415	0	0	4,415		
e	Total. Add lines 11a-11d ▶		170,726						
12	Total revenue. See instructions ▶		9,064,129	0	0	6,533,765			

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,994,423	3,994,423		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	150,700	150,700		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	689,492	331,113	223,261	135,118
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	0	0
7	Other salaries and wages	358,033	118,617	114,262	125,154
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	25,646	11,089	8,266	6,291
9	Other employee benefits	111,750	48,319	36,018	27,413
10	Payroll taxes	79,333	34,302	25,570	19,461
11	Fees for services (nonemployees):				
a	Management	0	0	0	0
b	Legal	4,212	0	4,212	0
c	Accounting	32,225	0	32,225	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	150,920	120,736	30,184	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	28,206	4,231	19,744	4,231
12	Advertising and promotion	12,341	5,553	0	6,788
13	Office expenses	28,376	12,269	9,146	6,961
14	Information technology	56,646	24,493	18,257	13,896
15	Royalties	0	0	0	0
16	Occupancy	49,551	0	49,551	0
17	Travel	430	129	172	129
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	16,214	6,485	6,485	3,244
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	12,770	0	12,770	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	<u>Professional Membership Fees</u>	3,575	1,788	1,787	0
b	<u>Marketing and Outreach</u>	70,622	31,780	14,124	24,718
c	<u>All Other Expenses</u>	1,644	711	530	403
d	-----				
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	5,877,109	4,896,738	606,564	373,807
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	5,224,504	2	8,747,579
	3 Pledges and grants receivable, net	919,782	3	632,185
	4 Accounts receivable, net	4,784	4	4,888
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	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 other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments—publicly traded securities	110,289,823	11	104,472,794
	12 Investments—other securities. See Part IV, line 11	7,912,862	12	12,616,298
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	179,575	15	201,040
16 Total assets. Add lines 1 through 15 (must equal line 33)	124,531,330	16	126,674,784	
Liabilities	17 Accounts payable and accrued expenses	4,658	17	5,626
	18 Grants payable	628,673	18	629,448
	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	16,327,298	21	19,806,772
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0
	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	207,522	25	451,190
	26 Total liabilities. Add lines 17 through 25	17,168,151	26	20,893,036
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	107,242,744	27	105,346,070
	28 Net assets with donor restrictions	120,435	28	435,678
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	107,363,179	32	105,781,748	
33 Total liabilities and net assets/fund balances	124,531,330	33	126,674,784	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,064,129
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,877,109
3	Revenue less expenses. Subtract line 2 from line 1	3	3,187,020
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	107,363,179
5	Net unrealized gains (losses) on investments	5	-5,086,439
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	2,745
9	Other changes in net assets or fund balances (explain on Schedule O)	9	315,243
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	105,781,748

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC	Employer identification number 06-1372107
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **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:
- 10 An organization that normally receives: (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,828,055	3,848,561	5,164,051	2,477,058	2,830,364	18,148,089
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0			0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0			0
4 Total. Add lines 1 through 3	3,828,055	3,848,561	5,164,051	2,477,058	2,830,364	18,148,089
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,500,191
6 Public support. Subtract line 5 from line 4						14,647,898

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	3,828,055	3,848,561	5,164,051	2,477,058	2,830,364	18,148,089
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	940,942	775,527	1,017,468	1,053,875	756,624	4,544,436
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
11 Total support. Add lines 7 through 10						22,692,525
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	64.55 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	64.42 %
16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box 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

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
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 reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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

Attach to Form 990.

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

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization: JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC
Employer identification number: 06-1372107

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions regarding donor advisement.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, total number and acreage, monitoring policy, and expenses. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, and 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements and amounts for revenue and assets.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|------------|
| c Beginning balance | 16,327,298 |
| d Additions during the year | 4,859,908 |
| e Distributions during the year | 1,380,434 |
| f Ending balance | 19,806,772 |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	70,316,409	70,161,065	65,548,518	60,186,045	63,333,564
b Contributions	1,702,880	1,334,682	1,615,244	1,201,233	1,300,915
c Net investment earnings, gains, and losses	750,845	2,535,692	5,961,833	8,196,335	-1,492,885
d Grants or scholarships	2,080,087	2,130,134	1,667,370	1,981,807	1,477,532
e Other expenditures for facilities and programs	-871,013	159,668	-57,279	570,176	-25,932
f Administrative expenses	1,233,651	1,425,228	1,354,439	1,483,112	1,503,949
g End of year balance	70,327,409	70,316,409	70,161,065	65,548,518	60,186,045

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

- a** Board designated or quasi-endowment 99.9 %
- b** Permanent endowment 0 %
- c** Term endowment 0.1 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) Related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	0	End-of-Year Market Value
(2) Closely held equity interests	0	End-of-Year Market Value
(3) Other Private Equity	4,465,351	End-of-Year Market Value
(A) Venture Capital	4,995,619	Cost
(B) Private International Equity	3,155,328	End-of-Year Market Value
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	12,616,298	

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Split Interest Agreements	217,290
(3) Economic Relief Note Payable	233,900
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	451,190

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	3,798,425
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-5,086,439
b	Donated services and use of facilities	2b	0
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIII.)	2d	-28,345
e	Add lines 2a through 2d	2e	-5,114,784
3	Subtract line 2e from line 1	3	8,913,209
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	150,920
b	Other (Describe in Part XIII.)	4b	0
c	Add lines 4a and 4b	4c	150,920
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	9,064,129

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

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

1	Total expenses and losses per audited financial statements	1	5,726,189
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIII.)	2d	0
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	5,726,189
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	150,920
b	Other (Describe in Part XIII.)	4b	0
c	Add lines 4a and 4b	4c	150,920
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,877,109

Part XIII Supplemental Information.

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

Schedule D, Part IV, Line 1b - Schedule D, Part IV, Line 1b - As part of our agency endowment program, the Foundation holds, administers and manages certain charitable funds established and owned by beneficiary agencies of the Jewish Federation of Greater Hartford and local synagogues as part of a commingled investment pool. These funds are treated as assets and liabilities on the books of the Foundation.

Schedule D, Part IV, Line 2b - Schedule D, Part IV, Line 2b - As part of our agency endowment program, the Foundation holds, administers and manages certain charitable funds established and owned by beneficiary agencies of the Jewish Federation of Greater Hartford and local synagogues as part of a commingled investment pool. These funds are treated as assets and liabilities on the books of the Foundation.

Schedule D, Part V, Line 4 - Schedule D, Part V, Line 4 - The charitable funds held by the Foundation are used in accordance with the terms of the gift instruments creating them. Unrestricted community funds help meet the most pressing and changing needs of the community. Decisions about the use of unrestricted community funds rest with the Board of Trustees of the Foundation. Grants from these funds are typically awarded through a competitive grant application process in accordance with Foundation grantmaking guidelines. Grants from donor advised funds are generally made upon the recommendation of donors, after review and approval by the Foundation. Twice each year the Foundation distributes a list of selected funding expressed by donors at the time the gifts were made. requests to fund advisors that includes a broad range of charitable projects. These and other funding ideas are made available on the Foundation's website. Distributions from designated funds are made to carry out the charitable intentions expressed by donors at the time the gifts were made.

Schedule D, Part X, Line 2 - Schedule D, Part X, Line 2 - The Foundation is classified by the Internal Revenue Service (IRS) as a tax exempt organization exempt from incomes taxes under Section 501(a)(1) of the Internal Revenue Code as a public charity. Accordingly, no provision for income taxes has been made in the accompanying financial statements. The foundation files Federal and State of Connecticut income tax returns for unrelated business income, which represent the major tax jurisdictions of the Foundation. Federal and state tax years 2013 through 2015 remain open under the statutes of limitations.

Schedule D, Part XI, Line 2d - Schedule D, Part XI, Line 2d - \$4,415 Loss recovery of noncollectable pledges to the Aim Chai Community Campaign; \$6,100 change in Cash Surrender value of Life insurance contracts; and \$(38,860) Change in the value of Split Interest

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Employer identification number

06-1372107

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) <u>Sch I, Stmt 1</u>							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 66
- 3 Enter total number of other organizations listed in the line 1 table ▶ 0

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

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

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

Schedule I, Part I, Line 2 - Schedule I, Part I, Line 2 - The Foundation has established processes to monitor grants to ensure that they are used for proper purposes and are not otherwise diverted from their intended use. The processes vary somewhat based on the source of the grant funds. Unrestricted community funds. Once a discretionary grant from unrestricted funds is approved, a letter agreement, outlining the terms and conditions of the grant, is sent to the grant recipient. It must be signed by the chief executive officer and volunteer head of the recipient's governing board. These grants are approved on the basis of a proposal as submitted. The recipient of any grant from the Foundation must agree to use the funds awarded for the specific project and in accordance with the budget submitted as part of the grant application. Grant funds are disbursed upon presentation of paid invoices accompanied by the Foundation's Grant Payment Request Form. The Foundation requires periodic progress reports until the completion of the project, and funding may be withheld if the recipient fails to make progress towards the intended project goals. The Foundation also requires the submission of a final report on the grant, which includes a detailed accounting of how the funds were expended compared to the original budget. Any requests for a modification in use of funds must be submitted in writing to the Foundation for approval in advance. Funds not used in the manner specified in the letter agreement, project, may be retained by the Foundation or be approved for reallocation by the Foundation. Grants awarded but unpaid are cancelled. The grant recipient must agree to notify the Foundation of any change in its exempt status and any change that may be proposed by the IRS. Donor advised funds. Foundation staff reviews all grant recommendations and follows additional due diligence procedures to assure that grants are made to qualified charities for proper purposes and impermissible material benefits to donors are not present. Grant recommendations are processed and approved or denied in accordance with the Foundation's Donor Advised Fund Guidelines. All grants from donor advised funds are reported to the Board of Trustees on a quarterly basis. Grants to qualified charities made for general operating support are paid once the grant has been approved. Grants to qualified charities made for specific projects are paid after the recipients demonstrate that the funded project was completed and submit paid invoices accompanied by the Foundation's Grant Payment Request Form. Grants awarded but unpaid are cancelled. Designated Funds. Grants from designated funds are paid to qualified charities in accordance with the terms of the applicable gift instruments. Foundation staff confirms the tax exempt status and legal existence of charitable beneficiaries of grants before grants are paid to them.

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address	10000 Degrees 1650 Los Gamos Drive Suite 120 San Rafael, CA 94903	95-3667812	24,430	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	scholarships			
Name and address	Achievement First 495 Blake Street New Haven, CT 06515	65-1203744	20,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support Hartford schools			
Name and address	AIDS Connecticut 110 Bartholomew Avenue Suite 3050 Hartford, CT 06106	22-3014883	8,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Allied Jewish Federation of Colorado 300 S Dahlia Street Suite 300 Denver, CO 80246	84-0402662	25,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	PJ Library			
Name and address	American Civil Liberties Union Foundation 125 Broad Street 18th Floor New York, NY 10004-2400	13-6213516	10,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Anti-Defamation League 1952 Whitney Avenue Suite 3 Hamden, CT 06517-1209	13-1818723	10,400	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				

Schedule I, Part IV, Statement 1

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Purpose of grant	general and program support			
Name and address	Bess and Paul Sigel Hebrew Academy 53 Gabb Road Bloomfield, CT 06002	06-0665199	43,067	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Beth El Temple of West Hartford 2626 Albany Avenue West Hartford, CT 06117-2331	06-0699241	81,152	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Chabad House of Greater Hartford 2352 Albany Avenue West Hartford, CT 06117	06-1030000	14,060	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Charter Oak Cultural Center 21 Charter Oak Avenue Hartford, CT 06106	06-1026597	197,509	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Children and Families First 2005 Baynard Boulevard Wilmington, DE 19802	51-0065731	10,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	program support			
Name and address	Congregation Beth Israel 701 Farmington Avenue West Hartford, CT 06119-1724	06-0692758	48,463	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Congregation Kol Haverim 1079 Hebron Avenue Glastonbury, CT 06033-0473	22-2586288	8,653	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Connecticut Childrens Medical Center Foundation	06-0646755	175,985	0

	282 Washington Street Hartford, CT 06106			
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and research support			
Name and address	Emanuel Synagogue 160 Mohegan Drive West Hartford, CT 06117	06-0675032	14,957	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Farmington Valley Jewish Congregation 55 Bushy Hill Road Simsbury, CT 06070	06-6080265	12,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Federation Homes Inc 156 Wintonbury Avenue Bloomfield, CT 06002	06-1019012	20,383	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	program support			
Name and address	Foodshare Inc 450 Woodland Avenue Bloomfield, CT 06002	22-2474771	12,496	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Grace Academy 277 Main Street Hartford, CT 06106	27-1673012	10,500	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	program and scholarship support			
Name and address	Hadassah Hartford Chapter 43 Carlyle Road West Hartford, CT 06117	13-1656651	5,243	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Harold Grinspoon Foundation 67 Hunt Street Suite 100 Agawam, MA 01001	04-6685725	25,000	0
IRC code section	501(c)(3)			
Method of valuation	book			

Desc. of Non-Cash Asst.

Purpose of grant	PJ Library			
Name and address	Hartford Hospital 80 Seymour Street Hartford Hartford, CT 06101-9960	06-0646668	6,746	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	nursing education and professional development			
Name and address	Hartford Stage 50 Church Street Hartford, CT 06103	06-0790484	8,500	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Hartford Symphony Orchestra 166 Capitol Ave Hartford, CT 06106	06-0637319	5,800	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Hebrew High School of New England 300 Bloomfield Avenue West Hartford, CT 06117	06-1455973	249,722	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Hebrew Senior Care One Abrahms Boulevard West Hartford, CT 06117-1525	06-0646672	467,354	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Hillel The Berman Jewish University Center of Pittsburgh 4607 Forbes Avenue Pittsburgh, PA 15213	25-6065236	6,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Jewish Association for Community Living 900 Asylum Avenue Hartford, CT 06105	06-1068312	61,572	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			

Schedule I, Part IV, Statement 1

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Name and address	Jewish Family Services of Greater Hartford 333 Bloomfield Avenue Suite A West Hartford, CT 06117	06-0653062	232,614	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Jewish Federation of Greater Hartford 333 Bloomfield Avenue Suite C West Hartford, CT 06117	06-0655482	1,298,639	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Jewish Federation of Greater Portland 6680 SW Capitol Highway Portland, OR 97219	93-0386825	20,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	PJ Library			
Name and address	Jewish Federation of Greater Washington 6101 Executive Blvd North Bethesda, MD 20852	53-0212445	10,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Jewish Federation of the Berkshires 196 South Street Pittsfield, MA 01201	04-2131409	9,500	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Jewish Historical Society of Greater Hartford 333 Bloomfield Avenue Suite B West Hartford, CT 06117	06-1217339	46,903	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Jewish Social Service Agency 200 Wood Hill Road Rockville, MD 20850	53-0196598	15,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				

Schedule I, Part IV, Statement 1

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Purpose of grant	program support			
Name and address	Jewish Teen Learning Connection 333 Bloomfield Avenue Suite C West Hartford, CT 06117	06-1329245	12,074	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	JFACT Fund Inc 40 Woodland Street Hartford, CT 06105	06-1491945	21,526	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	Kingswood-Oxford School 170 Kingswood Road West Hartford, CT 06119	06-0646688	25,700	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general support and scholarships			
Name and address	Mandell Jewish Community Center 335 Bloomfield Avenue West Hartford, CT 06117	06-0662142	187,043	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Maurice Greenberg Center for Judaic Studies 200 Bloomfield Avenue West Hartford, CT 06117-1599	06-0731360	8,536	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	National Philanthropic Trust 165 Township Line Road Suite 1200 Jenkintown, PA 19046	23-7825575	10,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	World Jewish Relief Ukraine assistance			
Name and address	Nutmeg Big Brothers-Big Sister 30 Laurel Street Hartford, CT 06106	06-0850379	45,500	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			

Name and address	OneTable 79 Madison Avenue FL 8 New York, NY 10016	46-4715368	6,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	OneTable Hartford			
Name and address	PEF Israel Endowment Funds Inc 630 Third Avenue Suite 1501 New York, NY 10017	13-6104086	9,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Jerusalem Hills Therapeutic Centers			
Name and address	Reconstructing Judaism 1299 Church Road Wyncote, PA 19095	23-1710675	35,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Rabbinic Entrepreneurship Initiative			
Name and address	Saint Francis Hospital and Medical Center Foundation Inc 95 Woodland Street Hartford, CT 06105-1299	06-1008255	6,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	Solomon Schechter Day School of Greater Hartford 26 Buena Vista Road West Hartford, CT 06107	06-0873657	124,241	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Temple Bnai Abraham PO Box 745 Meriden, CT 06450	06-0719649	44,370	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Temple Chai 4645 East Marilyn Road Phoenix, AZ 85032	94-2381671	7,500	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			

Name and address	Temple Sinai 41 West Hartford Road Newington, CT 06111	06-6011131	8,264	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general program and capital support			
Name and address	Temple Sinai Brookline 50 Sewall Avenue Brookline, MA 02446	04-2123667	9,790	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	The Bridge Family Center Inc 1022 Farmington Avenue West Hartford, CT 06107	23-7013563	6,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	The Brigid Alliance PO Box 58 Planetarium Station New York, NY 10024	82-3843989	10,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	The Hole in the Wall Gang Camp 555 Long Wharf Drive New Haven, CT 06511	06-1157655	7,500	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	The Loomis Chaffee School 4 Batchelder Road Windsor, CT 06095	06-0653119	56,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general support and scholarships			
Name and address	Trinity College 300 Summit Street Room TC243 Hartford, CT 06106	06-0646927	5,907	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	program support			
Name and address	Trinity College Hillel	52-1844823	15,705	0

Schedule I, Part IV, Statement 1

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

	74 Vernon Street Hartford, CT 06106			
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general and program support			
Name and address	United Synagogue of Hoboken 115 Park Avenue Hoboken, NJ 07030	23-7305931	10,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	program support			
Name and address	Universities Allied for Essential Medicines 641 S Street NW Washington, DC 20001	01-0833168	10,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	University of Connecticut Foundation 2390 Alumni Drive Unit 3206 Storrs, CT 06269	06-6070722	64,000	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	program support and scholarships			
Name and address	University of Connecticut Hillel 54 N Eagleville Road Storrs, CT 06268	06-6071635	26,261	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	University of Hartford Hillel 200 Bloomfield Avenue West Hartford, CT 06117	06-0731360	10,863	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general operating support			
Name and address	University of Pennsylvania The Penn Fund 2929 Walnut Street Suite 300 Philadelphia, PA 19104	23-1352685	6,150	0
IRC code section	501(c)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	general support and scholarships			
Name and address	Voices of Hope	81-4736138	16,877	0

Schedule I, Part IV, Statement 1

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

20 Waterside Drive
 Suite 100
 Farmington, CT 06032

IRC code section 501(c)(3)

Method of valuation book

Desc. of Non-Cash Asst.

Purpose of grant general and program support

Name and address	Watkinson School	06-0655136	7,350	0
	180 Bloomfield Avenue			
	Hartford, CT 06105-1096			

IRC code section 501(c)(3)

Method of valuation book

Desc. of Non-Cash Asst.

Purpose of grant general support and scholarships

Name and address	Yale University School	06-0646973	50,000	0
	of Medicine			
	Box 7611			
	New Haven, CT 06519-0611			

IRC code section 501(c)(3)

Method of valuation book

Desc. of Non-Cash Asst.

Purpose of grant spinal cord research

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	Schedule I, Part III - 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 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

2019

Open to Public Inspection

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Employer identification number

06-1372107

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Travel for companions <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) </p>		
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b	
<p>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?</p>	2	
<p>3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Written employment contract <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p>		
<p>a Receive a severance payment or change-of-control payment?</p>	4a	✓
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	4b	✓
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.</p>	4c	✓
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</p>		
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p>		
<p>a The organization?</p>	5a	✓
<p>b Any related organization?</p> <p>If "Yes" on line 5a or 5b, describe in Part III.</p>	5b	✓
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p>		
<p>a The organization?</p>	6a	✓
<p>b Any related organization?</p> <p>If "Yes" on line 6a or 6b, describe in Part III.</p>	6b	✓
<p>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</p>	7	✓
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	✓
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1	JACOB A SCHREIBER, PRESIDENT AND CEO	(i)	214,200	0	0	700	21,808	236,708	0
		(ii)	0	0	0	0	0	0	0
2	Michael Elfenbaum, Vice President Grants Programs	(i)	108,000	0	0	4,176	843	113,019	0
		(ii)	0	0	0	0	0	0	0
3	Kathryn L Gonnerman, Vice President Development	(i)	125,000	0	0	2,990	4,793	132,783	0
		(ii)	0	0	0	0	0	0	0
4	Susan Lotreck, Vice President Operations	(i)	100,856	0	0	4,518	828	106,202	0
		(ii)	0	0	0	0	0	0	0
5	RHONA H MORGAN, VICE PRESIDENT FINANCE	(i)	159,853	0	0	6,293	20,738	186,884	0
		(ii)	0	0	0	0	0	0	0
6		(i)							
		(ii)							
7		(i)							
		(ii)							
8		(i)							
		(ii)							
9		(i)							
		(ii)							
10		(i)							
		(ii)							
11		(i)							
		(ii)							
12		(i)							
		(ii)							
13		(i)							
		(ii)							
14		(i)							
		(ii)							
15		(i)							
		(ii)							
16		(i)							
		(ii)							

Part III Supplemental Information

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

Schedule J, Part I, Line 1a - Schedule J, Part I, Line 1a - Annual Membership in a Social Club

Schedule J, Part I, Line 3 - Schedule J, Part I, Line 3 - 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 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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

06-1372107

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1				
2				
3				
4				
5				
6				
7				
8				
9	✓	20	538,275	AVG MKT VALUE
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				

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

29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		✓
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		✓
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Employer identification number

06-1372107

Form 990, Part VI, Section B, Line 11b - 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 - 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 - 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 - 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.

Form 990, Part XI, Line 9 - Form 990, Part XI, Line 9 - Form 990 Part XI, Line 9 -Change in Split Interest Agreements (\$38,860), Liabilities under trusts held by others (\$417,224) and Net assets released from Restrictions.

Reasonable Cause Explanations

Explanation

The IRS approved the Foundation's request (Form 8868) for an automatic extension to May 15, 2021.

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Other Programs and Services (Expenses: \$1,575,541 including grants of \$823,926) These include the balance of grants awarded through community grant-making 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.	1,575,541	823,926	0
Total:		1,575,541	823,926	0