990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

Α	For the	2023 calend	dar year, or tax year beginning	07/01/2023	and ending	06/30/2	2024				
В	Check if	applicable:	C Name of organization JEWISH	COMMUNITY FOUNDAT	ION OF GREATE	R HARTFORD IN	D Empl	oyer identification number			
	Address	change	Doing business as					06-1372107			
$\overline{\Box}$	Name ch	ange	Number and street (or P.O. box if	f mail is not delivered to stree	t address)	Room/suite	E Teleph	hone number			
$\overline{\Box}$	Initial retu	•	333 Bloomfield Avenue Suite	D	·			860-523-7460			
$\overline{\Box}$		rn/terminated	City or town, state or province, co		stal code						
$\overline{\Box}$	Amended		West Hartford, CT 06117	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			G Gross	receipts \$ 27,099,584			
\exists		on pending	F Name and address of principal off	ficer: Laura Whitney		H(a) Is this a gro		or subordinates? Yes No			
Ш	пррпоат	on pending	333 Bloomfield Avenue, West	•		1		tes included? Yes No			
$\overline{}$	Tax-exen	npt status:	✓ 501(c)(3)		947(a)(1) or 527			ee instructions.			
<u>:</u>		jcfhartfo) (intoort no.)	717(4)(1) 01 021	H(c) Group ex					
<u>к</u>	-		Corporation Trust Associa	ation Other	L Year of for	1		of legal domicile: CT			
_	art I	Summa		ation Other	L rear or for	mation. 1993	W State	or legal dornicile.			
				ion or most significant	activities. The	Levelah Oraniana		4-11			
•	1	Briefly describe the organization's mission or most significant activities: The Jewish Community Foundation promotes philanthropy, manages the Greater Hartford Jewish community's charitable endowment and makes grants to support key									
ü				ord Jewish community's	charitable endo	wment and make	s grants	s to support key			
па			y needs and innovations.								
ove.	1		box if the organization d	•			1 1				
Ğ			f voting members of the gove		•		3	15			
ο <u>σ</u>	1		f independent voting member		• •	•	4	15			
iţie			ber of individuals employed in	•			5	12			
Activities & Governance	1		ber of volunteers (estimate if				6	60			
Ă	1		lated business revenue from				7a	0			
	b	Net unrelat	ted business taxable income	from Form 990-T, Par	: I, line 11		7b	0			
						Prior Year	r	Current Year			
ø	8	Contribution	ons and grants (Part VIII, line	4,0	07,527	4,973,941					
Revenue	9	Program so	ervice revenue (Part VIII, line	28,639	328,225						
ě	10	Investment	t income (Part VIII, column (A), lines 3, 4, and 7d) .		4,9	10,588	8,882,041			
Œ	11	Other reve	nue (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, a	nd 11e)		0	0			
	1		nue-add lines 8 through 11 (n		•	9,2	46,754	14,184,207			
			d similar amounts paid (Part I				36,938	7,241,798			
			aid to or for members (Part I)		0	0					
S	1		ther compensation, employee			1.4	54,685	1,419,461			
Expenses	1		al fundraising fees (Part IX, c	.,,	0	0					
per			raising expenses (Part IX, col		474,349						
Ä	1		enses (Part IX, column (A), lin	es 11a-11d 11f-24e)	474,347	7	00,243	667,012			
	1	-	enses. Add lines 13–17 (must	·			91,866	9,328,271			
			ess expenses. Subtract line 1	=			54,888	4,855,936			
_ x			33 expenses. Oubtract line 1	O HOHI IIII E 12		Beginning of Curr					
Net Assets or Fund Balances	20	Total accet	ts (Part X, line 16)				75,533				
Asse Bala	21		ities (Part X, line 26)					172,539,390			
u fet	22		or fund balances. Subtract I				26,093	26,523,027			
_	art II		re Block	ine 21 nom ine 20 .		130,3	49,440	146,016,363			
			r, I declare that I have examined this te. Declaration of preparer (other than					my knowledge and beller, it is			
		 I				1					
Sig	nn	Signature	of officer			 Dat					
-	_					Dai	5				
He	ere		hitney, Vice President of Finan	ce							
		· · · · ·	rint name and title	Preparer's signature							
Pa	id	Print/Type	e preparer's name	Date	Check if PTIN						
	epare	r					self-emp	pioyed			
	e Only	L Cirror's man	ne			Firm's	Firm's EIN				
		Firm's add				Phone	no.				
Ma	y the IR	S discuss	this return with the preparer	shown above? See ins	tructions			. Yes No			

Form 990 (2023) Page **2**

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	. [
1	Briefly describe the organization's mission:	
	The Jewish Community Foundation of Greater Hartford unlocks the trans-formative power of individuals and collective philanthe	opv
	to address problems, strengthen community organizations, and provide permanent support for the Jewish Community of Greate	
	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?	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	
Ü	services?	No.
] INO
	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 as the service accomplishment of each of its three largest program services, as measured as the service accomplishment of each of the services and all services as the	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	tners,
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$2,904,559 including grants of \$2,904,559) (Revenue \$0)	
	Community Building. 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 Hart	ford.
	······································	
4b	(Code:) (Expenses \$ 1,126,852 including grants of \$ 1,126,852) (Revenue \$ 0)	
710	Human Services and Health. 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,	
	Sophie's Hope Foundation, Connecticut Children's Foundation, and the Jewish Association for Community Living.	
4c	(Code:) (Expenses \$1,148,030 including grants of \$1,148,030) (Revenue \$0)	
	Education. 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	
	at-risk youth, supplemental religious school education, college scholarships and general support of secular secondary and college	ege
	institutions. Grantees include Solomon Schechter Day School, New England Jewish Academy, Loomis Chafee School, and the	
	University of Connecticut Foundation.	
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 1	
тu		
10		
4e	Total program service expenses 8,071,509	

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Form 990 (2023) Part IV **Checklist of Required Schedules** 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 2 2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III . . . Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 1 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or 9 V Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 10 / If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a / Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV ~ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	,	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
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>	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		V
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		,
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	~	
0.4	conservation contributions? If "Yes," complete Schedule M	30		~
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		,
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		,
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part	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 b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
•	reportable gaming (gambling) with backup withholding rules for reportable payments to vendors and	10	.,	

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 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	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	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	Va		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	l _		
الم		7с		~
d e	If "Yes," indicate the number of Forms 8282 filed during the year	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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		~
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		~
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	_		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from members or shareholders	-		
b	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	124		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
С	Enter the amount of reserves on hand			
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? <i>If "No," provide an explanation on Schedule O</i> .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
16	If "Yes," see the instructions and file Form 4720, Schedule N.	40		
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		-
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
• •	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

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Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 15 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 15 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 ~ Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CT 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Upon request Other (explain on Schedule O) Own website Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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. Laura Whitney-Vice President of Flnance, Jewish Community Foundation of Grtr Hartford, (860)727-6179

Form 990 (2023) Page **7**

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization no	r any relate	d org	aniz			ompe	nsa	ted any current	officer, director,	or trustee.
					C)					
(A)	(B)	/-l	4 1		ition	. 41		(D)	(E)	(F)
Name and title	Average hours per week	box,	unles	ss pe	erson	e than o is both or/trust	n an	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
Jacob A Schreiber	40.00									
President and CEO (End 1/16/24)				~				228,142	0	12,867
Laura Whitney	36.00									
Vice President Finance				~				172,219	0	12,490
Kathryn L Gonnerman	36.00									
Vice President Development						~		139,054	0	24,802
Susan Lotreck	36.00									
Vice President Operations						~		143,139	0	6,391
Michael Elfenbaum	36.00									
Vice President Grants Programs						~		122,529	0	5,789
Gayle Temkin	4.00									
Chair		~						0	0	0
Walter Harrison	1.00									
Vice Chair (End 1/16/24)		~						0	0	0
Gerald B Goldberg	1.00									
Secretary		~						0	0	0
Elysa Graber-Lipperman	2.00									
Treasurer		~						0	0	0
Jill Dulitsky	1.00									
Trustee, ex officio		~						0	0	0
Joshua Feldman	1.00									
Trustee		~						0	0	0
Jessica Fish	1.00									
Trustee		~						0	0	0
Ethan Goldman	1.00									
Trustee		~						0	0	0
I Bradley Hoffman	1.00									
Trustee		1						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
				(0	C)							
(A)	(B)	١,,			ition			(D)	(E)		(F)	
Name and title	Average	,				e than o is both		Reportable	Reportable	Estima	ated am	ount
	hours	officer and a direct						compensation	compensation		of other	
	per week (list any	Ind or o	Ins	Qf	Kej.	Hig	For	from the organization (W-2/	from related organizations (W-2		pensati om the	
	hours for	dire	l tit	Officer	Key employee	hes: ploy	Former	1099-MISC/	1099-MISC/	1	nization	
	related organizations	ctor ual t	ions		old	èe t co		1099-NEC)	1099-NEC)	related	organiz	ations
	below	Individual trustee or director	=		yee	mpe						
	dotted line)	ee	Institutional trustee			Highest compensated employee						
			u u			ed						
Naomi Kleinman	1.00											
Trustee		~						0	()		0
Neil Kochen	1.00											
Trustee		~						0	()		0
Jerry Rosenstock	1.00											
Trustee		~						0	()		0
Rachel Rubin	1.00											
Trustee		~						0	()		0
Cyral Sheldon	1.00											
Trustee		~						0	()		0
Tracy Smith	1.00											
Trustee		~						0	()		0
Alan Solinsky	1.00											
Trustee		~						0	()		0
Walter Harrison	20.00	_										
Interim President and CEO (Start 1/17/24)				~				0	()		0
		_										
										-		
		-										
dh Cubtatal								205 200				
1b Subtotal	 VII Contin	 A	•	•			•	805,083	()	6	2,339
c Total from continuation sheets to Part			•	•	•		•	005 000		+		
d Total (add lines 1b and 1c)	hut not			· ·	hos		· tod	805,083	ceived more			2,339
reportable compensation from the organi		IIIIIII	u	.0 1	1103	G 1131	ieu	•	scerved more	шап ф	100,00)U UI
								5			Yes	No
3 Did the organization list any former of	officer dire	ector	tru	ıste	ام م	(AV A	mnl	ovee or highes	st compensate	4	163	NO
employee on line 1a? If "Yes," complete							-			3		~
4 For any individual listed on line 1a, is the												
organization and related organizations												
individual										4	V	
5 Did any person listed on line 1a receive of	r accrue co	omne	nsai	tion	fro	m anv	/ un	related organizat	tion or individua			
for services rendered to the organization										5		~
Section B. Independent Contractors												<u> </u>
1 Complete this table for your five high	nest comp	ensate	ed	inde	epei	ndent	CO	ntractors that r	eceived more	than \$	100.00	00 of
compensation from the organization. Rep					•							
(A) (B) (C) Name and business address Description of services Compen												
Crewcial Partners LLC, 810 Seventh Avenue, 32nd	Floor, New	York	NY	100	19		Inv	estment manage		•	10	6,924
5.5115.dr i draioi 5 EEG, 510 GOVOINI / WORMO, 52110	. IOOI / IVOW	· Ji Ki		.55	• /			. comon manage				5//27
2 Total number of independent contractor	rs (includir	ng bu	ıt n	ot	limit	ed to	th	ose listed abov	e) who			

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

Page 8

Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to ar	ny line in this Pa	ırt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
is, s	1a	Federated campaig	ns .		1a	0				
ant	b	Membership dues			1b	0				
ည် ဋ	С	Fundraising events			1c	0				
fts,	d	Related organization	ns .		1d	0				
Contributions, Gifts, Grants, and Other Similar Amounts	е	Government grants			1e	0				
ns, Sir	f	All other contribution								
tio er (and similar amounts no	ot incl	uded above	1f	4,973,941				
혈美	g	Noncash contribution	ons in	cluded in						
d d		lines 1a-1f			1g	\$ 2,451,484				
a Co	h	Total. Add lines 1a-	-1f .				4,973,941			
						Business Code				
Se	2a	Administrative fees	from a	agency acco	unts	900099	328,225	328,225	0	0
ه ځ	b								-	
gram Ser Revenue	С									
E §	d									
gra Re	e									
Program Service Revenue	f	All other program se		revenue .			0	0	0	0
•	g	Total. Add lines 2a-					328,225		,	
	3	Investment income					020,220			
		other similar amoun				2,587,803	0	0	2,587,803	
	4	·					0	0	0	0
	5 Royalties		•	0	0	0	0			
		rioyanioo	<u></u>	(i) Real	•	(ii) Personal	, and the second			J
	6a	Gross rents	6a	()	0	0				
	b	Less: rental expenses	6b		0	0				
	C	Rental income or (loss)			0	0				
	d	Net rental income o		c)			0	0	0	0
	7a	Gross amount from	1 (103	(i) Securiti		(ii) Other	0	U	0	U
	l a	sales of assets		(i) Occurrings		(ii) Guioi				
		other than inventory	7a	19,209	,615	0				
	b	Less: cost or other basis	1 a							
Revenue	B	and sales expenses .	76	40.04						
Ver	_	·	7b	12,915		0				
Be	1	Gain or (loss)	7с	6,294	1,238	0				
ē		Net gain or (loss)		Г	•		6,294,238	0	0	6,294,238
Other	8a	Gross income fro		ndraising						
		events (not including		0						
		of contributions relate). See Part IV, line			•					
				1	8a	0				
		Less: direct expens			8b	. 0				
	l _	Net income or (loss)			g eve	nts	0		0	0
	9a	Gross income 1			_					
	_	activities. See Part		+	9a	0				
		Less: direct expens			9b	0				
		Net income or (loss)	,		tivitie	es	0	0	0	0
	10a	Gross sales of in								
		returns and allowan			10a	0				
	b	Less: cost of goods		L	10b	0				
	С	Net income or (loss)) from	sales of in	vento	1	0	0	0	0
S						Business Code				
e e	11a									
an	b									
scellaneo Revenue	С									
Miscellaneous Revenue	d	All other revenue			-					
2	е	Total. Add lines 11a	a–11c	1			0			
	12	Total revenue. See	instr	uctions .			14,184,207	328,225	0	8,882,041

Form 990 (2023) Page **10**

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

	Check if Schedule O contains a response		in this Part IX .		· · · · <u> </u>
	t include amounts reported on lines 6b, 7b, , 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 .	6,986,598	6,986,598		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	255,200	255,200		
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	0	0		
5	Compensation of current officers, directors,				
_	trustees, and key employees	486,560	233,144	175,364	78,052
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 8	Other salaries and wages Pension plan accruals and contributions (include	747,014	294,155	208,018	244,841
0	section 401(k) and 403(b) employer contributions				
_	```	25,588	10,382	6,554	8,652
9 10	Other employee benefits	71,700	21,832	27,241	22,627
11	Payroll taxes	88,599	37,736	27,471	23,392
а	Management	0	0	0	0
b	Legal	21,028	0	21,028	0
C	Accounting	44,632	0	44,632	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0	J	,	0
f	Investment management fees	183,254	109,952	73,302	0
g	Other. (If line 11g amount exceeds 10% of line 25, column			.,	
	(A), amount, list line 11g expenses on Schedule O.) .	67,830	8,776	50,278	8,776
12	Advertising and promotion	14,666	6,600	0	8,066
13	Office expenses	58,508	24,919	18,141	15,448
14	Information technology	74,051	31,539	22,961	19,551
15	Royalties	0	0	0	0
16	Occupancy	52,590	0	52,590	0
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
40	·	0	0	0	0
19	Conferences, conventions, and meetings .	23,607	7,082	7,082	9,443
20 21	Interest	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	28,376	0	28,376	0
24	Other expenses. Itemize expenses not covered	20,370	0	20,370	
	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.)				
а	Professional membership fees	5,289	2,380	2,380	529
b	Marketing and donor outreach	93,181	41,214	16,995	34,972
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	9,328,271	8,071,509	782,413	474,349
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or	note	to any line in this Pa	t X		
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			0	1	0
	2	Savings and temporary cash investments			5,050,559	2	6,348,639
	3	Pledges and grants receivable, net			349,391	3	201,165
	4	Accounts receivable, net	[27,769	4	33,041	
	5	Loans and other receivables from any current of trustee, key employee, creator or founder, substa- controlled entity or family member of any of thes	contributor, or 35%				
	6	Loans and other receivables from other disqual	-		0	5	0
	6	under section 4958(f)(1)), and persons described		0	6	0	
ts	7	Notes and loans receivable, net			0	7	0
Assets	8	Inventories for sale or use		-	0	8	0
As	9				0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	54,303			
	b	Less: accumulated depreciation	10b	54,303	0	10c	0
	11	Investments – publicly traded securities			139,982,058	11	143,232,317
	12	Investments - other securities. See Part IV, line 1	1 .	[21,469,560	12	22,416,630
	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		296,196	15	307,598	
	16	Total assets. Add lines 1 through 15 (must equa	ıl line	33)	167,175,533	16	172,539,390
	17	Accounts payable and accrued expenses			8,849	17	46,306
	18	Grants payable		F	511,906	18	577,482
	19	Deferred revenue	0	19	0		
	20	Tax-exempt bond liabilities	0	20	0		
	21	Escrow or custodial account liability. Complete F	29,954,835	21	25,592,932		
Liabilities	22	Loans and other payables to any current or trustee, key employee, creator or founder, substa- controlled entity or family member of any of thes	contributor, or 35%		00		
.iak	00		-			22	0
_	23	Secured mortgages and notes payable to unrelated		· •	0		0
	24 25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, parties, and other liabilities not included on lines	payab 17-2	oles to related third 4). Complete Part X	0	24	0
		of Schedule D			350,503		306,307
	26	Total liabilities. Add lines 17 through 25			30,826,093	26	26,523,027
nces		Organizations that follow FASB ASC 958, che and complete lines 27, 28, 32, and 33.	ck he	re 🔽			
ala	27	Net assets without donor restrictions		[136,165,477	27	145,817,466
J B	28				183,963	28	198,897
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 98 and complete lines 29 through 33.	58, ch	eck here			
o	29	Capital stock or trust principal, or current funds			29		
ets	30	Paid-in or capital surplus, or land, building, or eq	Juipm	ent fund		30	
1ss	31	Retained earnings, endowment, accumulated inc	come,	or other funds .		31	
et /	32			[136,349,440	32	146,016,363
ž	33	Total liabilities and net assets/fund balances .			167,175,533	33	172,539,390

Form 990 (2023) Page **12**

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)		14,18	4,207				
2	Total expenses (must equal Part IX, column (A), line 25)		9,32	8,271				
3	Revenue less expenses. Subtract line 2 from line 1		4,85	5,936				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	136,349,440						
5	Net unrealized gains (losses) on investments		4,76	6,964				
6								
7	Investment expenses			0				
8	Prior period adjustments			0				
9	Other changes in net assets or fund balances (explain on Schedule O)		4	4,023				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
	32, column (B))	1	46,01	6,363				
Part	XII Financial Statements and Reporting			_				
	Check if Schedule O contains a response or note to any line in this Part XII			\sqcup				
			Yes	No				
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on							
	Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		~				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or							
	reviewed on a separate basis, consolidated basis, or both.							
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?	2b	~					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a							
	separate basis, consolidated basis, or both.							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	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? .	2c	~					
	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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?							
l.	•	3a		-				
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 .	3b						

Form **990** (2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization					Employer identification	n number			
JEWISH COMMUNITY FOUNDATION OF					06-13				
Part I Reason for Public Cha						ons.			
The organization is not a private foundation		,		-	•				
1 A church, convention of church					U(D)(1)(A)(I).				
2 A school described in section3 A hospital or a cooperative ho				-	\/A\/;;;\				
4 A medical research organizati						(iii) Enter the			
hospital's name, city, and stat	·e:								
5 An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in			
7 An organization that normally									
8 A community trust described		•	Part II.)						
9 An agricultural research organ or university or a non-land-gra university:	nization described ant college of agr	d in section 170(b)(1) iculture (see instruction	(A)(ix) op ons). Ente	er the nan	ne, city, and state of	the college or			
10 An organization that normally receipts from activities related support from gross investmen acquired by the organization a	after June 30, 197	related business taxal 75. See section 509(a	ble incom a)(2) . (Cor	ne (less se mplete Pa	ection 511 tax) from art III.)	o fees, and gross 33 ¹ /3% of its businesses			
11 _ An organization organized and	•	,	•		` '` '				
12 An organization organized and	•		•		,				
one or more publicly supporte the box on lines 12a through 1.									
 Type I. A supporting organization supporting organization. 	n(s) the power to	regularly appoint or e	lect a ma	jority of t					
b Type II. A supporting orga control or management of organization(s). You must	the supporting o	rganization vested in	the same						
c Type III functionally integ						ally integrated with,			
d Type III non-functionally that is not functionally interequirement (see instructional see instructio	grated. The orga	nization generally mu	st satisfy	a distribu	ution requirement an				
e Check this box if the organ functionally integrated, or	nization received	a written determination	on from tl	ne IRS tha	at it is a Type I, Type	e II, Type III			
f Enter the number of supported									
g Provide the following information	n about the supp	orted organization(s).							
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
			Yes	No					
(A)									
(B)									
(C)	C)								
(D)									
(E)									
Total									

Schedule A (Form 990) 2023 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 2,530,364 4,585,932 10,458,636 4,007,527 4,973,941 26,556,400 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 4 2,530,364 10,458,636 4,007,527 4,973,941 4,585,932 26,556,400 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) 5,104,243 **Public support.** Subtract line 5 from line 4 21,452,157 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 10,458,636 2,530,364 4,585,932 4,007,527 4,973,941 26,556,400 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 756,624 1,080,001 3,085,126 2,287,335 2,587,803 9,796,889 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 16,634 195,088 288,107 328,639 328,225 1,156,693 **Total support.** Add lines 7 through 10 11 37,509,982 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 57.19 % 14 Public support percentage from 2022 Schedule A, Part II, line 14 15 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2022. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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

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

Secti	on A. Public Support			, , -		,	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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						
3	organization's tax-exempt purpose						
3	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	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						
_	•						
с 8	Add lines 7a and 7b						
U	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	(0,7 = 0 + 0	(0) = 0 = 0	(0, 2021	(0, 2022	(0, =0=0	(-)
10a							
	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						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on 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						
12	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	 s first_second	third fourth	or fifth tax ve	l Par as a sectio	n 501(c)(3)
	organization, check this box and stop he	•			-		. , . ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8	3, column (f), c	livided by line	13, column (f))		15	%
16	Public support percentage from 2022 Sch						%
Secti	on D. Computation of Investment In	come Perce	ntage			· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for 2023 (line 10c, colun	nn (f), divided b	oy line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2022						%
19a	331/3% support tests-2023. If the organ						
	17 is not more than $33^{1}/_{3}\%$, check this box	and stop here .	. The organizati	on qualifies as	a publicly supp	orted organizat	ion
b	331/3% support tests-2022. If the organize						
	line 18 is not more than 331/3%, check this l	box and stop h	ere. The organ	ization qualifies	s as a publicly s	upported orgar	ization .
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions . \square

Schedule A (Form 990) 2023 Page 4

Part IV **Supporting Organizations**

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

Se

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

determine whether the organization had excess business holdings.)

Schedule A (Form 990) 2023 Page 5 Part IV **Supporting Organizations** (continued) Yes No 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 on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 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. 2 Section C. Type II Supporting Organizations Yes No 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). 1 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? 1 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). 2 By reason of the relationship described on line 2, above, 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. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete **line 2** below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No 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. 2a b Did the activities described on line 2a, above, 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. 2b Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No," provide details in Part VI. 3a

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

3b

Schedule A (Form 990) 2023 Page **6**

				. ago -
Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Sect	tion 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		
Sect	tion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-functional	ally i	integrated Type III suppor	ting organization
	(see instructions).			

Schedule A (Form 990) 2023 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018 From 2019 **c** From 2020 **d** From 2021 **e** From 2022 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . .

Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part II, Line 10 - Administrative fees from Agency Custodial accounts \$328,225

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	t the organization		Employer identification number
JEWIS	SH COMMUNITY FOUNDATION OF GREATER HARTFOR	D INC	06-1372107
Par	t I Organizations Maintaining Donor Advis	sed Funds or Other Similar Fund	s or Accounts
	Complete if the organization answered "		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	208	994
2	Aggregate value of contributions to (during year) .	3,366,724	1,607,217
3	Aggregate value of grants from (during year)	4,815,833	2,425,965
4	Aggregate value at end of year		94,624,491
5	Did the organization inform all donors and donor a		
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, an		
	only for charitable purposes and not for the benefit		• •
	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Par	Conservation Easements		
	Complete if the organization answered "		
1	Purpose(s) of conservation easements held by the o		
	Preservation of land for public use (for example, recrea		
	Protection of natural habitat	☐ Preservation of	a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization hel	d a qualified consequation contribution	in the form of a consequation
	easement on the last day of the tax year.	d a qualified conservation contribution	
_			Held at the End of the Tax Year
a			. 2a
b	Total acreage restricted by conservation easements Number of conservation easements on a certified hi		
c d	Number of conservation easements included on line		
_	on a historic structure listed in the National Register		· 2d
3	Number of conservation easements modified, trans	ferred, released, extinguished, or term	
	tax year	, , ,	, 5
4	Number of states where property subject to conserv	vation easement is located	
5	Does the organization have a written policy rega		
	violations, and enforcement of the conservation eas	ements it holds?	· · · · · · □ Yes □ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing o	conservation easements during the year
•	D	0.1 -1	
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports co		
·	sheet, and include, if applicable, the text of the footi		•
	organization's accounting for conservation easemer	_	
Part	III Organizations Maintaining Collections	of Art. Historical Treasures. or C	Other Similar Assets
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FASI		e statement and balance sheet works
	of art, historical treasures, or other similar assets	held for public exhibition, education,	or research in furtherance of public
	service, provide in Part XIII the text of the footnote to	o its financial statements that describe	es these items.
b	If the organization elected, as permitted under FAS	B ASC 958, to report in its revenue s	tatement and balance sheet works of
	art, historical treasures, or other similar assets held		earch in furtherance of public service,
	provide the following amounts relating to these item		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art,		assets for financial gain, provide the
	following amounts required to be reported under FA	-	
а	Revenue included on Form 990, Part VIII, line 1 .		\$

b Assets included in Form 990, Part X

Schedul	e D (Form 990) 2023									P	age 2
Part	Organizations Maintaining C	collections of A	Art. Histo	orical T	reasures	or Ot	her Similar A	Asse	ets (co	ntinu	ed)
3	Using the organization's acquisition, ac collection items (check all that apply).										
а	☐ Public exhibition		dГ	loand	or exchang	e progr	am				
b	☐ Scholarly research										
C	☐ Preservation for future generations		C _								
4	Provide a description of the organization	n's collections a	nd explai	n how th	ney further	the org	ganization's ex	emp	t purpo	se in	Par
	XIII.										
5	During the year, did the organization so assets to be sold to raise funds rather the							nilar	☐ Yes	s 🗆	No
Part	IV Escrow and Custodial Arran	gements									
	Complete if the organization a 990, Part X, line 21.		on Form	n 990, F	Part IV, line	9, or	reported an a	amo	unt on	Forn	า
1a	Is the organization an agent, trustee, concluded on Form 990, Part X?							not	✓ Yes	s 🗌	No
b	If "Yes," explain the arrangement in Par	t XIII and comple	te the foll	owing ta	ıble.						
								Amo	ount		
С	Beginning balance					10	;		2	9,954	,835
d	Additions during the year					10	I			4,006	,176
е	Distributions during the year					1e	;			8,368	,079
f	Ending balance					1f	:		2	5,592	,932
2a	Did the organization include an amount	on Form 990, Pa	ırt X, line 2	21, for es	scrow or co	ustodia	l account liabil	ity?	✓ Yes	s 🗌	No
b	If "Yes," explain the arrangement in Par	t XIII. Check here	if the exp	olanation	n has been	provide	ed in Part XIII			~	
Par			•			•					
	Complete if the organization a	nswered "Yes"	on Form	า 990, F	art IV, line	e 10.					
		(a) Current year	(b) Prior	year	(c) Two year	s back	(d) Three years ba	ack	(e) Four	years b	ack
1a	Beginning of year balance	87,731,084	81,	941,193	94,0	83,498	70,327,4	109	7	0,316	,409
b	Contributions	1,607,217		576,875	6,5	11,472	2,045,7			1,702	
С	Net investment earnings, gains, and										
	losses	8,738,498	7,	257,216	-12,6	16,275	25,638,0	002		750	,845
d	Grants or scholarships	2,425,965	2,	089,139	1,9	20,053	2,668,3	365		2,080	,087
е	Other expenditures for facilities and										
	programs	71,848		43,760	3,0	67,119	289,0	034		-871	,013
f	Administrative expenses	954,496		911,301	1,0	50,330	970,2	271		1,233	,651
g	End of year balance	94,624,490	87,	731,084	81,9	41,193	94,083,4	198	7	0,327	,409
2	Provide the estimated percentage of the	e current year en	d balance	(line 1g	, column (a)) held	as:	•			
а	Board designated or quasi-endowment	100 %	6								
b	Permanent endowment 0 9										
С	Term endowment 0 %										
	The percentages on lines 2a, 2b, and 2d	should equal 10	00%.								
3a	Are there endowment funds not in the porganization by:			ation tha	at are held	and ad	ministered for	the	٦	Yes	No
	(i) Unrelated organizations?								3a(i)		~
									3a(ii)		~
b	If "Yes" on line 3a(ii), are the related org								3b		
4	Describe in Part XIII the intended uses of					•				I_	
Part											
	Complete if the organization a		on Form	า 990. F	art IV. line	e 11a.	See Form 99	0, P	art X. li	ne 1	0.
	Description of property	(a) Cost or oth	ner basis	(b) Cost o	r other basis ther)	(c)	Accumulated epreciation	,	(d) Book		
1a	Land		0		0						0
b	Buildings		0		0		0				0
	Leasehold improvements	•	0		0		0				0

0

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

d Equipment

e Other

0

0

54,303

0

Schedule D (Form 990) 2023 Page **3**

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						
	eld equity interests						
(3) Other Pri	vate Equity	10,932,276	End-of-Year Market Value				
(A) Ventur	e Capital	7,874,313	End-of-Year Market Value				
	e International Equity	3,610,041	End-of-Year Market Value				
(C)							
(D)							
(E)							
(F)							
(G)							
(H)	(h) must a must Farm 2000 Part V line 10 and (D))						
	mn (b) must equal Form 990, Part X, line 12, col. (B))	22,416,630					
Part VIII	Investments—Program Related	IV line 11e Coe E	own 000 Dort V line 12				
-	Complete if the organization answered "Yes" on Form 990, Part						
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(4)							
(1)							
(2)							
(3)							
(5)							
(6)							
(7)							
(8)							
(9)							
	mn (b) must equal Form 990, Part X, line 13, col. (B))						
Part IX	Other Assets Complete if the organization answered "Yes" on Form 990, Part	IV, line 11d. See F	orm 990, Part X, line 15.				
	(a) Description		(b) Book value				
<u>(1)</u>							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)	mn (b) must equal Form 990, Part X, line 15, col. (B))						
Part X	Other Liabilities	<u> </u>	•				
ruitx	Complete if the organization answered "Yes" on Form 990, Part	IV line 11e or 11f	See Form 990 Part X				
	line 25.	14, 1110 110 01 111.	000101111000,14117,				
1.	(a) Description of liability		(b) Book value				
(1) Federal in			(2) 2001. (4.14)				
	erest agreements		243,343				
	abilities-operating		62,964				
(4)	zemnos oporaning		52,701				
(5)							
(6)							
(7)							
(8)							
(9)							
	mn (b) must equal Form 990, Part X, line 25, col. (B))		. 306,307				
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ						

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 .

•

	complete it the organization and total and total and total and total		
1	Total revenue, gains, and other support per audited financial statements	1	18,811,940
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	4,810,987
3	Subtract line 2e from line 1	3	14,000,953
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 183,254		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	183,254
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	14,184,207

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	lotal expenses and losses per audited financial statements	1	9,145,017
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	9,145,017
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 183,254		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	183,254
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	9.328.271

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 - As part of its agency 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 - As part of its 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 the commingled investment pool. These funds are treated as assets and liabilities on the books of the Foundation.

Schedule D, Part V, Line 4 - The 1,202 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 grant-making 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 include 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 - Management has analyzed the tax positions taken by the Foundation and has concluded that, as of June 30, 2024 and 2023, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. If the Foundation had unrelated business income taxes, it would recognize interest and penalties associated with any tax matters as part of the income provision and include accrued interest and penalties with the related tax liability in the statements of financial position.

Schedule D, Part XI, Line 2d - Other amounts included in line 2d include the change in the value of split interest agreements and life insurance policies.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990. Part IV. line 14b. 15. or 16. Attach to Form 990.

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990. Part IV. line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to ☐ No award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (c) Number of (a) Region (b) Number (d) Activities conducted in the (e) If activity listed in (d) is (f) Total employees, of offices in expenditures for region (by type) (such as, a program service, agents, and independent fundraising, program services, the region describe specific type of and investments investments, grants to recipients service(s) in the region in the region contractors located in the region) in the region (1) (2)(3)(4)(5) (6)(7) (8) (9) (10) (11)(12)(13)(14)(15)(16) (17)Subtotal Total from continuation sheets to Part I

Totals (add lines 3a and 3b)

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description (i) Method of section and EIN organization grant cash grant cash noncash of noncash assistance valuation (book, FMV, (if applicable) disbursement assistance appraisal, other) (1) North America (incl. Grant to benefit the M 7,369 Check 0 (2) (3) (4) (5) (6) (7) (8) (9)(10)(11) (12)(13)(14)(15)(16)Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

0

Schedule F (Form 990) 2023

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2023 Page **4**

Part IV Foreign Forms

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

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023 Page 5 Part V **Supplemental Information** Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE I (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

Name of the organization **Employer identification number** JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC 06-1372107 **General Information on Grants and Assistance** 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 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. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant noncash assistance noncash assistance or assistance other) (1) Sch I, Stmt 1 (10)(11)(12)0

Schedule I (Form 990) 2023

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 College scholarships	69	231,200	0		
2 Israel experience scholarships	4	24,000	0		
_ 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 - 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 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 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. Grants for scholarships are paid directly to the institution the student is attending. Payment of scholarship awards is conditioned upon proof of enrollment and, where appropriate, receipt of a transcript for the most recently completed semester, as well as satisfaction of any other ongoing qualifications for the scholarship.

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Form: Schedule I (2023)

Page: 1

Pagrt II, Line 1

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

Recipient EIN Amt. of cash Amt. of nongrant cash asst. Name and address 10000 Degrees 95-3667812 9,285 0 1650 Los Gamos Drive Suite 120 San Rafael, CA 94903 IRC code section 501(C)(3) Method of valuation book Desc. of Non-Cash Asst. Purpose of grant Scholarships 65-1203744 30,000 Name and address Achievement First O 470 James Street Suite 007 New Haven, CT 06513 IRC code section 501(C)(3) Method of valuation book Desc. of Non-Cash Asst. Purpose of grant Education Name and address Adas Israel Congregation 53-0196563 5,360 0 2850 Quebec Street NW Washington, DC 20008 IRC code section 501(C)(3) Method of valuation book Desc. of Non-Cash Asst. Purpose of grant General operating support Name and address American Friends of Magen David Adom 13-1790719 10,560 0 20 West 36th Street **Suite 1100** New York, NY 10018-9784 IRC code section 501(C)(3) Method of valuation book Desc. of Non-Cash Asst. Purpose of grant General operating support and emergency relief Name and address Anti-Defamation League 13-1818723 7,200 1100 Connecticut Avenue Suite 1020 Washington, DC 20036 IRC code section 501(C)(3) Method of valuation book Desc. of Non-Cash Asst. Purpose of grant General operating support Anti-Defamation League CT Regional Office Name and address 13-1818723 14,970 0 1000 Lafayette Blvd Suite 402 Bridgeport, CT 06604 IRC code section 501(C)(3) Method of valuation book Desc. of Non-Cash Asst. Purpose of grant General operating support

Schedule I, Part IV, Statem	nent 1	JEWISH COMMUNITY FOUNDATION O	F GREATER HARTFO	ORD INC
Name and address	Berkshire Opera Festival Inc	47-1596750	25,000	0
	54 Wendell Avenue			
	Suite 5			
IRC code section	Pittsfield, MA 01201 501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Beth David Synagogue	06-0712261	5,749	0
	20 Dover Road			
	West Hartford, CT 06119			
IRC code section	501(C)(3)			
Method of valuation Desc. of Non-Cash Asst.	book			
Purpose of grant	General operating support and special programm	nina		
Name and address		06-0699241	66 693	0
Name and address	Beth El Temple of West Hartford 2626 Albany Avenue	06-0699241	66,683	U
	West Hartford, CT 06117-2331			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and tribute			
Name and address	Big Brothers Big Sisters of Connecticut	06-0850379	30,525	0
	30 Laurel Street			
IDC and anotion	Hartford, CT 06106			
IRC code section Method of valuation	501(C)(3) book			
Desc. of Non-Cash Asst.	book			
Purpose of grant	General operating support			
Name and address	Brandeis University	04-2103552	5,500	0
	Mailstop 126			
	Box 549110			
	Waltham, MA 02454-9110			
IRC code section	501(C)(3)			
Method of valuation Desc. of Non-Cash Asst.	book			
Purpose of grant	General operating support and scholarships			
Name and address	Central Fund of Israel	13-2992985	10,000	0
Name and address	461 Central Avenue	10 2002000	10,000	O
	Cedarhurst, NY 11516			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Emergency aid			
Name and address	Chabad East of the River Inc	06-1030000	21,300	0
	25 Harris Street			
IRC code section	Glastonbury, CT 06033-1106 501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Chabad Friendship Circle	06-1030000	12,250	0
	2352 Albany Avenue			

Schedule I, Part IV, Statem	nent 1	JEWISH COMMUNITY FOUNDATION OF G	REATER HARTFO	ORD INC
	West Hartford, CT 06117			
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	06-1030000	80,056	0
	2352 Albany Avenue			
	West Hartford, CT 06117			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programn	ning		
Name and address	Charter Oak Cultural Center	06-1026597	84,498	0
	21 Charter Oak Avenue			
	Hartford, CT 06106			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and capital campaign			
Name and address	Circle of Friends	47-4152491	10,000	0
	40 King Street			
	Norwalk, CT 06851			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Colby College	01-0211497	51,000	0
	4000 Mayflower Hill			
	Waterville, ME 04901			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Education			
Name and address	Congregation Adath Israel	06-0669110	22,895	0
	PO Box 337			
	Middletown, CT 06457-0337			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and scholarships			
Name and address	Congregation Ahavath Yerusholaim	13-3478709	10,800	0
	3 Stralisk Court			
	Unit 301			
	Monroe, NY 10950			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.	Conoral operating compart			
Purpose of grant	General operating support			
Name and address	Congregation Beth Israel	06-0692758	86,081	0
	701 Farmington Avenue			
	West Hartford, CT 06119-1724			
IRC code section	501(C)(3)			
Method of valuation	book			

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Desc. of Non-Cash Asst.	nent 1 J	EWISH COMMUNITY FOUNDATION OF	GREATER HARTFO	JRD INC
Purpose of grant	General operating support and special programming			
Name and address	Congregation Beth Shalom Rodfe Zedek	06-1556241	6,348	0
Nume and address	55 East Kings Highway	00 1000241	0,040	Ü
	Chester, CT 06412			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Congregation Kol Haverim	22-2586288	24,442	0
	1079 Hebron Avenue			
	Glastonbury, CT 06033-0473			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and capital needs			
Name and address	Connecticut Cancer Foundation	06-1240574	25,000	0
	15 North Main Street			
	Old Saybrook, CT 06475			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.	General operating support			
Purpose of grant	, , , ,			
Name and address	Connecticut Children's Foundation	06-0646755	70,591	0
	282 Washington Street			
IDC and anotion	Hartford, CT 06106			
IRC code section Method of valuation	501(C)(3) book			
Desc. of Non-Cash Asst.	DOOK			
Purpose of grant	General operating support			
Name and address	Connecticut Museum of Culture and History	06-6026012	8,807	0
Nume and address	One Elizabeth Street	00 0020012	0,007	J
	Hartford, CT 06105			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Dignity Grows	85-2708901	36,000	0
	40 Woodland Street			
	Hartford, CT 06105-2331			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Farmington Valley Jewish Congregation - Emek Sh	alom 06-6080265	14,000	0
	55 Bushy Hill Road			
	Simsbury, CT 06070			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Capital needs and programming			
Name and address	Federation Homes Inc	06-1019012	8,454	0

Schedule I, Part IV, Statement 1		JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC		
	156 Wintonbury Avenue			
	Bloomfield, CT 06002			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Freedom For All	27-4874257	6,000	0
	PO Box 536			
	New York, NY 10014			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.	Conoral operating support			
Purpose of grant	General operating support			
Name and address	Friends of Israel Defense Forces	13-3156445	181,230	0
	PO Box 4224			
IRC code section	New York, NY 10163			
Method of valuation	501(C)(3) book			
Desc. of Non-Cash Asst.	DOOK			
Purpose of grant	General operating support and emergency relief			
Name and address	Gifts of Love	06-1309318	6,100	0
	34 East Main Street			
	Avon, CT 06001			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Hadassah Hartford Chapter	13-1656651	5,283	0
	43 Carlyle Road			
IDO and another	West Hartford, CT 06117			
IRC code section Method of valuation	501(C)(3) book			
Desc. of Non-Cash Asst.	DOOK			
Purpose of grant	General operating support			
		00.0040000	0.205	
Name and address	Hartford Hospital Corporate & Foundation Support	06-0646668	8,385	0
	80 Seymour Street			
	Hartford, CT 06101-9960			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming	ng		
Name and address	Hartford Stage	06-0790484	9,500	0
	50 Church Street			
	Hartford, CT 06103			
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 Immigrant Aid Society	13-5633307	7,000	0
	PO Box 97077			
	Washington, DC 20090-7077			
IRC code section	501(C)(3)			

Schedule I, Part IV, Statem	ent 1 JEWISH C	OMMUNITY FOUNDATION OF	GREATER HARTFO	ORD INC
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Hebrew Senior Care Inc	06-0646672	55,238	0
	One Abrahms Boulevard			
IDO I II	West Hartford, CT 06117-1525			
IRC code section Method of valuation	501(C)(3) book			
Desc. of Non-Cash Asst.	DOOK			
Purpose of grant	General operating support, special programming and capital			
Name and address	Hillel The Berman Jewish University Center of Pittsburgh	25-6065236	6,280	0
Name and address	4607 Forbes Avenue	23-0003230	0,200	U
	Pittsburgh, PA 15213			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Special programming			
Name and address	Holocaust Learning and Education Fund	46-3296698	100,000	0
	3064 Birkdale			
	Weston, FL 33332			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst. Purpose of grant	General operating support			
Name and address	inSIGHT Through Education	27-3388434	12,000	0
	PO Box 33054 Palm Beach Gardens, FL 33420			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Israel Cancer Research Fund	51-0181215	10,500	0
	7 Lumanor Drive			
	Stamford, CT 06903			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.	Constal apprenting authors			
Purpose of grant	General operating support			
Name and address	Jewish Association for Community Living	06-1068312	87,196	0
	34 Jerome Avenue Suite 109			
	Bloomfield, CT 06002			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Jewishcolorado	01-0831698	10,000	0
	300 S Dahlia Street			
	Denver, CO 80246			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst. Purpose of grant	General operating support			
i dipose di gialit	Scholar operating support			

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Schedule I, Part IV, Statem	ent 1 JEWISH COMMUNITY	FOUNDATION OF	GREATER HARTE	OKD INC
Name and address	Jewish Family Services of Greater Hartford 333 Bloomfield Avenue Suite A	06-0653062	346,014	C
	West Hartford, CT 06117			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Jewish Federation of Greater Hartford 333 Bloomfield Avenue	06-0655482	2,580,160	(
	Suite C			
	West Hartford, CT 06117			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support, programming, cemetery maintenance, and emergency relief			
Name and address	Jewish Federation of Greater Portland	93-0386825	10,000	C
	6680 SW Capitol Highway			
	Portland, OR 97219			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.	Special programming			
Purpose of grant	Special programming			
Name and address	Jewish Federation of Palm Beach County	59-0948696	25,000	C
	1 Harvard Circle Suite 100			
	West Palm Beach, FL 33409			
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 South Palm Beach County	59-1945109	6,000	C
	9901 Donna Klein Blvd		•	
	Boca Raton, FL 33428-1788			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and emergency relief			
Name and address	Jewish Federation of the Berkshires	04-2131409	7,500	C
	196 South Street			
	Pittsfield, MA 01201			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.	Charial programming			
Purpose of grant	Special programming			
Name and address	Jewish Historical Society of Greater Hartford	06-1217339	44,063	C
	333 Bloomfield Avenue			
	Suite B			
	West Hartford CT 06117			
IRC code section	West Hartford, CT 06117 501(C)(3)			
IRC code section Method of valuation	West Hartford, CT 06117 501(C)(3) book			

Schedule I, Part IV, Staten Purpose of grant	General operating support			
Name and address		06-1329245	41,474	
Name and address	Jewish Teen Learning Connection 333 Bloomfield Avenue	00-1329243	41,474	
	Suite C			
	West Hartford, CT 06117			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	JFACT Fund Inc	06-1491945	24,712	(
	40 Woodland Street		,	
	Hartford, CT 06105			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Joyce D and Andrew J Mandell Jewish Community Center	06-0662142	221,437	C
	335 Bloomfield Avenue			
	West Hartford, CT 06117-1543			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Jupiter Medical Center	59-1460239	15,000	(
	1210 South Old Dixie Highway			
	Jupiter, FL 33458			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Khal Tiferes Yosef	81-1629202	20,000	C
	53 Parsons Street			
	Brighton, MA 02135			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Kingswood-Oxford School	06-0646688	40,000	(
	170 Kingswood Road			
	West Hartford, CT 06119			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Scholarships			
Name and address	Laughing Pony Rescue Inc	27-2914210	7,500	(
	PO BOX 32			
	Rancho Santa Fe, CA 92067-0032			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
_ , ,	Constal approximation are not			

35,000

0

42-1370848

Purpose of grant

Name and address

General operating support

Lifespace Foundation

Schedule I, Part IV, Statem	nent 1 JEWISH COMMUNIT	Y FOUNDATION OF	GREATER HARTFO	ORD INC
	Harbour's Edge			
	401 E Linton Blvd			
	Delray Beach, FL 33483			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Scholarships			
Name and address	Maurice Greenberg Center for Judaic Studies	06-0731360	8,433	0
	University of Hartford			
	200 Bloomfield Avenue			
	West Hartford, CT 06117-1599			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Mayo Clinic	41-6011702	25,000	0
	Department of Development			
	200 First Street SW			
	Rochester, MN 55905			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Moishe House	26-2599786	8,000	0
	441 Saxony Road			
	Encinitas, CA 92024			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Special programming			
Name and address	New England Jewish Academy	06-1455973	227,936	0
	300 Bloomfield Avenue			
	West Hartford, CT 06117			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support, special programming, capital and scholarsh	ips		
Name and address	New Israel Fund	94-2607722	8,750	0
	PO Box 70358		•	
	Philadelphia, PA 19176-0358			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Operation Smile	54-1460147	20,000	0
rtamo ana adal 555	3641 Faculty Boulevard	011100111	20,000	Ü
	Virginia Beach, VA 23453-8000			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
		05 1601249	E E00	^
Name and address	Pasadena Jewish Temple and Center	95-1691318	5,500	0

1434 North Altadena Drive

Pasadena, CA 91107 IRC code section 501(C)(3) Method of valuation book Desc. of Non-Cash Asst. Purpose of grant General operating support Name and address Planned Parenthood of Delaware 625 N Shipley Street Wilmington, DE 19801 IRC code section 501(C)(3)	0
Method of valuation Desc. of Non-Cash Asst. Purpose of grant General operating support Planned Parenthood of Delaware 625 N Shipley Street Wilmington, DE 19801 book General operating support 51-0066725 10,000	0
Desc. of Non-Cash Asst. Purpose of grant General operating support Planned Parenthood of Delaware 625 N Shipley Street Wilmington, DE 19801 General operating support 51-0066725 10,000	0
Purpose of grant General operating support Name and address Planned Parenthood of Delaware 625 N Shipley Street Wilmington, DE 19801 General operating support 51-0066725 10,000	0
Name and address Planned Parenthood of Delaware 625 N Shipley Street Wilmington, DE 19801 51-0066725 10,000	0
625 N Shipley Street Wilmington, DE 19801	0
Wilmington, DE 19801	
•	
IRC code section 501(C)(3)	
Method of valuation book	
Desc. of Non-Cash Asst.	
Purpose of grant General operating support	
Name and address Preservation Society of Newport County 05-0252708 15,000	0
424 Bellevue Avenue	
Newport, RI 02840	
IRC code section 501(C)(3)	
Method of valuation book	
Desc. of Non-Cash Asst.	
Purpose of grant Capital needs	
Name and address Reconstructing Judaism 23-1710675 40,000	0
1299 Church Road	
Wyncote, PA 19095	
IRC code section 501(C)(3)	
Method of valuation book	
Desc. of Non-Cash Asst.	
Purpose of grant Special programming	
Name and address Rockefeller Philanthropy Advisors Inc 13-3615533 75,000	0
90 Church Street	
7082	
New York, NY 10008-7082	
IRC code section 501(C)(3)	
Method of valuation book	
Desc. of Non-Cash Asst.	
Purpose of grant Special programming	
Name and address Saint Francis Hospital and Medical Center Foundation Inc 06-1008255 6,500	0
Development Office	
95 Woodland Street	
Hartford, CT 06105-1299	
IRC code section 501(C)(3)	
Method of valuation book	
Desc. of Non-Cash Asst.	
Purpose of grant General operating support and special programming	
Name and address Schwab Charitable Fund 31-1640316 31,500	0
1958 Summit Park Drive	
Suite 200	
Orlando, FL 32810	
IRC code section 501(C)(3)	
Method of valuation book	
Desc. of Non-Cash Asst.	
Purpose of grant Community building	
Name and address Solomon Schechter Day School of Greater Hartford 06-0873657 182,775	0
26 Buena Vista Road	· ·
West Hartford, CT 06107	

Schedule I, Part IV, Statem	nent 1 JE	WISH COMMUNITY FOUNDATION OF	GREATER HARTFO	ORD INC
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support, special programming, cap	oital and scholarships		
Name and address	Sophie's Hope Foundation	84-5014314	74,868	0
	23 Briarcliff Drive		,	
	Hopkinton, MA 01748			
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	06-6011131	8,839	0
	41 West Hartford Road			
	Newington, CT 06111			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support, special programming and	capital		
Name and address	Temple Sinai Brookline	04-2123667	8,000	0
	50 Sewall Avenue			
	Brookline, MA 02446			
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 Bridge Family Center Inc	23-7013563	6,500	0
	1022 Farmington Avenue			
	West Hartford, CT 06107			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.	Conoral operating support and special programming			
Purpose of grant	General operating support and special programming			
Name and address	The Community Foundation for Greater New Haven	06-6032106	250,000	0
	70 Audubon Street			
IDC and anotion	New Haven, CT 06510-1248			
IRC code section Method of valuation	501(C)(3)			
Desc. of Non-Cash Asst.	book			
Purpose of grant	Community building			
Name and address	The Connecticut Hospice Inc	06-0878822	15,000	0
Name and address	PO Box 783	00-0070022	13,000	U
	Branford, CT 06405			
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 Emanuel Synagogue	06-0675032	26,480	0
	160 Mohegan Drive	33 337 3332	_0,.00	Ü
	West Hartford, CT 06117			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
-				

Name and address	The Hole in the Wall Gang Camp	06-1157655	15,000	(
	555 Long Wharf Drive			
	New Haven, CT 06511			
RC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	The Katharine Hepburn Cultural Arts Center Inc 300 Main Street	51-0646562	6,600	O
	Old Saybrook, CT 06475			
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	06-0653119	70,000	0
	4 Batchelder Road Windsor, CT 06095			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	Scholarships			
Name and address	Trinity College	06-0646927	11,760	0
	Development Office		,	
	300 Summit Street			
	Room TC243			
	Hartford, CT 06106			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support, special programming and scholarships			
Name and address	Trinity College Hillel	52-1844823	5,495	0
	Zachs Hillel House			
	74 Vernon Street			
IRC code section	Hartford, CT 06106			
Method of valuation	501(C)(3) book			
Desc. of Non-Cash Asst.	BOOK			
Purpose of grant	General operating support			
Name and address	UJA Federation of New York	51-0172429	6,000	0
ramo ana ada oco	130 East 59th Street	01 0172 120	0,000	Ü
	New York, NY 10022-1302			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	United States Holocaust Memorial Museum	52-1309391	7,100	0
	60 E 42nd Street			
	Suite 1000			
	New York, NY 10165			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.	Constal answering authorit			

Purpose of grant

General operating support

Name and address	Universities Allied for Essential Medicines	01-0833168	10,000	C
	641 S Street NW			
	Washington, DC 20001			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Assi				
Purpose of grant	General operating support			
Name and address	University of Connecticut Foundation Inc	06-6070722	78,500	(
	2390 Alumni Drive			
	Unit 3206			
	Storrs, CT 06269-3206			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Assi				
Purpose of grant	General operating support			
Name and address	University of Connecticut Hillel	06-6071635	47,809	(
	Trachten Zachs Hillel House			
	54 N Eagleville Road			
	Storrs, CT 06268			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Assi				
Purpose of grant	General operating support and special programming			
Name and address	University of Hartford Hillel	06-0731360	328,889	(
	200 Bloomfield Avenue			
	Park River Ground Floor			
	West Hartford, CT 06117			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Assi				
Purpose of grant	General operating support, special programming and capital			
Name and address	University of Pennsylvania	23-1352685	7,000	C
	The Penn Fund			
	2929 Walnut Street			
	Suite 300			
	Philadelphia, PA 19104			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Assi				
Purpose of grant	Special programming			
Name and address	Upstate Medical College Alumni Association	16-6038703	20,000	C
	Setnor Academic Building			
	750 E Adams Street			
	Suite 1510			
	Syracuse, NY 13210			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Assi				
Purpose of grant	General operating support			
Name and address	Voices of Hope	81-4736138	48,525	C
	20 Waterside Drive			
	Suite 100			

Farmington, CT 06032

Schedule I, Part IV, Statem	nent 1 JEWIS	SH COMMUNITY FOUNDATION OF (REATER HARTFO	ORD INC
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Wadsworth Atheneum Museum of Art	06-0653111	6,000	0
	600 Main Street			
	Hartford, CT 06103			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support and special programming			
Name and address	Watkinson School	06-0655136	5,500	0
	Development Office			
	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 operating support and special programming			
Name and address	Yale University School of Medicine	06-0646973	40,000	0
	Office of Development			
	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	Research			
Name and address	Yeshiva Achei Tmimim Lubavitz Services	04-6004494	7,500	0
	1148 Converse Street			
	Longmeadow, MA 01106			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			
Name and address	Young Israel of West Hartford	22-2568510	23,810	0
	2240 Albany Avenue			
	West Hartford, CT 06117			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support, special programming and cap	oital		
Name and address	Zoological Society of San Diego	95-1648219	10,000	0
	2929 Zoo Drive			
	Balboa Park, CA 92101			
IRC code section	501(C)(3)			
Method of valuation	book			
Desc. of Non-Cash Asst.				
Purpose of grant	General operating support			

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

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

Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

JEWIS	SH COMMUNITY FOUNDATION OF GREATER HARTFORD INC 06-13721	07		
Part	Questions Regarding Compensation			
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.		Yes	No
	 ☐ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (such as maid, chauffeur, chef) 			
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	1b	,	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	,	
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.			
	✓ Compensation committee ✓ Written employment contract ☐ Independent compensation consultant ✓ Compensation survey or study ✓ Form 990 of other organizations ✓ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		~
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		V
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. 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:			
а	The organization?	5a		~
b	Any related organization?	5b		~
6	If "Yes" on line 5a or 5b, describe in Part III. 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:	0-		
a b	The organization?	6a 6b		~
J	If "Yes" on line 6a or 6b, describe in Part III.	OB		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		~
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		,
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			

Regulations section 53.4958-6(c)?

9

Schedule J (Form 990) 2023

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.

		(B) Breakdown of W-2 ar			(C) Retirement and			(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Jacob A Schreiber, President	(i)	227,700	0	1,267	9,108	2,934	241,009	0
and CEO (End 1/16/24)	(ii)	0	0	0	0	0	0	0
Laura Whitney, Vice President	(i)	173,824	0	825	0	10,060	184,709	0
Finance 2	(ii)	0	0	0	0	0	0	0
Votherum I Compormon Vice	(i)	137,892	5,408	192	5,732	14,632	163,856	0
President Development	(ii)	0	0	0	0	0	0	0
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2023 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 - Annual social membership at Tumblebrook Country Club for Donor Outreach.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2023

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

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

06-1372107

Employer identification number

Part	Types of Property			'				
	. Jpsc see coperny	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	V	149	2,451,484	AVG MKT VA	ALUE		
10	Securities—Closely held stock .							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities-Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution-Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (
26	Other (
27	Other (
28	Other (
29	Number of Forms 8283 received							
	which the organization completed	Form 8283	3, Part V, Donee Acknowled	lgement	29	0		
							Yes	No
30a	During the year, did the organization							
	28, that it must hold for at least 3							
	used for exempt purposes for the		ing period?			30a		<u> </u>
b	If "Yes," describe the arrangemen							
31	Does the organization have a							
	contributions?					31	~	
32a	Does the organization hire or use	•	_					
	contributions?					32a		<u> </u>
b	If "Yes," describe in Part II.							
33	If the organization didn't report an	amount in	column (c) for a type of pro	perty for which column (a) i	s checked,			
	describe in Part II.							

Schedule M (Form 990) 2023 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990)

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 Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

Employer identification number

06-1372107

Form 990, Part III, Line 4d - Other Programs and Services (Expenses: \$2,892,067 including grants of \$2,062,356). These include the balance of grants awarded through community grantmaking programs, donor advised program and designated giving in program areas that include Arts and Culture, Social Justice, programs in Israel, Seniors, Religious and Spiritual Development, and Outreach.

Form 990, Part VI, Section A, Line 4 - The bylaws of the Foundation were amended in April 2024. Changes include reducing the percentage of trustees considered Jewish Federation of Greater Hartford individuals (directors, community trustees, life community trustees, or members of committee task forces of the Federation) from 70% to 50%. There was also a provision added that the term of a standing committee chair can be extended until conclusion of that service. All committee chairs shall be members of the Board of Trustees.

Form 990, Part VI, Section B, Line 11b - A draft IRS Form 990 was prepared by the Foundation's CFO and was distributed to the President and CEO, the Audit Committee chair, and the Foundation's independent auditors for review and comment. A draft of the complete Form 990 was distributed to full Board of Trustees on the board portal prior to filing.

Form 990, Part VI, Section B, Line 12c - The Foundation has adopted a code of ethics and conflict of individuals within the Foundation covered by the 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) specified 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, and Investment 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 members (and their families) associated with the Foundation to be alert to situations in which a conflict of interest could arise. The Foundation's 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 themselves from participation in discussions or decision making concerning the matter at hand; or (4) ask the individual to resign from their 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 CFO monitor proposed and ongoing transactions for conflicts of interest and would disclose them to the Chair of the Audit Committee and Chair of the Board of Trustees in order to deal with potential or actual conflicts, whether discovered before or after the transaction has occurred.

Form 990, Part VI, Section B, Line 15 - The Foundation has adopted a policy for setting compensation for its chief executive, officers, and "key employees". The policy is designed to ensure that the Foundation's executive compensation arrangements are reasonable. It includes three key components: (1) review and approval of compensation by a committee designated by the Board of trustees, provided that persons with conflicts of interest are not involved in their review or approval; (2) use of data as to comparable compensation for similarly qualified persons in functionally comparable positions at similarly situated organizations; and (3) contemporaneous documentation and record keeping with respect to the deliberations and decisions.

Form 990, Part VI, Section C, Line 19 - The Foundation publishes its audited statements on its website. The Foundation's 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 its website.

Form 990, Part XI, Line 9 - Change in market value of split interest agreements \$509 and change in cash surrender value of life insurance

\$43,514.	 	

Schedule O, Statement 1

JEWISH COMMUNITY FOUNDATION OF GREATER HARTFORD INC

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Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	See Schedule O, Statement 1 Other Programs and Services (Expenses: \$2,892,067 including grants of \$2,062,356) These include the balance of grants awarded through community grantmaking programs, donor advised program and designated giving in program areas that include Arts and Culture, Social Justice, programs in Israel, Seniors, Religious and Spiritual Development and Outreach.	2,892,068	2,062,356	328,225
Total:		2,892,068	2,062,356	328,225