EXTENDED TO MAY 15, 2023

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

A	For the 2	021 calendar year, or tax year beginning	JUL 1, 2021 and ending	JUN 30,	2022	
В	Check if applicable:	C Name of organization		D Em	ployer identifi	cation number
	Address	JEWISH FEDERATION OF CLEVELAND				
	Name change	Doing business as			34-0714445	
E	Initial return Final return/	Number and street (or P.O. box if mail is not of 25701 SCIENCE PARK DRIVE	(elivered to street address) Room/s	transfer for the same	ephone number 16.593.2900	
	termin- ated	City or town, state or province, country, and	ZIP or foreign postal code	G Gros	s receipts \$	134,949,484.
	Amended	CLEVELAND, OH 44122-7302		H(a) Is	this a group re	eturn
	Applica-	F Name and address of principal officer: MOZ	ELLE JACKSON	The same of	or subordinates	The second second
	pending	SAME AS C ABOVE				cluded? Yes No
		pt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527 If	"No," attach a	list, See instructions
		▶ WWW.JEWISHCLEVELAND.ORG		H(c) G	roup exemption	n number >
		ganization: X Corporation Trust I	Association	ear of format	ion: 1903 N	1 State of legal domicile: OH
	1 Bri	efly describe the organization's mission or mos	t significant activities: THE JEWISH F	EDERATION	OF	
ce	CL	EVELAND WORKS TO PRESERVE AND ENHA				
Governance	2 Ch	eck this box if the organization disc	ontinued its operations or disposed of m	ore than 25	% of its net ass	ets.
Ver	3 Nu	mber of voting members of the governing body				133
	4 Nu	mber of independent voting members of the go				131
8	5 Tot	tal number of individuals employed in calendar	year 2021 (Part V, line 2a)		5	238
/itie	6 Tot	tal number of volunteers (estimate if necessary		1211327114174141	6	937
Activities &	7 a Tot	tal unrelated business revenue from Part VIII, c	olumn (C), line 12		7a	1,197,921.
_	b Ne	t unrelated business taxable income from Forn	990-T, Part I, line 11	nerena en	7b	1,077,229.
	1			Prio	r Year	Current Year
·		ntributions and grants (Part VIII, line 1h)		9	2,961,393.	88,283,916.
Revenue					0.	0.
lev ev		estment income (Part VIII, column (A), lines 3,		1	7,648,462.	10,476,042.
ш	11 Oth	ner revenue (Part VIII, column (A), lines 5, 6d, 8	c, 9c, 10c, and 11e)		2,410,917.	3,806,996.
	12 Tot	al revenue - add lines 8 through 11 (must equa	Part VIII, column (A), line 12)	11	3,020,772.	102,566,954.
	Make Contract of	ants and similar amounts paid (Part IX, column		6	5,676,113.	71,495,881.
	The second second second	nefits paid to or for members (Part IX, column (The state of the s		0.	.0.
es		aries, other compensation, employee benefits		1	3,747,983.	15,025,317.
Expenses		fessional fundraising fees (Part IX, column (A),			5,018.	4,869.
- dx		al fundraising expenses (Part IX, column (D), lin				6 24 24
	17 Otr	ner expenses (Part IX, column (A), lines 11a-11c	, 11f-24e)		4,551,396.	5,462,112.
		al expenses. Add lines 13-17 (must equal Part			3,980,510.	91,988,179,
		venue less expenses. Subtract line 18 from line	12		9,040,262.	10,578,775,
ts or	00 Tot	ol assets (Darf V. lian 16)			Current Year	End of Year
Assets d Balanc	20 Tot 21 Tot	al assets (Part X, line 16) al liabilities (Part X, line 26)			0,867,798.	521,768,610. 77,301,430.
Net/		assets or fund balances. Subtract line 21 from	lino 20		8,717,857.	444,467,180.
		Signature Block	inic 20		0,121,001.	444,407,12001
-	3.000	of perjury, I declare that I have examined this return	including accompanying pohedules and state	omente and t	a the heat of my	knowledge and heliat it is
		nd complete. Declaration of preparer other than office				Knowledge and belief, it is
2	N	I MARINO ()	or y to based on an information or whiten propo	act nas any k	6/10	12022
Sign		Signature of officer			Date	1000
Here	100	MOZELLE JACKSON, ASST TREASURER				
		Type or print name and title				
	Pri	int/Type preparer's name	Preparer's signature	Date	Check	PTIN
Paid		JL HAMMERSCHMIDT	PAUL HAMMERSCHMIDT	5/15/202	23 self-employe	P01384178
Prep	arer Fir	m's name BDO USA, LLP			Firm's EIN ▶	13-5381590
Use	Only Fir	m's address 100 PARK AVENUE				
		NEW YORK, NY 10017-5001			Phone no. 212-	885-8000
May	the IRS o	discuss this return with the preparer shown about	ve? See instructions			Vos X No

34-0714445

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	THE JEWISH FEDERATION OF CLEVELAND SEEKS TO PROMOTE THE WELL-BEING OF	
	OUR COMMUNITY, ITS MEMBERS, AND JEWS THROUGHOUT THE WORLD; ENHANCE THE	
	CONTINUITY, SECURITY, AND UNITY OF THE JEWISH COMMUNITY; INCREASE	
	UNDERSTANDING OF JEWISH VALUES (CONT. SCHEDULE O) AND THEIR	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
Ū	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	/ AYDADSAS
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total e	•
	revenue, if any, for each program service reported.	Aperioco, aria
 4а	(Code:) (Expenses \$ 71,495,881. including grants of \$ 71,495,881.) (Revenue \$	1 133 761 \
40	ALLOCATIONS AND GRANTS FOR CHARITABLE, EDUCATIONAL, AND RELIGIOUS	
	PURPOSES. ANNUAL ALLOCATIONS FROM THE CAMPAIGN FOR JEWISH NEEDS ARE	
	MADE TO 15 LOCAL BENEFICIARIES AND PROGRAMS, AS WELL AS TO A NUMBER OF	
	U.S. ORGANIZATIONS CONDUCTING PROGRAMS TO MEET THE SOCIAL WELFARE,	
	RELIGIOUS, AND EDUCATIONAL NEEDS OF THE JEWISH COMMUNITY IN THE UNITED	
	STATES AND AROUND THE WORLD. ENDOWMENT FUND GRANTS ARE DESCRIBED	
	FURTHER ON SCHEDULE D, PART V, LINE 4 AND PART XIII. GRANTS FROM DONOR	
	ADVISED FUNDS SUPPORT JEWISH AND NON-JEWISH ORGANIZATIONS WHOSE	
	MISSIONS ARE NOT INCONSISTENT WITH THE FEDERATION'S MISSION.	
	MISSIONS ARE NOT INCONSISTENT WITH THE FEDERATION S MISSION.	
	1 200 014	20 722
4b	(Code:) (Expenses \$1,399,014. including grants of \$) (Revenue \$	28,732.
	DIRECT SERVICES INCLUDE PROGRAMS THAT HELP MEET THE SOCIAL WELFARE,	
	RELIGIOUS, AND EDUCATIONAL NEEDS OF PEOPLE IN CLEVELAND, ISRAEL, AND	
	AROUND THE WORLD. THESE INCLUDE:	
	1. GROWING JEWISH CLEVELAND'S EMPLOYMENT RELATED SUPPORT PROGRAM	
	PROVIDES ONE-ON-ONE ASSISTANCE FOR THE NETWORKING JOB-READY CANDIDATES	
	WHO ARE NEW TO NORTHEAST OHIO OR PLANNING A MOVE TO NORTHEAST OHIO.	
	2. THE JEWISH VOLUNTEER NETWORK (JVN) CONNECTS VOLUNTEERS TO A WIDE	
	RANGE OF OPPORTUNITIES IN BOTH THE JEWISH AND GENERAL COMMUNITY. IN THE	
	PAST YEAR, JVN VOLUNTEER EFFORTS HAVE INCLUDED FEEDING THE HUNGRY,	
4c		1,400,982.
	INDIRECT SERVICES PROVIDED BY THE FEDERATION THROUGH ITS STAFF AND	
	VOLUNTEERS INCLUDE:	
	1) HUMAN RESOURCE DEVELOPMENT, WHICH CULTIVATES AND DEVELOPS	
	LEADERSHIP FROM WITHIN THE COMMUNITY.	
	2) THE PLANNING AND ALLOCATIONS DEPARTMENT, WHICH WORKS WITH A NETWORK	
	OF 15 LOCAL BENEFICIARIES AND PROGRAMS TO MEET COMMUNITY NEEDS, ENGAGE	
	IN LONG-TERM AND STRATEGIC PLANNING, AND ALLOCATE FUNDS TO PRIORITY	
	PROGRAMS. THE COMMUNITY PLANNING COMMITTEE INITIATED A COMPREHENSIVE	
	DEMOGRAPHIC STUDY OF COMPOSITION, TRENDS, AND POTENTIAL NEEDS OF THE	
	CLEVELAND JEWISH COMMUNITY. THE FINDINGS OF THIS STUDY WILL HELP THE	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 79,015,832.	
		Form 990 (2021)

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34-0714445

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	<u> </u>		
-	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	i i		
J	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	١		
U		_	х	
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	21	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		v	
	Schedule D, Part III	8_	Х	_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			\vdash
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	110		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		_
10		16		X
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			x
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		├^
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			•
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

132003 12-09-21

	1990 (2021) JEWISH FEDERATION OF CLEVELAND	34-0714445	5	Р	age ²
Ра	rt IV Checklist of Required Schedules (continued)				
		ſ		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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's	I			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	I			
	Schedule J		23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and comple	ete			
	Schedule K. If "No," go to line 25a		24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		_
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to def	ease			
	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year	I			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," com	plete			
	Schedule L. Part I		25b		х
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? If "Yes," complete Schedule L, Part II		26	Х	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key emp				
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35%	·			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, I		27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part				
	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>				
ŭ	"Yes," complete Schedule L, Part IV		28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>		200		
·	"Yes," complete Schedule L, Part IV		28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	Г	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservat		LJ		
30			30		x
24	contributions? If "Yes," complete Schedule M		31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		20		x
	Schedule N, Part II	·····	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		00	х	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	·····	33	Λ	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,	I	0.4	х	
	Part V, line 1	I	34		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Г	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled e	· I		v	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	I	35b	Х	
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	······	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?				
De	Note: All Form 990 filers are required to complete Schedule O		38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance				_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>			X
		r		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	90			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0			

	check if concadic c contains a response of note to any line in this rate v					
					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	90			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
	(gambling) winnings to prize winners?			1c	Х	

132004 12-09-21

	m 990 (2021) JEWISH FEDERATION OF CLEVELAND 34-0714445 art V Statements Regarding Other IRS Filings and Tax Compliance (continued)									
			Yes	No						
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		100	No						
	filed for the calendar year ending with or within the year covered by this return	238								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.									
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		Х							
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	Х							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	ı								
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х						
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)									
E.o.		l <u>-</u>		х						
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			x						
b	, , , , , , , , , , , , , , , , , , , ,									
	, , , , , , , , , , , , , , , , , , , ,	I								
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization s			x						
h	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>								
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	l eb								
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b								
7	The state of the s	the payor? 7a		х						
a										
b										
С	to file Form 8282?	7c		х						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as req	uired? 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		Х						
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х						
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders 11a									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
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									
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 13b									
С	Enter the amount of reserves on hand									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15		х						
	If "Yes," see the instructions and file Form 4720, Schedule N.									

If "Yes," complete Form 6069. Form **990** (2021) 132005 12-09-21

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any

If "Yes," complete Form 4720, Schedule O.

16

17

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

	to line ed, es, et res selen, decembe the smearhetenees, proceeded, et changes en consedit et see metablishe.								
<u>C</u>	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion 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 133								
	If there are material differences in voting rights among members of the governing body, or if the governing								
_	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	, , , ,								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_	***						
	officer, director, trustee, or key employee?	2	Х						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			17					
_	of officers, directors, trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х					
6	Did the organization have members or stockholders?	6	Х						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a	Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b	Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Х						
b	Each committee with authority to act on behalf of the governing body?	8b	Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х					
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	X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	on Schedule O how this was done	12c	Х						
13	Did the organization have a written whistleblower policy?	13	Х						
14	Did the organization have a written document retention and destruction policy?	14	Х						
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	Х						
b	Other officers or key employees of the organization	15b	Х						
	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 with a								
	taxable entity during the year?	16a		Х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶OH, FL								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availat	ole					
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website X Upon request X Other (explain on Schedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial						
	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								
	MOZELLE JACKSON - 216.593.2900								
	25701 SCIENCE PARK DRIVE, CLEVELAND, OH 44122-7302								

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

Х

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, 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.

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

• 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.

(A) Name and title	(B) Average hours per	box	not c , un l e: cer ar	Pos heck ss pe	more rson i	than o	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) ERIKA B RUDIN-LURIA	40.00									
PRESIDENT * SEE SCH O				Х				453,002.	0.	179,893.
(2) BARRY REIS	40.00									
ASST TREASURER, SR. VP & CFO				Х				363,380.	0.	50,819.
(3) OREN BARATZ	40.00									
SENIOR VP-EXTERNAL AFFAIRS		_	_	_	Х	_		206,547.	0.	10,766.
(4) DANIEL STROM	40.00								_	
VP, CHIEF INFORMATION OFFICER						Х		202,120.	0.	10,481.
(5) RACHEL LAPPEN	40.00									
CHIEF DEVELOPMENT OFFICER				_	Х	_	_	205,907.	0.	10,931.
(6) ABBIE LEVIN	40.00							1=1 016		
ASST SECRETARY, SR. VP OPERATIONS	40.00			Х		_		171,216.	0.	19,713.
(7) ROBERT BERICK	40.00							1.61 0.15	•	04 505
ASST VP, CHIEF MARKETING OFFICER	40.00		_	_		Х		161,015.	0.	21,597.
(8) CAROL WOLF	40.00					١		157 070		41 740
ASST. VP, PLANNED GIVING & ENDOWMENTS	40.00					Х	_	157,870.	0.	41,749.
(9) TAMI CAPLAN	40.00	ł		١,,				125 (21	0	E1 E70
SECRETARY, SR. VP & CHRO	40.00			Х		_		135,631.	0.	51,579.
(10) ALLEN ROTH	40.00					x		124 470	0	En 121
SR. DIRECTOR, BUSINESS APPLICATIONS (11) KARI BLUMENTHAL	40.00					^		134,470.	0.	52,231.
MANAGING DIRECTOR OF FINANCE	40.00	ł				x		135 085	0.	23 073
(12) STEPHEN HOFFMAN * SEE SCH O	0.50		\vdash			_		135,985.	0.	23,073.
TRUSTEE/PRESIDENT EMERITUS	0.30	х						20,329.	0.	137,494.
(13) J. DAVID HELLER * SEE SCH O	7.40							20,323.	· •	137, 131.
TTEE/BD CHAIR THRU 6/9/22	2.70	х		x				0.	0.	153,685.
(14) MOZELLE JACKSON CFO	40.00								•	
ASST TREAS, & SR. VP AS OF 6/9/22	,,,,	1		x				0.	0.	0.
(15) DANIEL N. ZELMAN	1.70			Ė				•	•	
TTEE/V.CHAIR THRU & CHAIR ON 6/9/22	0.50	х		x				0.	0.	0.
(16) BETH WAIN BRANDON	6.70									<u> </u>
TTEE/VICE CHAIR THRU 6/9/22	2.40	х		x				0.	0.	0.
(17) LYNNE M. COHEN	1.20								-	
TTEE & V. CHAIR THRU 6/9/22	0.20	х		x				0.	0.	0.
132007 12-00-21		-			-				•	Form 990 (2021)

132007 12-09-21 Form **990** (2021)

Form 990 (2021) JEWISH FEDERA	ATION OF CL.	EVE	LAN.	ע					34-071444	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hig	ghes	t Co	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		<mark>)</mark> than c	200	Reportab l e	Reportab l e	Estimated
	hours per	box	, unle	ss per	rson i	s both	an	compensation	compensation	amount of
	week		cer an	id a d	recto	r/trus	tee)	from	from related	other
	(list any hours for	recto						the 	organizations	compensation
	related	or di	99:			sated		organization	(W-2/1099-M I SC/	from the
	organizations	rustee	trust		99	nedu		(W-2/1099-M I SC/ 1099-NEC)	1099-NEC)	organization and re l ated
	below	dual to	itiona	_	nploy	st cor	Ji.	1033 NEO)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JAMES A. RATNER	0.70									
TTEE & V. CHAIR THRU 6/9/22	2.10	Х		х				0.	0.	0.
(19) NEIL R. WAXMAN	0.90									
TTEE & V. CHAIR THRU 6/9/22		Х		Х				0.	0.	0.
(20) PETER MEISEL	1.20									
TTEE/VICE CHAIR AS OF 6/10/22	0.50	Х		Х				0.	0.	0.
(21) DARA G. YANOWITZ	3.10									
TTEE/TREAS THRU & V. CHAIR ON 6/9/22	0.40	Х		Х				0.	0.	0.
(22) JEFFREY WEISS TRUSTEE/ASSOC.	1.20									
TREAS THRU & TREAS ON 6/9/22	0.10	Х		Х				0.	0.	0.
(23) AMIR JAFFA	0.70									
TTEE & ASC. TREAS AS OF 6/9/22		Х		Х				0.	0.	0.
(24) BRADLEY A. SHERMAN	1.70									
TTEE/VICE CHAIR AS OF 6/10/22	0.30	Х		Х				0.	0.	0.
(25) ERICA G. STARRFIELD	0.90									
TTEE/VICE CHAIR AS OF 6/10/22		Х		х				0.	0.	0.
(26) JEFFREY J. WILD	1.20									
TTEE/VICE CHAIR AS OF 6/10/22		Х		Х				0.	0.	0.
1b Subtotal							>	2,347,472.	0.	764,011.
c Total from continuation sheets to Part VI	, Section A							0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	2,347,472.	0.	764,011.
2 Total number of individuals (including but no	ot limited to th	000	lieta	d ah	OVA) wh	o re	ceived more than \$100	000 of reportable	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No
3 X
4 X

27

3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on
	line 1a? If "Yes," complete Schedule J for such individual
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CREWCIAL PARTNERS LLC, 810 SEVENTH AVE,		
32ND FLOOR, NEW YORK, NY 10019	INVESTMENT CONSULTING	700,217.
SOLUTIONZ VIDEOCONFERENCING INC	VIDEOCONFERENCING MAINT &	
901 BINGHAM AVENUE, LOS ANGELES, CA 90049	EQUIP.	394,261.
BDO USA, LLP		
PO BOX 642743, PITTSBURGH, PA 15264-2743	AUDIT AND TAX SERVICES	341,213.
CAMBRIDGE ASSOCIATES, LLC		
PO BOX 83232, CHICAGO, IL 60691-0232	INVESTMENT CONSULTING FEES	249,905.
HS MANAGEMENT PARTNERS, LLC		
PO BOX 10367, UNIONDALE, NY 11555-0367	INVESTMENT CONSULTING FEES	234,903.
 Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization 	d above) who received more than	

SEE PART VII, SECTION A CONTINUATION SHEETS

1 01111 330	RATION OF CL	E V E	LAN	ע					34-07144	145
Part VII Section A. Officers, Directors, To	rustees, Key Er	nplo	yee	s, aı	nd H	ligh	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	ı		Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	app	ly)	compensation	compensation	amount of
	per week (list any hours for related organizations	I trustee or director	Institutional trustee		oyee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	below line)	Individual trustee	Institution	Officer	Key employee	Highest c	Former			
(27) TRISH ADLER	0.70									
TRUSTEE THRU 6/9/2022		Х						0.	0.	0
(28) JULES BELKIN	0.70									
TRUSTEE	0.10	Х						0.	0.	0
(29) ERIC E. BELL	1.00									
TRUSTEE THRU 6/9/2022	0.10	Х						0.	0.	0
(30) JORDAN D. BERKOWITZ	0.90									
TRUSTEE		Х						0.	0.	0
(31) PATTI A. BERNS	0.50									
TRUSTEE		х						0.	0.	0
(32) RABBI BINYAMIN A. BLAU	0.50									
TRUSTEE		х						0.	0.	0
(33) BARNETT N. BOOKATZ	1.20									
TRUSTEE	0.30	х						0.	0.	0
(34) SUSAN R. BORISON	1.20									
TRUSTEE		х						0.	0.	0
(35) RABBI NAPHTALI BURNSTEIN	0.50									
TRUSTEE		х						0.	0.	0
(36) RENEE CHELM	0.50									
TRUSTEE	2.40	х						0.	0.	0
(37) MICHAEL CANTOR	0.50									
TRUSTEE		х						0.	0.	0
(38) CYNTHIA CHAITEN	0.70									
TRUSTEE		х						0.	0.	0
(39) JENNIFER COHEN	0.80							-		
TRUSTEE		х						0.	0.	0
(40) RABBI JONATHAN COHEN	0.50							-		
TRUSTEE		х						0.	0.	0
(41) MINDY DAVIDSON	0.50							-		
TRUSTEE	0.10	х						0.	0.	0
(42) CHERYL DAVIS	1.00									-
TRUSTEE	2.10	х						0.	0.	0
(43) JEFFREY S. DAVIS	0.50									-
TRUSTEE		х						0.	0.	0
(44) REUVEN D. DESSLER	0.50								•	
TRUSTEE THRU 6/9/2022		х						0.	0.	0
(45) GRANT N. DINNER	0.50							· ·	· ·	
TRUSTEE	0.10	х						0.	0.	0
(46) AMY EINHORN	0.80					\vdash		· ·	· ·	
TRUSTEE	""	Х						0.	0.	0
	1		1	1	1	ı	ı		٠.	١

1 01111 000	RATION OF CL	EVE	пии	ע					34-07144	140
Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(F)	
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c	heck	all ·	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	10:				Highest compensated employee		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(***2/1099****100)	organization
	related	ee or	stee			nsate		(** 2) 1000 111100)		and related
	organizations	Individual trustee or director	Institutional trustee		oyee	om pe				organizations
	below	vidua	itutior	Je.	Key employee	nest c	ner			
	line)	Indi	Inst	Officer	Key	High	Former			
(47) BARRY S. FELDMAN	1.10									
TRUSTEE THRU 6/9/2022	0.10	Х						0.	0.	0
(48) LYDIA FRANKEL	1.10									
TRUSTEE		Х						0.	0.	0
(49) MARGARET RICHARDS FRANKEL	0.50									
TRUSTEE		Х						0.	0.	0
(50) ADAM GIMBEL	0.90									
TRUSTEE	0.30	Х						0.	0.	0
(51) SHELLEY GIMBEL	0.80	-								
TRUSTEE	0.10	Х						0.	0.	0
(52) IRA S. GOFFMAN	0.50	1								
TRUSTEE THRU 6/9/2022		Х						0.	0.	0
(53) ADRIENNE GOLDBERG	0.90	1								
TRUSTEE		Х						0.	0.	0
(54) LARRY GOLDBERG	0.50	-						_	_	_
TRUSTEE	0.50	Х						0.	0.	0
(55) ROBERT GOLDBERG	0.50	١								
TRUSTEE	0.50	Х	_					0.	0.	0
(56) ALAN D. GOTTLIEB	0.50	Ţ						0	0	0
TRUSTEE	0.10	Х						0.	0.	0
(57) ROE GREEN TRUSTEE	0.50	х						0.	0.	0
(58) PENNY GREENBERGER	0.70	^						0.	٠.	0
TRUSTEE	0.70	Х						0.	0.	0
(59) LYNN-ANN GRIES	0.70	^						0.	0.	0
TRUSTEE	0.70	x						0.	0.	0
(60) AARON GROSS	0.50							· · ·	· ·	
TRUSTEE	0.10	х						0.	0.	0
(61) GARY L. GROSS	0.50								•	
TRUSTEE	0.60	х						0.	0.	0
(62) HARLEY I. GROSS	0.50									
TRUSTEE	0.50	х						0.	0.	0
(63) ROCHELLE GROSS	0.70									
TRUSTEE		х						0.	0.	0
(64) RABBI ROSETTE BARRON HAIM	0.50									
TRUSTEE		х						0.	0.	0
(65) REBECCA C. HELLER	0.80									
TRUSTEE THRU 6/9/2022	0.20	х						0.	0.	0
(66) WILLIAM H. HELLER	1.20									
	0.40	х	I	I	1	ı	1	0.	0.	0

									34-07144	
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)	(C)						(D)	(F)	
Name and title	Average hours	(c			ition that		ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(67) EVAN HIRSCH TRUSTEE	0.50	x						0.	0.	0
(68) MICHELLE HIRSCH	0.90							- •		-
TRUSTEE	0.10	х						0.	0.	0.
(69) MARK HOLZ	0.80								•	
TRUSTEE		х						0.	0.	0
(70) ROBERT A. IMMERMAN	0.50								•	
TRUSTEE	0.30	х						0.	0.	0
(71) SHOSHANA DESSLER JACOBS	0.50							•••	••	
TRUSTEE	0.30	x						0.	0.	0
(72) EDNA JAFFA	0.50	Λ						0.	••	0
TRUSTEE	0.30	x						0.	0.	0
(73) GABRIELLE JERUSALEM	0.80	Λ						0.	· ·	0
TRUSTEE	0.80	x						0.	0.	0
(74) JUSTIN KADIS	0.50	Λ						0.	· ·	0
TRUSTEE	0.30	x						0.	0.	0
(75) SUELLEN KADIS	1.00	Λ						0.	· ·	0
TRUSTEE THRU 6/9/2022	1.00	x						0.	0.	0
(76) JEFFREY M. KAHN	0.50	^						0.	0.	0
TRUSTEE THRU 6/9/2022	0.10	Х						0.	0.	0
(77) MARA KAMAT	0.10	^						0.	0.	0
TRUSTEE	0.70	X						0.	0	0
(78) MICHELE KAMINSKY	0.80	^						0.	0.	0
	0.80	.,						0	0	
TRUSTEE THRU 6/9/2022	0.50	Х						0.	0.	0
(79) IRA KAPLAN	0.50	x							0	
TRUSTEE	0.30	Х						0.	0.	0
(80) ETHAN KARP	0.90	١							0	•
TRUSTEE	0.50	Х						0.	0.	0
(81) ILANA I. KATZ	0.50	١							0	
TRUSTEE	0.10	Х						0.	0.	0
(82) MICHAEL KLEIN	0.70	ł							•	
TRUSTEE	0.50	Х						0.	0.	0
(83) NATHAN KLEIN	0.50	ł								
TRUSTEE	0.10	Х						0.	0.	0
(84) TERRI KLINE	0.50	ł							_	_
TRUSTEE	0.40	Х						0.	0.	0
(85) ADENA J. KLINEMAN	0.70	1_								
TRUSTEE		Х		_		_		0.	0.	0
(86) HALLIE BRAM KOGELSCHATZ	1.00	4						0.		
TRUSTEE		Х							0.	0

Form 990 JEWISH FEDER	ATION OF CL	EVE	LAN	D					34-07144	145
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd H	ligh	est (Compensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(F)	
Name and title	Average hours	(c	heck		ition that		ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(87) STEWART A. KOHL TRUSTEE	0.50	x						0.	0.	0.
(88) S. LEE KOHRMAN	0.50	 							•	
TRUSTEE	0.20	x						0.	0.	0.
(89) SHARON KOPPELMAN	0.50								••	
TRUSTEE	0.30	x						0.	0.	0.
(90) NOREEN KOPPELMAN-GOLDSTEIN	0.70							· ·	••	
TRUSTEE	0.70	x						0.	0.	0.
(91) SUSAN D. KRANTZ	1.40	- 21				\vdash			٠.	0
TRUSTEE THRU 6/9/2022	1.40	x						0.	0.	0.
(92) KAREN KRAUSE	0.70	Α.						· · ·	٠.	0
TRUSTEE THRU 6/9/2022	0.70	x						0.	0.	0
(93) LAURA KUNTZ	0.80	Α.							٠.	0
TRUSTEE	0.00	x						0.	0.	0
(94) ERICA LAZZARO	0.50	Α.							٠.	0
TRUSTEE	0.30	x						0.	0.	0.
(95) NORMA W. LERNER	0.50	A						· · ·	٠.	0.
TRUSTEE	0.30	x						0.	0.	0.
(96) ELIANA J. LEVINE	0.50	- 21				\vdash			٠.	0
TRUSTEE	0.30	x						0.	0.	0
(97) GREGG A. LEVINE	0.70	- 21							٠.	0
TRUSTEE	0.70	x						0.	0.	0
(98) RYAN G. LEVINE	0.50	^						0.	٠.	0
TRUSTEE	0.30	x						0.	0.	0
(99) JAN LEWIS	0.50	^						0.	0.	0
	0.30	x						0.	0.	0
TRUSTEE (100) KEITH LIBMAN	0.80	^				\vdash		· ·	٠.	0
TRUSTEE	2.40	Х						0.	0.	0
(101) MARIELY LUENGO	0.70	^						0.	0.	0
TRUSTEE	2.00	Х						0.	0.	0
(102) LAWRENCE A. MACK	0.90	^						0.	0.	0
TRUSTEE	0.10	Х						0.	0.	0
(103) MILTON S. MALTZ	0.50	^				\vdash		· ·	٠.	0
TRUSTEE	0.40	Х						0.	0.	0
(104) TAMAR MALTZ	0.40	^						0.	0.	0
TRUSTEE	0.30	х						0.	0.	0
	+	^						0.	٠.	0
(105) GREGORY A. MARCUS TRUSTEE	0.50	х						0.	0.	^
(106) KEVIN D. MARGOLIS	0.10	<u> </u>				\vdash	-		0.	0
	0.50	х							^	_
TRUSTEE	1	Λ	I	l		<u> </u>	<u> </u>	0.	0.	0
Total to Part VII, Section A, line 1c		<u></u>					<u></u>			

D 13/11	RATION OF CL								34-07144	145
Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, a	nd H	ligh	est	Compensated Employe	es (continued)	-
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c	heck	all ·	that	app	ly)	compensation	compensation	amount of
	per week (list any hours for related organizations below	ndividual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	line)	ib	Inst	Officer	Key	Higi	Forr			
(107) BONNIE MARKS	0.50									
TRUSTEE	0.10	Х						0.	0.	0
(108) SUSI MEISEL	1.00									
TRUSTEE		Х						0.	0.	0
(109) NATAN D. MILGROM	0.80									
TRUSTEE THRU 6/9/2022		Х						0.	0.	0
(110) DAVID P. MILLER	0.50									
TRUSTEE		х						0.	0.	0
(111) JARED S. MILLER	1.00									
TRUSTEE		х						0.	0.	0
(112) AMY MORGENSTERN	1.00									
TRUSTEE	0.30	х						0.	0.	d
(113) CAMERON ORLEAN	0.70									
TRUSTEE		х						0.	0.	0
(114) DAVID B. ORLEAN	0.70									
TRUSTEE		х						0.	0.	0
(115) DAYNA ORLEAN	0.50									
TRUSTEE		х						0.	0.	o
(116) ABBIE PAPPAS	0.70									
TRUSTEE		Х						0.	0.	o
(117) ERVIN PAVLOFSKY	0.50									
TRUSTEE		х						0.	0.	c
(118) SHARI S. PERLMUTER	0.90									
TRUSTEE THRU 6/9/2022	0.40	Х						0.	0.	c
(119) KIM M. PESSES	0.70									
TRUSTEE	2.40	Х						0.	0.	c
(120) MARLA K. PETTI	0.70									
TRUSTEE		х						0.	0.	d
(121) JUDGE DAN A. POLSTER	0.80									
TRUSTEE	3.00	х						0.	0.	0
(122) DOROTHEA POLSTER	0.50									
TRUSTEE		х	L	L	L	L	L	0.	0.	0
(123) KEITH POLSTER	0.90									
TRUSTEE	0.10	х					L	0.	0.	0
(124) LOREE E. POTASH	1.00									
TRUSTEE THRU 6/9/2022		х					L	0.	0.	0
(125) ALBERT B. RATNER	0.50									
TRUSTEE	0.10	х						0.	0.	0
(126) CHARLES A. HOROWITZ RATNER	0.50									
TRUSTEE	0.20	х						0.	0.	0
Total to Part VII, Section A, line 1c										

D 13/11	DERATION OF CL								34-07144	145
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours	(cl	neck		ition that		ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(127) ROBERT S. REITMAN	0.70									
TRUSTEE	0.30	Х						0.	0.	0.
(128) BRIAN D. ROBBINS	0.90									
TRUSTEE		х						0.	0.	0.
(129) SHARON ROSENBAUM	1.00									
TRUSTEE		х						0.	0.	0.
(130) BETH ROSENBERG	0.50									
TRUSTEE	0.30	х						0.	0.	0.
(131) DAVID M. ROSENBERG	0.50									
TRUSTEE	0.30	х						0.	0.	0.
(132) ENID ROSENBERG	0.90									
TRUSTEE	1.30	х						0.	0.	0.
(133) BARBARA ROSSKAMM	0.70									
TRUSTEE		х						0.	0.	0.
(134) BETTY ROSSKAMM	0.50									
TRUSTEE		х						0.	0.	0.
(135) PETER RZEPKA	0.50									
TRUSTEE	0.10	х						0.	0.	0.
(136) EVIE SAFRAN	0.50									
TRUSTEE	0.10	х						0.	0.	0.
(137) HARVEY SASS	0.90									
TRUSTEE		Х						0.	0.	0
(138) BRADLEY J. SCHLANG	0.50									
TRUSTEE		х						0.	0.	0
(139) MITCHELL C. SCHNEIDER	0.50									
TRUSTEE	0.10	Х						0.	0.	0
(140) PAULA R. SCHWARTZ	0.90									
TRUSTEE	0.10	х						0.	0.	0
(141) MARCY SCHWARTZ	0.80									
TRUSTEE	2.00	х						0.	0.	0
(142) GARY S. SHAMIS	0.50									
TRUSTEE		х						0.	0.	0.
(143) MARY ANN SHAMIS	0.90									
TRUSTEE THRU 6/9/2022		х						0.	0.	0.
(144) ELIAV SHARVIT	0.70							-	-	
TRUSTEE THRU 6/9/2022		х						0.	0.	0.
(145) ELISABETH W. SHERMAN	0.90								-	<u> </u>
TRUSTEE THRU 6/9/2022		х						0.	0.	0.
(146) MICHAEL D. SIEGAL	0.50									
TRUSTEE	0.30	х						0.	0.	0
Total to Part VII, Section A, line 1c	1 0.30	l 						0.	0.	

Form 990 JEWISH FEDER.	ATION OF CL								34-07144	
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours per week	(C	neck	all	that		ly)	compensation from the	compensation from related organizations	amount of other compensation
	(list any hours for related organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	ľ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
	line)	Individ	Institu	Officer	Key en	Highes	Former			
(147) SCOTT SIMON	1.40									
TRUSTEE	2.20	Х						0.	0.	0
(148) MICHAL SOCLOF	0.50									
TRUSTEE	0.10	Х						0.	0.	0
(149) TODD STEIN	0.50									
TRUSTEE		Х						0.	0.	0
(150) RICHARD P. STOVSKY	0.90									
TRUSTEE		Х						0.	0.	0
(151) JEANNE TOBIN	0.90									
TRUSTEE THRU 6/9/2022	0.10	Х						0.	0.	0
(152) RICHARD URIA	0.80									
TRUSTEE		Х						0.	0.	0.
(153) PENNI WEINBERG	0.50									
TRUSTEE		Х						0.	0.	0
(154) STEPHEN J. WEINBERG	0.50									
TRUSTEE	0.10	Х						0.	0.	0
(155) JUDITH WEISS	0.50									
TRUSTEE	0.30	х						0.	0.	0
(156) MORRY WEISS	0.50									
TRUSTEE	0.30	х						0.	0.	0.
(157) SALLY H. WERTHEIM	0.50									
TRUSTEE	0.50	х						0.	0.	0.
(158) MORRIS WHEELER	0.90									
TRUSTEE		х						0.	0.	0
(159) ADAM L. WIEDER	0.70									
TRUSTEE		х						0.	0.	0
(160) DANIELLE J. WILD	0.50									
TRUSTEE		х						0.	0.	0
(161) JUDY WILLENSKY	1.00									
TRUSTEE THRU 6/9/2022	0.10	х						0.	0.	0
(162) MITCH WOLF	0.70									
TRUSTEE THRU 6/9/2022		х						0.	0.	0.
(163) NANCY G. WOLF	1.00									
TRUSTEE	0.10	х						0.	0.	0
(164) JASON A. WULIGER	0.50									
TRUSTEE THRU 6/9/2022		х						0.	0.	0.
(165) SANDRA WULIGER	0.50									
TRUSTEE		х						0.	0.	0 .
(166) TIMOTHY F. WULIGER	1.00									
(100) TIMOTHI F. WOLLGER				1		ı	1	i		

Part VII Section A. Officers, Directors, Tru (A) Name and title	(B)	nplo	yee			ligh	est (es (continued)	
	1			"				l I		
	1			(1	C)			(D)	(E)	(F)
	Average hours	(cl		Pos	ition that		lv)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
167) DONNA YANOWITZ	0.50									•
RUSTEE	0.40	Х						0.	0.	0
168) DARRELL A. YOUNG	0.50	х						0.	0.	0
169) DON ZIGDON	0.70									
RUSTEE	0.70	х						0.	0.	0
170) SARAH ZIMMERMAN	0.50									
RUSTEE THRU 6/9/2022		х						0.	0.	0

34-0714445

Form 990 (2021) JEWISH FEDI Part VIII Statement of Revenue

		Check if Schedule O contains a respons	e or note to any lin	e in this Part VIII			
		·	_	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					lunction revenue	business revenue	sections 512 - 514
တ္ တ	1 a	Federated campaigns 1a	1,296,025.				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
جَ ۾		Fundraising events 1c					
fts,		Related organizations 1d	22,013,029.				
ig ig		Government grants (contributions)					
Sin		All other contributions, gifts, grants, and					
ē Ė	'		64,974,862.				
ë		similar amounts not included above 1f	23,256,449.				
	_	Noncash contributions included in lines 1a-1f	25,250,445.	88,283,916.			
Oa	n	Total. Add lines 1a-1f	Business Cada	00,203,910.			
			Business Code				
<u>.e</u>	2 a						
er v	b	·					
n S	С	·					
ran Sev	d						
Program Service Revenue	е						
₫.		All other program service revenue					
	g	Total. Add lines 2a-2f	>				
	3	Investment income (including dividends, inte	rest, and				
		other similar amounts)		5,359,876.			5,359,876.
	4	Income from investment of tax-exempt bond	proceeds >				
	5	Royalties	>				
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a 45,600					
		Rental income or (loss) 6c 45,600					
		Net rental income or (loss)		45,600.			45,600.
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 27,778,703					
	h	Less: cost or other basis	, ,				
<u>a</u>	_	and sales expenses 7b 27,026,956	5.355.574.				
ther Revenue	c	Gain or (loss) 751,747	4,364,419.				
ě		Net gain or (loss)		5,116,166.			5,116,166.
프		Gross income from fundraising events (not		, , ,			, , ,
ğ	O G	including \$ of					
~		contributions reported on line 1c). See					
		Part IV, line 18					
	h		b				
		Net income or (loss) from fundraising events	<u> </u>				
		- I					
	o a	Gross income from gaming activities. See					
		Part IV, line 19	b				
			D .				
		Net income or (loss) from gaming activities	·····				
	10 a	Gross sales of inventory, less returns					
		and allowances 10					
		J	Db				
\rightarrow	С	Net income or (loss) from sales of inventory					
<u>2</u>		THEORE BOY 5-1-1-1	Business Code	4.40# 000		4 400 000	
e e		INCOME FRM PARTNRSHPS/	901101	1,197,921.	4	1,197,921.	
Miscellaneous Revenue		SUP ORG/AFF AGCY FEES	900099	1,133,761.	1,133,761.		
cel ev	_	PROGRAM FEES	900099	680,901.	680,901.		
Ais	d	All other revenue	900099	748,813.	748,813.		
	е	Total. Add lines 11a-11d		3,761,396.			
	12	Total revenue. See instructions	>	102,566,954.	2,563,475.	1,197,921.	10,521,642.

132009 12-09-21

34-0714445

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 (D) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 71,055,179 71,055,179 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 440,702. 440,702. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 1,992,854. 715,654. 458,837. 818,363. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 4,019,598. Other salaries and wages 9,818,400. 3,545,634. 2,253,168. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,056,290 352,061. 248,334. 455,895. 1,388,830 462,897 326,514 599,419. 9 Other employee benefits 768,943. 295,043. 179,472 294,428. 10 Payroll taxes Fees for services (nonemployees): Management 52,832, 27,948, 24,070 814. Legal 144,265. 144,265 Lobbying 4,869. 4,869. Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 1,315,443 774,861 522,905 17,677. column (A), amount, list line 11g expenses on Sch O.) 197,367 46,957 16,456 133,954. Advertising and promotion 12 242,777. 89,424 154,861. 487,062. 13 Office expenses 363,583, 69,081. 76,352. 218,150. Information technology 14 Royalties 15 471,008 145,338, 113,107 212,563. 16 Occupancy 21,050 115,276. 332,016, 195,690. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 30,098. 474,259. 279,569. 164,592. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 890,357 168,561, 260,506 461,290. 22 Depreciation, depletion, and amortization 414,273. 24,951. 331,819 57,503. 23 Other expenses. Itemize expenses not covered 24 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.) MISC. OPERATING & ENDOW 183,160, 36,442. 144,241 2,477. OHIO JEWISH COMMUNITIES 136,487 136,487 С d All other expenses 7,731,729. Total functional expenses. Add lines 1 through 24e 91,988,179 79,015,832, 5,240,618 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined

Form 990 (2021)

Check here

educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

Form 990 (2021) Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			30,118.	1	154,232.
	2	Savings and temporary cash investments			30,696,413.	2	18,925,100.
	3	Pledges and grants receivable, net			26,504,573.	3	27,437,144.
	4	Accounts receivable, net			1,715,421.	4	1,945,916.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
		controlled entity or family member of any of the	ese perso	ons		5	
	6	Loans and other receivables from other disqu	alified per	sons (as defined			
		under section 4958(f)(1)), and persons describ	ed in sect	tion 4958(c)(3)(B)		6	
र	7	Notes and loans receivable, net			2,735,810.	7	2,591,816.
Assets	8	Inventories for sale or use			4,890.	8	8,054.
ğ	9	Duran side some server and all forms at all some server			310,792.	9	426,608.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	. 10a	21,978,595.			
	b	Less: accumulated depreciation	. 10b	10,657,699.	11,307,070.	10c	11,320,896.
	11	Investments - publicly traded securities			141,592,082.	11	144,364,891.
	12	Investments - other securities. See Part IV, line	e 11		240,742,708.	12	196,497,891.
	13	Investments - program-related. See Part IV, lin	e 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			133,945,778.	15	118,096,062.
	16	Total assets. Add lines 1 through 15 (must ed	qual line 3	3)	589,585,655.	16	521,768,610.
	17	Accounts payable and accrued expenses			10,275,758.	17	9,367,378.
	18	Grants payable			6,421,243.	18	6,589,783.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	e Part IV	of Schedule D		21	
Se	22	Loans and other payables to any current or fo	rmer offic	er, director,			
Liabilities		trustee, key employee, creator or founder, sub	ostantial c	ontributor, or 35%			
iab		controlled entity or family member of any of the	ese perso	ons		22	2,000,000.
_	23	Secured mortgages and notes payable to unre	elated thir	d parties		23	
	24	Unsecured notes and loans payable to unrela			2,000,000.	24	
	25	Other liabilities (including federal income tax,	•				
		parties, and other liabilities not included on lin	es 17-24)	. Complete Part X			
		of Schedule D			72,170,797.		59,344,269.
	26			. []	90,867,798.	26	77,301,430.
S		Organizations that follow FASB ASC 958, c	heck here				
ဥ		and complete lines 27, 28, 32, and 33.			201 420 404		272 764 107
alaı	27	Net assets without donor restrictions			301,429,404.	27	272,764,197.
ä	28	Net assets with donor restrictions			197,288,453.	28	171,702,983.
Ĕ		Organizations that do not follow FASB ASC	958, che	ck here			
P.		and complete lines 29 through 33.					
<u>t</u> 2	29	Capital stock or trust principal, or current fund				29	
SSE	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			100 717 057	31	444 467 100
Š	32	Total net assets or fund balances			498,717,857.	32	444,467,180.
	33	Total liabilities and net assets/fund balances			589,585,655.	33	521,768,610. Form 990 (2021)

Pai	T XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	102	566,	954.
2	Total expenses (must equal Part IX, column (A), line 25)	2	91,	988,	179.
3	Revenue less expenses. Subtract line 2 from line 1	3	10	578,	775.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	498	717,	857.
5	Net unrealized gains (losses) on investments	5	-59	638,	224.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-5	191,	228.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	444	467,	180.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X 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		Х
	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	Х	<u> </u>
	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 X 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	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	gle Audit			
	Act and OMB Circular A-133?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2021)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number

JEWISH FEDERATION OF CLEVELAND 34-0714445 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	99,209,228.	82,757,097.	63,606,439.	92,961,393.	88,283,916.	426,818,073.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	99,209,228.	82,757,097.	63,606,439.	92,961,393.	88,283,916.	426,818,073.
	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)						94,958,978.
6	Public support. Subtract line 5 from line 4.						331,859,095.
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	99,209,228.	82,757,097.	63,606,439.	92,961,393.	88,283,916.	426,818,073.
	Gross income from interest,	, , , , , , , , , , , , , , , , , , , ,	, ,	, ,		, , , , , , , , , , , , , , , , , , ,	
Ü	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	6,904,769.	6,912,620.	6,637,075.	6,135,380.	5,405,476.	31,995,320.
0	Net income from unrelated business	0,301,703.	0,311,010.	0,007,075.	0,133,300.	3,103,170.	31,333,320.
9							
	activities, whether or not the	30,832.	875,802.	112,420.	135,826.	1,197,921.	2,352,801.
10	business is regularly carried on Other income. Do not include gain	30,032.	0,0,002.	112,120.	133,020.	1,137,321.	2,332,001.
10	· ·						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						461,166,194.
	Total support. Add lines 7 through 10					12	8,247,501.
12	Gross receipts from related activities,	•		outh or fifth town		•	0,247,301.
13	First 5 years. If the Form 990 is for the organization, check this box and store	_		•			▶□
Sec	etion C. Computation of Publi		centage				··········
14	Public support percentage for 2021 (I			olumn (f))		14	71.96 %
15	Public support percentage from 2020					15	70.43 %
	33 1/3% support test - 2021. If the c						
100	stop here. The organization qualifies						
h	33 1/3% support test - 2020. If the o		-		line 15 is 33 1/3%		
J	and stop here. The organization qual						
170	10% -facts-and-circumstances test		• •		12 162 or 16b a		
17 a	and if the organization meets the fact:	-					
	· ·		•	•		· ·	. .
L	meets the facts-and-circumstances te	· ·		,		7a, and line 15 is:	
O	10% -facts-and-circumstances test	-					1U70 UI
	more, and if the organization meets the				-		▶□
40	organization meets the facts-and-circu						
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	i, 160, 1/a, or 1/b	, cneck this box ar	na see instructions	······· P

Schedule A (Form 990) 2021

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

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

Section A. Public Support		•				
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	(1)	\(\alpha\)	(2)	(1)	(7)	(1)
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)		-			1	
14 First 5 years. If the Form 990 is for the	•			•		. —
check this box and stop here Section C. Computation of Public						>
•			1 (6)		T 45 T	
15 Public support percentage for 2021 (lii		•	.,,		15	<u>%</u>
16 Public support percentage from 2020 Section D. Computation of Inves		<u> </u>			16	%
•			ino 13 column (f)		17	04
17 Investment income percentage for 20.18 Investment income percentage from 2					18	<u>%</u>
19a 33 1/3% support tests - 2021. If the			on line 14, and line			
more than 33 1/3%, check this box an					- 4.5	▶ □
b 33 1/3% support tests - 2020. If the	=	-				
line 18 is not more than 33 1/3%, chec	ū					. \square

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Schedule A (Form 990) 2021

Vas No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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.)

Section A. All Supporting Organizations

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

_			
	1		
	2		
L	3a		
	3b		
L	3с		
L	4a		
L	4b		
Н	4c		
	5a		
L	5b		
L	5с		
	6		
L	7		
L	8		
L	9a		
	9b		
L	9с		
L	10a		
	10b		
ule A	A (Forn	n 990)	2021

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Pa	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
С	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		
Sec	tion 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		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
	<i>y</i> 11 3 3		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	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			
		1		
2	organization's governing documents in effect on the date of notification, to the extent not previously provided?	•		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	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			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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		
b	, , , , , , , , , , , , , , , , , , , ,			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete	e Sections A through E.	
Sect	ion 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	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
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	ion 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	lly integrat	ted Type III supporting orga	nization (see
	instructions)			

Schedule A (Form 990) 2021

Par	't V │ Type III Non-Functionally Integrated 5	609(a)(3) Supporting Orga	inizations (continued)	
Section	ion D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purp	ooses of supported organization:	s 3	
4	Amounts paid to acquire exempt-use assets		4	
	Qualified set-aside amounts (prior IRS approval required -	provide details in Part VI)	5	
	Other distributions (describe in Part VI). See instructions		6	
	Total annual distributions. Add lines 1 through 6.		7	
	Distributions to attentive supported organizations to which	ch the organization is responsive	,	
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2021 from Section C, line 6		9	
	Line 8 amount divided by line 9 amount		10	
	7	(i)	(ii)	(iii)
Section	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2021	Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions	i.		
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
С	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result great	er		
	than zero, explain in Part VI. See instructions.			
	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain ir	1		
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			

Schedule A (Form 990) 2021

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, I 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, 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, lines 2, 5, and 6. Also complete this part for any additional information (See instructions.)	/, Section C, ne 1e; Part V,
SECTION B LINE 10 - OTHER INCOME	
INCLUDES MISCELLANEOUS REVENUE FROM FROM 990, PART VIII LINE 11 C AND	
11D NOT REQUIRED TO BE INCLUDED ELSEWHERE IN SUPPORT. INCLUDES	
MISCELLANEOUS OTHER INCOME.	

SCHEDULE B, SCHEDULE OF CONTRIBUTORS, HAS BEEN OMITTED BUT WILL BE INCLUDED IN THE TAX RETURN FILED WITH THE INTERNAL REVENUE SERVICE.

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

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

		nization			Empl	oyer identification number
			RATION OF CLEVELAND			34-0714445
Part	I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 org	ganization.
2 P	olitical	campaign activity expendit	ation's direct and indirect politicures gn activities		▶ \$	
Part	I-B	Complete if the org	anization is exempt und	ler section 501(c)(3).	
1 E	nter the	amount of any excise tax	incurred by the organization un	der section 4955	▶ \$	
2 E	nter the	amount of any excise tax	incurred by organization manag			
3 If	the org	anization incurred a section	n 4955 tax, did it file Form 4720) for this year?		Yes No
4a W	/as a co	rrection made?				Yes No
		describe in Part IV.				1/2)
Part	:I-C	Complete if the org	anization is exempt und	ler section 501(c),	except section 501(c)(3).
		• •	by the filing organization for se	·		
2 Ei	nter the	amount of the filing organ	ization's funds contributed to o	ther organizations for se		
	•					
			. Add lines 1 and 2. Enter here a			
			1120-POL for this year?			
m	nade pa	yments. For each organizat	ployer identification number (E ion listed, enter the amount pa	id from the filing organiz	zation's funds. Also enter the	amount of political
		•	omptly and directly delivered to additional space is needed, pro		•	e segregated fund or a
	Ontiour	` ,		1		(a) A a a a a a a a
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
					funds. If none, enter -0	promptly and directly delivered to a separate
						political organization.
						If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

	JEWISH FEDERATION				714445 Page 2
Part II-A Complete if the org section 501(h)).	anization is exen	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under
A Check if the filing organiza expenses, and share	tion belongs to an affil re of excess lobbying e tion checked box A an	expenditures).		group member's name	e, address, EIN,
Limi	ts on Lobbying Exper ditures" means amou	nditures	visions арріу.	(a) Filing organization's totals	(b) Affiliated group totals
Total lobbying expenditures to influ Total lobbying expenditures to influ	uence a legislative bod	y (direct lobbying)		198,482. 198,482.	
d Other exempt purpose expenditure	c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d)				
	amount. Enter the amount from the following table in both columns.			79,015,832.	
Not over \$500,000 Over \$500,000 but not over \$1,000	20% of t	the amount on line 1e. O plus 15% of the exce			
Over \$1,000,000 but not over \$1,5	000,000 \$225,00	0 plus 10% of the exces			
Over \$17,000,000	\$1,000,0	000.		250,000.	
 g Grassroots nontaxable amount (en h Subtract line 1g from line 1a. If zer i Subtract line 1f from line 1c. If zero 	o or less, enter -0-			0.	
j If there is an amount other than ze reporting section 4911 tax for this	ro on either line 1h or l	ine 1i, did the organiza		[Yes No
(Some organizations t	hat made a section 50	raging Period Under 01(h) election do not hate instructions for lin	nave to complete all o	f the five columns be	elow.
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	193,181.	204,363.	194,871.	198,482.	790,897.

Schedule C (Form 990) 2021

1,000,000.

1,500,000.

250,000.

250,000.

250,000.

250,000.

d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(I	o)
the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
d Mailings to members, legislators, or the public?				
	+			
Direct content with herinteness their staffs and content of finish and herintal the head O				
b Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5)	, or se	ction	
501(c)(6).				
				N
			Yes	
Were substantially all (90% or more) dues received nondeductible by members?		. 1	Yes	
			Yes	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N	prior year? 501(c)(5)	2 3 , or se	ction	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes."	prior year? 501(c)(5) Io" OR (k	3), or seco) Part	ction	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members	prior year? 501(c)(5) Io" OR (t	3), or seco) Part	ction	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members	prior year? 501(c)(5) Io" OR (t	3), or seco) Part	ction	3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	prior year? 501(c)(5) No" OR (k	2 3), or sec o) Part	ction	3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions	prior year? 501(c)(5) No" OR (k	2 3 3, or sec b) Part	ction	3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group lies structions); and Part II-B, line 1. Also, complete this part for any additional information.	prior year? 501(c)(5) No" OR (k	2 3), or sec o) Part 1 2a 2b 2c 3	ction III-A, line	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group lists)	prior year? 501(c)(5) No" OR (k	2 3), or sec o) Part 1 2a 2b 2c 3	ction III-A, line	3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group lies structions); and Part II-B, line 1. Also, complete this part for any additional information.	prior year? 501(c)(5) No" OR (k	2 3), or sec o) Part 1 2a 2b 2c 3	ction III-A, line	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the last III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions Taxable amount of lobbying and political expenditures. See instructions Supplemental Information Ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group listing time 1: B, SECTION 501(H) AVERAGING STATEMENT:	prior year? 501(c)(5) No" OR (k	2 3), or sec o) Part 1 2a 2b 2c 3	ction III-A, line	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the last III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group listructions); and Part II-B, line 1. Also, complete this part for any additional information. ART II-B, SECTION 501(H) AVERAGING STATEMENT: REVISIONS OF SECTION 501(H) EFFECTIVE BEGINNING WITH THE YEAR ENDING	prior year? 501(c)(5) No" OR (k	2 3), or sec o) Part 1 2a 2b 2c 3	ction III-A, line	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list structions); and Part II-B, line 1. Also, complete this part for any additional information. ART II-B, SECTION 501(H) AVERAGING STATEMENT:	prior year? 501(c)(5) No" OR (k	2 3), or sec o) Part 1 2a 2b 2c 3	ction III-A, line	3, is

Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

JEWISH FEDERATION OF CLEVELAND

Employer identification number 34 - 0714445

Pai			Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
	Tatal group have at and african	(a) Donor advised funds	11
1	Total number at end of year	29,888,343.	26,476.
2 3	Aggregate value of contributions to (during year) Aggregate value of grants from (during year)	37,976,699.	156,640.
4	Aggregate value at end of year	121,569,643.	5,340,753.
5	Did the organization inform all donors and donor advisors in w		
Ū	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor ac		
_	for charitable purposes and not for the benefit of the donor or		
Par			
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (for example, recreat	ion or education) Preservation of a hi	istorically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of a	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b			
С	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the orga	anization during the tax
_	year -		
4	Number of states where property subject to conservation easi	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the peri		□ v _{ee} □ Ne
6	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	landling of violations, and emorcing conserva	ation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conservation	easements during the year
•	\$\\$\$ \$\$	ing of violations, and emorcing conservation	easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)	(B)(i)
_			
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footnote	·	
	organization's accounting for conservation easements.	-	
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement and b	palance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in furthe	rance of public
	service, provide in Part XIII the text of the footnote to its finan-	cial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and balar	nce sheet works of
	art, historical treasures, or other similar assets held for public $% \left(1\right) =\left(1\right) \left(1\right) $	exhibition, education, or research in furtherar	nce of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical trea		n, provide
	the following amounts required to be reported under FASB AS	_	
а	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2021

Pa	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)								
3	Using the organization's acquisition, accession	on, and other records	s, check any of t	he following that	t make sig	nificant us	se of its		
	collection items (check all that apply):								
а	X Public exhibition	d	Loan or	exchange progra	am				
b	Scholarly research	е	Other_						
С	X Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they furth	er the organization	on's exem	pt purpos	e in Part	XIII.	
5									
	to be sold to raise funds rather than to be ma							Yes	X No
Pa	t IV Escrow and Custodial Arrang		ete if the organiz	ation answered	"Yes" on F	Form 990,	Part IV,	ine 9, or	
	reported an amount on Form 990, Par	<u> </u>							
1a	1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included								
	on Form 990, Part X?						Х	Yes	No
b	b If "Yes," explain the arrangement in Part XIII and complete the following table:								
	Amount								
	Beginning balance					1c			24,138.
	Additions during the year					1d			53,702.
_	Distributions during the year					1e			20,481. 57,359.
t O-	Ending balance					<u>1f</u>			X No
	If "Yes," explain the arrangement in Part XIII.					•		_	NO
	t V Endowment Funds. Complete if								
	Complete	(a) Current year	(b) Prior yea			d) Three ye	ears back	(e) Four ye	ars back
1 a	Beginning of year balance	206,103,038.	158,888,0			168,82			56,387.
	Contributions	6,436,237.	4,283,9		9,698.		0,843.		94,589.
	c Net investment earnings, gains, and losses -28,338,973. 49,262,659. 768,437. 6,157,952. 11,563,885								
	Grants or scholarships	1,712,859.	1,710,7		5,540.		6,887.		73,055.
	Other expenditures for facilities	, , ,	, ,	- 	,		, -	,	
ŭ	and programs	5,569,463.	3,979,9	26. 7,113	3,181.	8,49	2,782.	5,74	16,103.
f	Administrative expenses	688,380.	640,9		1,348.		2,053.		72,767.
g	End of year balance	176,229,600.	206,103,0	38. 158,888	8,075.		0,009.		22,936.
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, colum	n (a)) held as:					
а	Board designated or quasi-endowment	89.8900	%	(//					
	Permanent endowment 9.9700	%	_						
		 %							
	The percentages on lines 2a, 2b, and 2c show	ıld equal 100%.							
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are hel	d and administer	red for the	organizat	tion	_	
	by:							Y	es No
	(i) Unrelated organizations							3a(i) X	<u> </u>
	(ii) Related organizations							3a(ii)	Х
b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	ed on Schedule	R?				3b	
4	Describe in Part XIII the intended uses of the		wment funds.						
Pa	t VI Land, Buildings, and Equipm								
	Complete if the organization answered								
	Description of property	(a) Cost or o	. ,	Cost or other	1 ' ′	cumulated	d	(d) Book v	alue
		basis (investr		isis (other)	dep	reciation		0.00	712
	Land		7,070.	1,741,643.		6 210 2	20		58,713.
	Buildings			13,775,625.		6,310,2	28.	/,46	55,396.
	Leasehold improvements			5 903 605		/ 310 O	11.4	1 50	R/ 501
	Equipment			5,903,605. 40,652.		4,319,0 28,4			34,591. L2,196.
	Other		V == h == (D) "				.57.		20,896.
TOTA	I. Add lines 1a through 1e. (Column (d) must ed	quai Form 990, Part i	x, column (B), lir	ie IUC.)			Schedula	D (Form 9	

Part VII Investments - Other Securities	Part VII	nvestments -	Other	Securities.
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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		
(2) Closely held equity interests		
(3) Other		
(A) FEDERATION MONEY FUND (ISRAEL BONDS)	5,623,167.	COST
(B) FEDERATION MAIN INVESTMENT FUND -		
(C) (ALMANAC REALTY SECURITIES VIII LP)	836,930.	END-OF-YEAR MARKET VALUE
(D) FEDERATION MAIN INVESTMENT FUND -		
(E) (ARROWSTREET ACWI ALPHA EXT. FD. III)	4,999,356.	END-OF-YEAR MARKET VALUE
(F) FEDERATION MAIN INVESTMENT FUND -		
(G) (BROOKFIELD STRTGIC REL EST PTNRS		
(H) II-B LP)	1,527,522.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	196,497,891.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) ARTWORK	559,755.
(2) ASSETS HELD FOR OTHER CHARITIES UNDER FASB 136	58,742,474.
(3) ASSETS HELD IN TRUST UNDER CHARITABLE TRUST AGREEMENTS	3,182,735.
(4) DUE FROM SUPPORTING FOUNDATIONS	16,793,615.
(5) LIFE INSURANCE POLICIES	8,301,794.
(6) RECEIVABLE FROM PERPETUAL AND LEAD TRUSTS	30,515,689.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	118,096,062.

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DUE TO COMM ON CEMETERY PRESERVATION	180,000.
(3)	ESTIMATED PAYABLE TO CGA BENEFICIARIES	421,796.
(4)	LIABILITY TO OTHER CHARITIES UNDER FASB 136	58,742,473.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	59,344,269.

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

Schedule D (Form 990) 2021

Par	t XI Reconciliation of Revenue per Audited Financial	Statements With Revenue	per Return.		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 12a.			
1	Total revenue, gains, and other support per audited financial statements				
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.)	2d			
е	Add lines 2a through 2d				
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а		4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	Statementa With Expansi			
Pai	t XII Reconciliation of Expenses per Audited Financial		es per neturn.		
	Complete if the organization answered "Yes" on Form 990, Part I		1.1		
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities				
b	Prior year adjustments				
C	Other losses				
a	Other (Describe in Part XIII.)	· · · · · · · · · · · · · · · · · · ·	- 00		
	Add lines 2a through 2d				
3	Subtract line 2e from line 1				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	45			
a	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIII.) Add lines 4a and 4b		4c		
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. li.				
Par	t XIII Supplemental Information.	ne 18.)			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	and 4: Part IV lines 1b and 2b: Pa	rt V line 4: Part X line 2: Part XI		
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide		, mo 4, 1 are x, mo 2, 1 are xi,		
	a.a. a., a.a. a.a. a., a.a. a.a. a.a.	,			
PART	III, LINE 4:				
FOR	THE EDUCATION AND ENJOYMENT OF VISITORS TO ITS BUILDIN	NG, THE			
FEDE	RATION COLLECTS ARTWORK FOR PUBLIC DISPLAY THROUGHOUT	ITS BUILDING			
AND	IN ITS PUBLIC GALLERY. SUCH PUBLIC DISPLAYS ARE JEWISH	H THEMED OR			
INTE	NDED TO CONVEY ARTISTS' CONNECTIONS TO JUDAISM AND IS	RAEL'S			
CONN	ECTIONS TO THE ARTS.				
PART	IV, LINE 1B:				
THE FEDERATION PERMITS OTHER JEWISH OR CLOSELY-RELATED CHARITABLE					
501(C)(3) ORGANIZATIONS TO INVEST IN ITS INVESTMENT POOLS, UNDER A WRITTEN					
	THE COMMENS ACREDITION MUCCE ORGANIZATIONS REMAINS OF THE COMMENSURE OF THE PROPERTY OF THE PR				
TNVE	STMENT AGREEMENT. THOSE ORGANIZATIONS RETAIN OWNERSH	TE OARK THETK			
TNVE	INVESTMENT IN THE POOLS AND THEREFORE THOSE ASSETS ARE NOT REFLECTED IN				

Schedule D (Form 990) 2021

EXPENSE INTEREST AND PENALTIES AS INCURRED.

DUE DATE OF EACH RETURN. THE FEDERATION AND ITS SUPPORTING FOUNDATIONS

Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. 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
FEDERATION MAIN INVESTMENT FUND - (CEVIAN CAPITAL II LTD)	7,818,391.	FMV
FEDERATION MAIN INVESTMENT FUND - (CITYMARK CAPITAL U.S. APARTMENT	.,,	
FUND III	184,460.	FMV
FEDERATION MAIN INVESTMENT FUND - (CLEVELAND FEDERATION PE I LLC)	13,275,717.	FMV
FEDERATION MAIN INVESTMENT FUND - (CLEVELAND FEDERATION PE II LLC)	7,655,307.	FMV
FEDERATION MAIN INVESTMENT FUND - (COLCHESTER GLOBAL BD FD)	6,385,098.	FMV
FEDERATION MAIN INVESTMENT FUND - (DARLINGTON PARNTER, LP)	15,431,226.	FMV
FEDERATION MAIN INVESTMENT FUND - (ECM FEEDER FUND 1)	10,710,970.	FMV
FEDERATION MAIN INVESTMENT FUND - (FAIRFIELD US MULTIFAMILY CORE		
PLUS FUND I	269,887.	FMV
FEDERATION MAIN INVESTMENT FUND - (HCIF OFFSHORE LP)	3 510 727	FMV
FEDERATION MAIN INVESTMENT FUND - (INDEPENDENT FRANCHISE PARTNERS	3,510,727.	FHV
LP)	6,535,613.	FMV
	0,000,020.	
FEDERATION MAIN INVESTMENT FUND - (ISRAEL BONDS)	1,761,634.	COST
FEDERATION MAIN INVESTMENT FUND - (KILTEARN GLOBAL EQUITY FUND)	6,553,545.	FMV
FEDERATION MAIN INVESTMENT FUND - (OAKHILL DIVRSDIS CRDT STGS	0,000,010.	
FUND)	6,112,439.	FMV
FEDERATION MAIN INVESTMENT FUND - (POLUNIN DEVELOPING COUNTRIES	, ,	
FUND LLC)	5,562,448.	FMV
FEDERATION MAIN INVESTMENT FUND - (SHAWSPRING PARTNERS FUND LP)	5,034,847.	FMV
FEDERATION MAIN INVESTMENT FUND - (SHAWSFRING FARINERS FUND EF) FEDERATION MAIN INVESTMENT FUND - (SSGA RUSSELL 1000 VALUE INDEX	3,034,047.	r m v
FUND)	13,428,614.	FMV
	, ,	
FEDERATION MAIN INVESTMENT FUND - (SSGA S&P 500 FUND)	10,894,247.	FMV
FEDERATION MAIN INVESTMENT FUND - (SSGA US AGGREGATE BOND FUND)	8,907,137.	FMV
FEDERATION MAIN INVESTMENT FUND - (TOWNSEND REAL ESTATE ALPHA FUND	. , ,	
II LP)	497,728.	FMV
FEDERATION MAIN INVESTMENT FUND - (TOWNSEND REAL ESTATE ALPHA FUND		
III LP)	1,226,561.	FMV
FEDERATION MAIN INVESTMENT FUND - (TOWNSEND REAL ESTATE FUND LP)	6,291,348.	FMV
FEDERATION MAIN INVESTMENT FUND - (VIKING LONG FUND III LTD)	13,250,313.	FMV
EEDEDAMION MAIN INVECTMENT BUND /NOT EMEDATIVE MADRIDGE BUND 112	12 476 262	TOME?
FEDERATION MAIN INVESTMENT FUND - (WGI EMERGING MARKETS FUND LLC)	13,476,363.	FMV
FEDERATION MKT ALT PROGRAM - (BLACKLIGHT POWER INC)	7,423.	FMV
FEDERATION MKT ALT PROGRAM - (CANYON VALUE REALIZATION FUND		
(CAYMAN) LTD)	2,235,218.	FMV
FEDERATION MKT ALT PROGRAM - (CORRE OPPORTUNITIES OFFSHORE FUND	2 400 500	T10.
LTD)	2,129,589.	FMV

21 04-01-21 Schedule D (Form 990)

34-0714445

Part VII Investments - Other Securities. 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
FEDERATION MKT ALT PROGRAM - (DAVIDSON KEMPNER INTL (BVI) LTD)	1,779,389.	FMV
FEDERATION MKT ALT PROGRAM - (ELLIOTT INTERNATIONAL LTD.)	561,408.	FMV
FEDERATION MKT ALT PROGRAM - (FALCON EDGE GLOBAL LTD)	247,372.	FMV
FEDERATION MKT ALT PROGRAM - (HALF SKY FUND LTD)	1,757,729.	FMV
FEDERATION MKT ALT PROGRAM - (KONTIKI OFFSHORE FUND)	2,244,976.	FMV
FEDERATION MKT ALT PROGRAM - (MARBLE RIDGE OFFSHORE FUND, LTD.)	145,208.	FMV
FEDERATION MKT ALT PROGRAM - (NITORUM OFFSHORE FUND LTD)	2,112,237.	FMV
FEDERATION MKT ALT PROGRAM - (OWL CREEK OVERSEAS FUND LTD)	29,970.	FMV
FEDERATION MKT ALT PROGRAM - (VARDE INVESTMENT PARTNERS, LP)	1,785,422.	FMV
FEDERATION MKT ALT PROGRAM - (VIKING GLOBAL EQUITIES III LTD)	2,842,854.	FMV
ISRAEL BONDS	569,977.	COST
AIS LIMITED	1.	COST
APPLIED TECH VENTURES	1.	COST
BEL PRO PARTNERS	1.	COST
EATON PARTNERS, L.P.	1.	COST
GRAND BAY OF BRECKSVILLE LP	1.	COST
GRAND BAY PLAZA LTD	30,000.	COST
IMH FINANCIAL	9,604.	COST
JAFFA FAMILY FOUNDATION LLC	1.	COST
KULBER-MEDINA LIMITED PARTNSHP	1.	COST
LEVINE-MEDINA	1.	COST
LEVINE-SWEET VALLEY LTD. PRTNR	1.	COST
LUDLOW CO.	1.	COST
M MAGAZINE, LTD.	1.	COST
MEMVU, INC.	141,368.	FMV
NORTH OLMSTED ASSOCIATES, LTD.	1.	COST

21 04-01-21 Schedule D (Form 990)

34-0714445

Part VII Investments - Other Securities. See Form 990, Part X, line	9 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
BRIDGE INVESTMENT FUND, LP	106,540.	FMV

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

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.

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

2021
Open to Public Inspection

Name of the organization

Form 990, Part IV, line 14b.

Employer identification number

JEWISH FEDERATION OF CLEVELAND

| 34-0714445 |
| Part | General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to 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 outside the United States 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total (a) Region expenditures employees, (by type) (such as, fundraising, prooffices is a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND THE CARIBBEAN -INVESTMENTS 63,044,000. MIDDLE EAST AND NORTH AFRICA -INVESTMENTS 12,880,000. ARTS & CULTURE CONSULTING AND MIDDLE EAST AND PROGRAMMING RELATED TO EXCHANGE INITIATIVE NORTH AFRICA -12,000. PROGRAM SERVICE OBSERVATION OF PROJECTS AND EDUCATION OF MIDDLE EAST AND VOLUNTEER AND PROFESSIONAL LEADERSHIP NORTH AFRICA -PROGRAM SERVICE 654,000. MIDDLE EAST AND NORTH AFRICA -GRANT MAKING 420,402. OBSERVATION OF PROJECTS AND EDUCATION OF VOLUNTEER AND EUROPE (INCLUDING ICELAND & GREENLAND) PROGRAM SERVICE PROFESSIONAL LEADERSHIP 10,000. OBSERVATION OF PROJECTS AND EDUCATION OF VOLUNTEER AND SUB-SAHARAN AFRICA PROGRAM SERVICE PROFESSIONAL LEADERSHIP 14,000. EUROPE (INCLUDING ICELAND & GREENLAND) ALBANIA, ANDORRA, AUSTRIA, BELGIUM GRANT MAKING 20,300. 0 0 77,054,702. 3 a Subtotal **b** Total from continuation 0 0 sheets to Part I Totals (add lines 3a 77,054,702. and 3b)

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FM\ appraisal, other)
		MIDDLE EAST AND						
		NORTH AFRICA	GENERAL SUPPORT	10,900.	СНЕСК	0.		
			DI OOD GEDINIGEG					
		MIDDLE EAST AND	BLOOD SERVICES,					
		NORTH AFRICA	DISASTER RELIEF, GENERAL SUPPORT	51,220.	CHECK	2 000	ISRAEL BOND	FMV
		NORTH AFRICA	GENERAL SUPPORT	31,220.	CHECK	2,800.	ISKAEL BOND	FMV
			NANOMEDICINE					
		MIDDLE EAST AND	RESEARCH, GENERAL					
		NORTH AFRICA	SUPPORT	235,618.	СНЕСК	0.		
		MIDDLE EAST AND						
		NORTH AFRICA	GENERAL SUPPORT	13,360.	CHECK	0.		
		MIDDLE EAST AND						
		NORTH AFRICA	GENERAL SUPPORT	5,200.	CHECK	0.		
		NOMES IN ALL OFF	SEMERAL BOTTOM	3,200.	on de la contraction de la con			
		MIDDLE EAST AND						
		NORTH AFRICA	GENERAL SUPPORT	5,004.	СНЕСК	0.		
		EIDODE	GENEDAL GUDDODE	20.300	CHECK	0		
		EUROPE	GENERAL SUPPORT	20,300.	CHECK	0.		
			SCHOLARSHIPS, ANNUAL					
		MIDDLE EAST AND	CAMPAIGN, GENERAL					
		NORTH AFRICA	SUPPORT	41,300.	CHECK	0.		

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a	tax
exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

10

Part II Conti	nuation o	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of orga	anization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			MIDDLE EAST AND						
			NORTH AFRICA	GENERAL SUPPORT	25,000.	CHECK	0.		
			MIDDLE EAST AND						
			NORTH AFRICA	GENERAL SUPPORT	30,000.	CHECK	0.		_

Part III Grants and Other Assistance Part III can be duplicated if ac			tes. Complete i	f the organization answered "Yes"	on Form 990, Part	IV, line 16.	
(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)

Page 4

Part IV	Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X 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 Instructions for Form 8621)	X 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 Instructions for Form 8865)	X 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 Instructions for Form 5713; don't file with Form 990)	Yes	X No

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.

PART I, LINE 2:

ALL GRANTEES ARE SUBJECT TO PRE-GRANT REVIEWS THROUGH GUIDESTAR TO

CONFIRM THEIR INCLUSION IN THE IRS' EXEMPT ORGANIZATION MASTER FILE

(501(C)(3) STATUS AND PUBLIC CHARITY CLASSIFICATION), AND A REVIEW TO

CONFIRM THAT THE GRANTEE IS NOT ON THE OFAC LIST ("US TREASURY OFFICE OF

FOREIGN ASSETS CONTROL LIST OF SPECIALLY DESIGNATED NATIONALS AND BLOCKED

PERSONS"). STATEMENTS AND DOCUMENTATION ARE OBTAINED FROM EACH NEW

GRANTEE, INCLUDING A COPY OF ITS IRS DETERMINATION LETTER; MISSION

STATEMENT; THE NAMES OF THE GRANTEE'S BOARD MEMBERS AND CHIEF

PROFESSIONAL; AND A SIGNED STATEMENT CONFIRMING THE GRANTEE'S SECTION

501(C)(3) STATUS AND PUBLIC CHARITY CLASSIFICATION AND CERTIFYING THAT

GRANTS MADE TO THE GRANTEE WILL BE USED ONLY FOR CHARITABLE PURPOSES

WILL NOT RESULT IN GOODS OR SERVICES BEING PROVIDED IN RETURN TO ANY

PERSON, AND THAT THE ORGANIZATION IS IN COMPLIANCE WITH U.S. LAW

REGARDING NO USE OF FUNDS FOR TERRORIST ACTIVITIES. ALLOCATIONS FROM THE

ANNUAL CAMPAIGN FOR JEWISH NEEDS AND ENDOWMENT FUND GRANTS ARE FURTHER

EVALUATED BEFORE THE GRANTS ARE MADE, INCLUDING, WHERE APPROPRIATE

REVIEW OF BUDGET INFORMATION, AND ARE MONITORED AFTERWARDS BY THE STAFF

OF THE FEDERATION'S PLANNING. ALLOCATION AND ENDOWMENT DEPARTMENTS

THROUGH WRITTEN REPORTS, AND WHERE APPROPRIATE, SITE VISITS, FURTHER

GRANTEES WHO RECEIVE SUCH ENDOWMENT FUND GRANTS ARE REQUIRED TO SIGN A

GRANT AWARD LETTER THAT STIPULATES THE TERMS AND CONDITIONS OF THE GRANT

INCLUDING HOW THE GRANT FUNDS ARE TO BE SPENT, OVER WHAT PERIOD OF TIME

AND REPORTING REQUIREMENTS. CERTAIN GRANTEES ARE REQUIRED TO COMPLETE A

GRANT USE REPORT.

THE FEDERATION REPORTS GRANTS ON SCHEDULE I TO VARIOUS 501(C)(3) DOMESTIC

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.

U.S. CHARITIES WHICH, AS PART OF THEIR ACTIVITIES, FUND OVERSEAS

SOME OF THE GRANTS INCLUDE RECOMMENDATIONS THAT SUCH GRANTS BE PROJECTS.

USED TO SUPPORT CERTAIN FOREIGN CHARITABLE ORGANIZATIONS OR THEIR

PROJECTS. SUCH RECOMMENDATIONS ARE ADVISORY ONLY AND SUCH U.S.

ORGANIZATIONS MAKE THE FUNDING DECISIONS. THESE U.S. TAX-EXEMPT

ORGANIZATIONS ARE EXPECTED TO FILE SEPARATE FORM 990'S WITH A SCHEDULE F

FOR THEIR GRANTS TO FOREIGN GRANTEES.

GRANTS TO DOMESTIC 501(C)(3) ORGANIZATIONS THAT SUPPORT A SINGLE FOREIGN

ENTITY HAVE BEEN INCLUDED ON SCHEDULE F.

PART I, LINE 3:

AMOUNTS FOR FOREIGN GRANTS ARE PRESENTED ON THE ACCRUAL BASIS WHICH IS

CONSISTENT WITH THE TREATMENT USED FOR THE FINANCIAL STATEMENTS AND TAX

RETURN.

PART I, LINE 3, COLUMN (E):

REGION: MIDDLE EAST AND NORTH AFRICA -

(E) SPECIFIC TYPES OF SERVICES IN REGION: ARTS & CULTURE CONSULTING AND

PROGRAMMING RELATED TO EXCHANGE INITIATIVE BETWEEN DOMESTIC AND FOREIGN

COUNTRIES.

PART I, LINE 3 (F)

INVESTMENTS IN CENTRAL AMERICA AND THE CARIBBEAN: THE FEDERATION

INVESTS ITS FUNDS WITH A VARIETY OF INVESTMENT MANAGERS BASED IN THE

EUROPE OR ASIA, SOME OF WHICH OPERATE THROUGH INVESTMENT VEHICLES

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

Attach to Form 990.

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

OMB No. 1545-0047 **2021**Open to Public

Inspection

Name of the organization **Employer identification number** 34-0714445 JEWISH FEDERATION OF CLEVELAND Part I **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 1 X Yes criteria used to award the grants or assistance? 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 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) ADAS ISRAEL HEBREW CONGREGATION 2850 OUEBEC STREET N.W. 53-0196563 509 (A) (1) WASHINGTON, DC 20008 5,891. 0 GENERAL SUPPORT ADMINISTRATORS OF THE TULANE HILLEL, ONWARD ISRAEL, PARENT COUNCIL, GENERAL EDUCATIONAL FUND - P.O. BOX 669394 - DALLAS, TX 75266 72-0423889 509 (A) (1) 0 SUPPORT 90,000 MAASAI GIRAFFE & EASTERN AFRICAN WILDLIFE FOUNDATION 1100 NEW JERSEY AVENUE SE BLACK RHINO PROTECTION & 52-0781390 509 (A) (1) WASHINGTON DC 20003 270,000 0 мсмт AGUDATH ISRAEL OF AMERICA INC. 42 BROADWAY, 14TH FL. NEW YORK NY 10004 13-5604164 509 (A) (1) GENERAL SUPPORT 110 360 0. AGUDATH ISRAEL OF OHIO 1481 WARRENSVILLE CENTER ROAD SOUTH EUCLID, OH 44121 82-1922429 509 (A) (1) GENERAL SUPPORT 50 708 0. AHAVATH ISRAEL CONGREGATION 1700 SOUTH TAYLOR ROAD CLEVELAND HEIGHTS, OH 44118 34-1506283 509 (A) (1) 6 510 0 GENERAL SUPPORT 382. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 0. Enter total number of other organizations listed in the line 1 table

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

Part II Continuation of Grants and Other A	ssistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AISH HATORAH OF CLEVELAND							
14077 CEDAR ROAD, SUITE 7							
SOUTH EUCLID, OH 44118	34-1698873	509 (A) (1)	86,000.	0.			GENERAL SUPPORT
ALEKSANDER SHUL							
2195 S. GREEN ROAD							
SOUTH EUCLID, OH 44121	45-1438778	509 (A) (1)	9,285.	0.			GENERAL SUPPORT
ALLEANGE FOR EDVICATION INC							
ALLIANCE FOR EDUCATION INC.							GGUOLADGUIDG GENEDAL
8100 N. UNIVERSITY DRIVE, SUITE 101		E00 (3) (1)	477 000	_			SCHOLARSHIPS, GENERAL
TAMARAC, FL 33321	65-1042013	509 (A) (1)	477,000.	0.			SUPPORT
ALZHEIMERS DISEASE AND RELATED							
DISORDERS ASSOCIATION, INC							
CLEVELAND AREA CHAPTER -							
CLEVELAND, OH 44122	13-3039601	509 (A) (1)	31,250.	0.			GENERAL SUPPORT
ALZHEIMER'S DRUG DISCOVERY							
FOUNDATION - 57 WEST 57TH STREET,							
,	20 1002170	E00 /3\ /1\	10.000	0.			CENEDAL GUDDODE
SUITE 904 - NEW YORK, NY 10019	20-1062179	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
AMERICAN CANCER SOCIETY, INC.							
10501 EUCLID AVE.							PAN OHIO HOPE RIDE,
CLEVELAND, OH 44106	13-1788491	509 (A) (1)	26,716.	0.			GENERAL SUPPORT
AMERICAN CIVIL LIBERTIES UNION OF			,				
OHIO FOUNDATION, INC 4506							
CHESTER AVENUE - CLEVELAND OH							
44103	23-7137105	509 (A) (1)	59,050.	0.			GENERAL SUPPORT
AMERICAN COMMITTEE FOR EDUC &		,, (-,	1 ,	-			
WELFARE OF JEWS OF E EUROPE - 135							
ROCKAWAY TURNPIKE, #101 -							
LAWRENCE, NY 11559	11-3564377	509 (A) (1)	50,000.	0.			GENERAL SUPPORT
AMERICAN FRIENDS OF HOUSE OF HOPE	11 3304377	202 (21) (1)	30,000.	· · ·			
INC 176-25 UNION TURNPIKE,							
SUITE 336 - FRESH MEADOWS, NY							
11366	45_2721825	509 (A) (1)	6,800.	0.			GENERAL SUPPORT
11300	47-7/21072	DOD (W) (T)	1 0,000.	<u> </u>			PENERAL BUFFORI

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
AMERICAN FRIENDS OF JACOBS LADDER, INC 260 CENTRAL AVE., SUITE 218 - LAWRENCE, NY 11559	13-3938077	509 (A) (1)	60,800.	0.			ETHIOPIAN STUDENTS AT RISK, AMIT EITAN PROGRAM, GENERAL SUPPORT	
AMERICAN FRIENDS OF THE PARENTS CIRCLE - FAMILIES FORUM - 4 E 95TH STREET 5C - NEW YORK, NY 10128	95-4869142	509 (A) (2)	10,000.	0.			ANNUAL FUND	
AMERICAN FRIENDS OF YAHAD IN UNUM INC 25 WEST 45TH ST., SUITE 701 - NEW YORK, NY 10036	26-3468570	509 (A) (1)	150,000.	0.			FIELD INVESTIGATIONS	
AMERICAN FRIENDS OF YESHIVA DMIR INC 5227 NEW UTRECHT AVENUE - BROOKLYN, NY 11219	13-2946608	509 (A) (1)	25,542.	0.			GENERAL SUPPORT	
AMERICAN FRIENDS-INTERNATIONAL YOUNG ISRAEL MOVEMENT - 567 CEDAR HILL ROAD, SUITE 106 - FAR ROCKAWAY, NY 11691	45-4013676	509 (A) (1)	21,000.	0.			GENERAL SUPPORT	
AMERICAN HEART ASSOCIATION ONE CLEVELAND CENTER CLEVELAND, OH 44114	13-5613797	509 (A) (1)	5,500.	0.			GENERAL SUPPORT	
AMERICAN ISRAEL EDUCATION FOUNDATION, INC NATIONAL OFFICE - WASHINGTON, DC 20001	52-1623781	509 (A) (1)	139,000.	0.			GENERAL SUPPORT	
AMERICAN JEWISH COMMITTEE NATIONAL HEADQUARTERS NEW YORK, NY 10022	13-5563393	509 (A) (1)	186,504.	0.			ANNUAL FUND, FIGHT ANTISEMITISM, GENERAL SUPPORT	
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE, INC 220 EAST 42ND STREET, SUITE 400 - NEW YORK, NY 10017	13-1656634	509 (A) (1)	154,130.	0.			UKRAINE EMERGENCY RELIEF, INDIA COVID RELIEF, GENERAL SUPPORT	

(a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of							
organization or government	(2) =	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
AMERICAN RED CROSS							
GREATER CLEVELAND CHAPTER							
CLEVELAND, OH 44115	34-0714622	509 (A) (1)	18,200.	0.			GENERAL SUPPORT
,		, , , , , ,					
AMERICANS FOR THE ARTS INC							
1275 K ST. NW							
WASHINGTON, DC 20005	52-1996467	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
·			,				
AMUDIM COMMUNITY RESOURCES INC.							
11 BROADWAY, SUITE 1076							
NEW YORK, NY 10004	47-0984801	509 (A) (1)	618,602.	0.			GENERAL SUPPORT
ANSHEI EMUNA CONGREGATION INC.							
16189 JOG ROAD							
DELRAY BEACH, FL 33446	59-2231998	509 (A) (1)	5,225.	0.			GENERAL SUPPORT
ANTI DEFAMATION LEAGUE							
NATIONAL OFFICE							ANNUAL FUND, GENERAL
NEW YORK, NY 10158	13-1818723	509 (A) (1)	94,450.	0.			SUPPORT
APOLLOS FIRE THE CLEVELAND BAROQUE							
ORCHESTRA - 3091 MAYFIELD ROAD,							
SUITE 217 - CLEVELAND HEIGHTS, OH							
44118	34-1696842	509 (A) (1)	29,900.	0.			GENERAL SUPPORT
APPLEWOOD CENTERS, INC.							
22001 FAIRMOUNT BLVD.	24 0014551	F00 (3) (1)	10.600	•			
SHAKER HEIGHTS, OH 44118	34-0714571	рия (A) (1)	10,600.	0.			GENERAL SUPPORT
ARMAND HAMMER MUSEUM OF ART AND							
CULTURE CENTER, INC 10899							
WILSHIRE BOULEVARD - LOS ANGELES,	05 4045405	F00 (3) (2)	F0.000	•			
CA 90024	95-4217197	DU9 (A) (3)	50,000.	0.			GENERAL SUPPORT
ARTBARN COMMUNITY THEATER							
PROOFFINE MA 02447	04-3478044	E00 (3) (2)	E 200	0.			GENERAL SUPPORT
BROOKLINE, MA 02447	04-34/0044	D03 (A) (Z)	5,300.	υ,			PENERAL SUFFORI

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTS CLEVELAND							
1900 SUPERIOR AVENUE, SUITE 130							
CLEVELAND, OH 44114	34-1936190	509 (A) (1)	8,000.	0.			GENERAL SUPPORT
BAIS CHAYA INC.							
8100 N. UNIVERSITY DR.							
TAMARAC, FL 33321	20-3057194	509 (A) (1)	7,056.	0.			GENERAL SUPPORT
BAIS MEDRASH MAYAN HATORAH INC.							
101 MILTON ST.							
LAKEWOOD, NJ 08701	20-2925281	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
BAT CONSERVATION INTERNATIONAL,							g.,,,, govgen,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
INC 500 NORTH CAPITAL OF TX	74 0553144	E00 (3) (1)	210 000	0			CAVE CONSERVATION & WHI
HIGHWAY - AUSTIN, TX 78746	74-2553144	509 (A) (I)	210,000.	0.			NOSE SYNDROME RESEARCH
BEACHWOOD KEHILLA							
25447 HALBURTON ROAD							BUILDING CAMPAIGN,
BEACHWOOD, OH 44122	34-1784895	509 (A) (1)	29,271.	0.			GENERAL SUPPORT
BEBER CAMP PROPERTY, INC. W 1741 COUNTY ROAD J							
MUKWONAGO, WI 53149	27-2025066	509 (3) (2)	16,000.	0.			SCHOLARSHIP FUND
MORWONAGO, WI 33143	27 2025000	505 (R) (Z)	10,000.	٠.			DenouARBITI FOND
BEIS MIDRASH OF QUEENS							
17 FT. GEORGE HILL, APT. 7J							
NEW YORK, NY 10040	11-2509831	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
BELLEFAIRE JEWISH CHILDRENS BUREAU							ANNUAL ALLOCATION
ONE POLLOCK CIRCLE							ANNUAL ALLOCATION, COMMUNITY SVCS CLIENT
SHAKER HEIGHTS, OH 44118	34-0714630	509 (A) (1)	1,200,452.	0.			ASSTNCE, GENERAL SUPPORT
	21 0,11000	(11) (1)	1,200,252.	· ·			The second secon
BETH ISRAEL - THE WEST TEMPLE							
14308 TRISKETT ROAD							SECURITY GRANT, GENERAL
CLEVELAND, OH 44111	34-1001012	509 (A) (1)	7,700.	0.			SUPPORT

Part II Continuation of Grants and Other A	Assistance to Dor		and Domestic Go	vernments (Sch	edule I (Form 990) Pa		51 0/11115 Fage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETH MEDRASH GOVOHA OF AMERICA 601 PRIVATE WAY							
LAKEWOOD, NJ 08701	21-0634542	509 (A) (1)	60,004.	0.			GENERAL SUPPORT
BIKUR CHOLIM 1845 SOUTH TAYLOR ROAD CLEVELAND HEIGHTS, OH 44118	34-1809885	509 (A) (1)	134,699.	0.			ANNUAL CAMPAIGN, GENERA
BIRTHRIGHT ISRAEL FOUNDATION PO BOX 21615 NEW YORK, NY 10087	13-4092050	509 (A) (1)	15,730.	0.			GENERAL SUPPORT
BNAI BRITH YOUTH ORGANIZATION, INC INTERNATIONAL OFFICE - WASHINGTON, DC 20001	31-1794932		52,700.	0.			GENERAL SUPPORT
BNAI JESHURUN CONGREGATION 27501 FAIRMOUNT BOULEVARD PEPPER PIKE, OH 44124	34-0714675	509 (A) (1)	150,207.	0.			NER TAMID, SYNAGOGUE SUPPORT, GENERAL SUPPOR
BOCA RATON REGIONAL HOSPITAL FOUNDATION, INC 800 MEADOWS ROAD - BOCA RATON, FL 33486	59-2406425	509 (A) (1)	48,000.	0.			KEEPING THE PROMISE CAMPAIGN, GENERAL SUPPO
BOYS & GIRLS CLUBS OF NORTHEAST OHIO - 4111 PEARL AVENUE - LORAIN, OH 44055	34-1856214	509 (A) (1)	9,800.	0.			GENERAL SUPPORT
BRAVO COLORADO AT VAIL-BEAVER CREEK - 2271 N. FRONTAGE RD. W, SUITE C - VAIL, CO 81657	84-1074065	509 (A) (1)	8,000.	0.			ANNUAL FESTIVAL SUPPORT
BROOKLYN COMMUNITY HOUSING AND SERVICES, INC 105 CARLTON AVE BROOKLYN, NY 11205	11-2549027		12,000.	0.			ANNUAL FUND, GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T ugo T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROTHER'S BROTHER FOUNDATION							
1200 GALVESTON AVENUE							KENTUCKY AND ARKANSAS
PITTSBURGH, PA 15233	34-6562544	509 (A) (1)	25,000.	0.			TORNADO RELIEF
,		, , , , ,					
CARE							KENTUCKY TORNADO
151 ELLIS STREET, N.E.							EMERGENCY AID, GENERAL
ATLANTA, GA 30303	13-1685039	509 (A) (1)	30,800.	0.			SUPPORT
CASE WESTERN RESERVE UNIVERSITY							
OFFICE OF ADVANCEMENT SERVICES							SIEGAL LIFELONG LEARNING
CLEVELAND, OH 44106-7035	34-1018992	509 (A) (1)	173,145.	0.			PROGRAM, GENERAL SUPPORT
GEDING GIVIT MEDICIL GENERA							
CEDARS SINAI MEDICAL CENTER							
8700 BEVERLY BLVD., SUITE 2416	05 1644600	E00 (3) (1)	F0 000	_			EMERGENCY DEPARTMENT
LOS ANGELES, CA 90048	95-1644600	509 (A) (I)	50,000.	0.			RESEARCH, EDUCATION FUND
CENTER FOR ARTS-INSPIRED LEARNING							
10917 MAGNOLIA DRIVE							
CLEVELAND, OH 44106	34-1241756	509 (A) (2)	13,300.	0.			GENERAL SUPPORT
CERTERIE, OR TITO	31 1111730	303 (11, (2,	13,300.	•			DINDING BOTTON
CENTER FOR EMPOWERING REFUGEES AND							
IMMIGRANTS - 544 INTERNATIONAL							
BLVD, SUITE 9 - OAKLAND, CA 94606	76-0822958	509 (A) (1)	25,500.	0.			GENERAL SUPPORT
			,				
CENTERS FOR FAMILIES AND CHILDREN							
4500 EUCLID AVENUE							ANNUAL FUND, GENERAL
CLEVELAND, OH 44103	23-7084455	509 (A) (1)	10,750.	0.			SUPPORT
CENTRAL EUROPE CENTER FOR RESEARCH							
& DOCUMENTATION, INC 1141							
LOXFORD TERRACE - SILVER SPRING,							
MD 20901	58-1970134	509 (A) (1)	6,000.	0.			GENERAL SUPPORT
CHABAD JEWISH CENTER OF SOLON							
5570 HARPER ROAD				_			BUILDING CAMPAIGN,
SOLON, OH 44139	34-1796153	ри9 (A) (1)	132,405.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other			and Domestic Go	vernments (Sch	edule I (Form 990), Pa		51 0/11115 F
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD LUBAVITCH OF IDAHO INC.							
1803 S. MAPLE GROVE ROAD							
BOISE, ID 83709	20-0514563	509 (A) (1)	36,000.	0.			GENERAL SUPPORT
CHABAD OCEAN SYNAGOGUE, INC.							
7 SEACREST PARKWAY							
HOLLYWOOD, FL 33019	65-0805511	509 (A) (1)	10,000.	0.			PROPERTY ACQUISITION
CHABAD OF DOWNTOWN CLEVELAND							
1111 SUPERIOR AVE. E, SUITE 1320							
CLEVELAND, OH 44114	47-2253170	509 (A) (1)	39,180.	0.			GENERAL SUPPORT
CHABAD OF GLENDALE AND THE			1				
FOOTHILL COMMUNITIES INCORPORATED							
- 1146 N. CENTRAL AVE., #135 -							
GLENDALE, CA 91202	95-4837236	509 (A) (1)	36,000.	0.			GENERAL SUPPORT
			<i>'</i>				
CHABAD OF THE WEST SIDE							
4021 HARDING DRIVE							
WESTLAKE, OH 44145	47-4896798	509 (A) (1)	25,500.	0.			GENERAL SUPPORT
CHABAD OF UNIVERSITY CIRCLE							
1524 EAST 115 ST.				_			
CLEVELAND, OH 44106	80-0878555	509 (A) (1)	33,182.	0.			GENERAL SUPPORT
СНАМАН							
420 LEXINGTON AVE., SUITE 300							UKRAINE EMERGENCY RELI
NEW YORK, NY 10170	23-7365688	509 (A) (1)	10,500.	0.			FUND, GENERAL SUPPORT
·							
CHAMBERFEST CLEVELAND							
20620 JOHN CARROLL BLVD.							
CLEVELAND HEIGHTS, OH 44118	45-3437884	509 (A) (1)	8,858.	0.			GENERAL SUPPORT
CHAIITAIIOIIA FOIINDATTON TNC							
CHAUTAUQUA FOUNDATION, INC.							AMDUTMUEAMED ENDOWNER
PO BOX 28	16-6028421	E00 /3\ /1\	9,000.	0.			AMPHITHEATER ENDOWMENT GENERAL SUPPORT
CHAUTAUQUA, NY 14722	10-0020421	D03 (A) (I)	3,000.	٥.			Schodulo I (Form

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	r ago r
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAVIVA HIGH SCHOOL							
3300 MAYFIELD ROAD							
CLEVELAND HTS., OH 44118	82-4606114	509 (A) (1)	29,598.	0.			GENERAL SUPPORT
CHILDRENS TUMOR FOUNDATION MAIL CODE 6895							
PHILADELPHIA, PA 19170	13-2298956	509 (A) (1)	10,500.	0.			GENERAL SUPPORT
CIRCLE HEALTH SERVICES 12201 EUCLID AVENUE CLEVELAND, OH 44106	23-7078501	509 (A) (1)	5,150.	0.			GENERAL SUPPORT
CITY CLUB OF CLEVELAND							
850 EUCLID AVENUE, 2ND FLOOR							GUARDIANS OF FREE SPEECH
CLEVELAND, OH 44114	34-0144897	509 (A) (2)	28,300.	0.			CAMPAIGN, GENERAL SUPPORT
CITY HARVEST, INC. 6 EAST 32ND STREET, 5TH FLOOR							
NEW YORK, NY 10016	13-3170676	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
CLEVELAND ANIMAL PROTECTIVE LEAGUE 1729 WILLEY AVENUE CLEVELAND, OH 44113	34-0714644	509 (A) (2)	53,660.	0.			GENERAL SUPPORT
CLEVELAND CHABAD CHAI CENTER, INC. 27900 GATES MILLS BLVD.							
CLEVELAND, OH 44124	20-0048898	509 (A) (1)	27,600.	0.			GENERAL SUPPORT
CLEVELAND CHESED CENTER C/O JFSA							
PEPPER PIKE, OH 44122	61-1773183	509 (A) (1)	56,295.	0.			GENERAL SUPPORT
CLEVELAND CLINIC FOUNDATION P.O. BOX 931517							PATIENT & FAMILY SUPPORT
CLEVELAND, OH 44193	34-0714585	509 (A) (1)	618,451.	0.			SERVICES, GENERAL SUPPORT
CDDVDDMD, OH 44173	24 0/14303	505 (A) (I)	1 010,431.	ı			SERVICES, GENERAL SUFFORT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEVELAND COMMUNITY MIKVAH INC.							MAIN ENTRANCE MEZUZAH
PO BOX 21246							DEDICATION, GENERAL
CLEVELAND, OH 44121	81-2733203	509 (A) (1)	23,600.	0.			SUPPORT
							CUYAHOGA COUNTY
CLEVELAND FOUNDATION							IMMIGRATION LEGAL
1422 EUCLID AVENUE, SUITE 1300							SERVICES FUND, GENERAI
CLEVELAND, OH 44115	34-0714588	509 (A) (1)	137,880.	0.			SUPPORT
CLEVELAND HEARING AND SPEECH							AUDIOLOGY EARLY
CENTER - 11635 EUCLID AVENUE -							INTERVENTION PROGRAM,
CLEVELAND, OH 44106	34-0714648	509 (A) (1)	13,177.	0.			GENERAL SUPPORT
,			,				
CLEVELAND HILLEL FOUNDATION, INC.							
11303 EUCLID AVENUE							ANNUAL FUND, GENERAL
CLEVELAND, OH 44106	34-1187022	509 (A) (2)	747,121.	0.			SUPPORT
CLEVELAND INSTITUTE OF ART							
INSTITUTIONAL ADVANCEMENT							SCHOLARSHIPS, ANNUAL
CLEVELAND, OH 44106	34-0714334	509 (2) (1)	25,274.	0.			FUND, GENERAL SUPPORT
eddyllimi, on 44100	34 0/14334	303 (11) (1)	23,274.	•			TOND, GENERAL BOTTONT
CLEVELAND INSTITUTE OF MUSIC							
11021 EAST BOULEVARD							CHAMBER MUSIC PRIZE,
CLEVELAND, OH 44106	34-0714600	509 (A) (1)	173,248.	0.			GENERAL SUPPORT
CLEVELAND JEWISH PUBLICATION							
COMPANY FOUNDATION - 23880							
COMMERCE PARK, SUITE 1 -							
BEACHWOOD, OH 44122	20-4136425	509 (A) (1)	8,300.	0.			GENERAL SUPPORT
CLEVELAND JEWISH SACRED SOCIETY							
INC 23916 WENDOVER DRIVE -							
BEACHWOOD, OH 44122	23-7432283	509 (A) (1)	6,700.	0.			GENERAL SUPPORT
JEHONNOOD, ON TILL	23 /432203	303 (A) (I)	0,700.	0.			PERENTE BOLLOKI
CLEVELAND KASHRUS ORGANIZATION,							
INC P.O. BOX 181476 - CLEVELAND							
HEIGHTS, OH 44118	34-1874133	509 (A) (1)	7,100.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other A	Assistance to Do		and Domestic Go	vernments (Sch	edule I (Form 990) Pa		51 0711115 F
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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEVELAND KIDS BOOK BANK							
3635 PERKINS AVE., SUITE 1E							
CLEVELAND, OH 44114	47-5553602	509 (A) (2)	7,350.	0.			GENERAL SUPPORT
,			,				
CLEVELAND METROPARKS SYSTEM							
4101 FULTON PARKWAY							
CLEVELAND, OH 44144	34-6000704	GOVERNMENTAL	11,300.	0.			GENERAL SUPPORT
CLEVELAND MUSEUM OF ART							TEADERCUID CIRCLE
11150 EAST BOULEVARD							LEADERSHIP CIRCLE,
CLEVELAND, OH 44106	34-0714336	509 (A) (1)	142,374.	0.			RESILIENCE CAMPAIGN, GENERAL SUPPORT
CHEVERAND, OIL 44100	34 0714330	505 (R) (I)	142,574.	<u> </u>			GENERAL BUTTORT
CLEVELAND MUSEUM OF NATURAL							
HISTORY - 1 WADE OVAL, UNIVERSITY							
CIRCLE - CLEVELAND, OH 44106	34-0714338	509 (A) (1)	7,150.	0.			GENERAL SUPPORT
CLEVELAND MUSIC SCHOOL SETTLEMENT							
11125 MAGNOLIA DRIVE							
CLEVELAND, OH 44106	34-0714339	509 (A) (1)	37,400.	0.			GENERAL SUPPORT
CLEVELAND PLAY HOUSE							T TOURG UP CAMPATON
1901 EAST 13TH STREET, SUITE 200							LIGHTS UP CAMPAIGN, ANNUAL FUND, GENERAL
CLEVELAND, OH 44114	34-6515260	509 (A) (2)	15,700.	0.			SUPPORT
CHEVERAND, OH 44114	34-0313200	509 (A) (Z)	13,700.	0.			SUFFORT
CLEVELAND RAPE CRISIS CENTER							
2937 WEST 25TH STREET, 2ND FLOOR							ANNUAL CAMPAIGN, GENE
CLEVELAND, OH 44113	51-0164315	509 (A) (1)	10,500.	0.			SUPPORT
CLEVELAND ROTARY FOUNDATION							
377 LEAR ROAD, SUITE 222							COMMUNITY AND EDUCATI
AVON LAKE, OH 44012	34-6556119	509 (A) (1)	6,000.	0.			SUPPORT
CLEVELAND SCHOOL OF THE ARTS BOARD							
OF TRUSTEES - P.O. BOX 18265 -							
CLEVELAND, OH 44118	34-1410357	509 (A) (2)	6,250.	0.			GENERAL SUPPORT
	1 31 1410337	P> \4/	1 0,250.	٠.		1	Schodulo I /Form

Part II Continuation of Grants and Other A	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CLEVELAND SEPHARDIC CONGREGATION 2500 BLOSSOM LANE BEACHWOOD, OH 44122	82-3493692	509 (A) (1)	11,280.	0.			BUILDING CAMPAIGN, GENERAL SUPPORT			
CLEVELAND SOCIETY FOR THE BLIND 1909 EAST 101ST STREET CLEVELAND, OH 44106	34-0714652	509 (A) (1)	6,950.	0.			ANNUAL CAMPAIGN, GENERAL SUPPORT			
CLEVELAND STATE UNIVERSITY FOUNDATION, INC DEVELOPMENT - CLEVELAND, OH 44115	34-1316665	509 (A) (1)	19,100.	0.			CLEVELAND MARSHALL COLLEGE OF LAW, GENERAL SUPPORT			
CLEVELAND TORAH CENTER INC. 2120 SOUTH GREEN RD. SOUTH EUCLID, OH 44121	46-2826301	509 (A) (1)	90,200.	0.			GENERAL SUPPORT			
CLEVELAND ZOOLOGICAL SOCIETY 3900 WILDLIFE WAY CLEVELAND, OH 44109	34-0816490	509 (A) (1)	201,450.	0.			GIRAFFE CONSERVATION PROGRAM, ANIMAL CARE PROGRAM, GENERAL SUPPORT			
COLLEGE NOW GREATER CLEVELAND, INC 1500 WEST 3RD STREET, STE. 125 - CLEVELAND, OH 44113	34-6580096	509 (A) (1)	106,136.	0.			SCHOLARSHIPS, ANNUAL CAMPAIGN, GENERAL SUPPORT			
COLLEGES OF THE SENECA HOBART & WILLIAM SMITH COLLEGES - 20 SENECA STREET - GENEVA, NY 14456	16-0743040	509 (A) (1)	22,000.	0.			GENERAL SUPPORT			
COMBINED JEWISH PHILANTHROPIES OF GREATER BOSTON, INC 126 HIGH STREET - BOSTON, MA 02110	04-2103559	509 (A) (1)	5,500.	0.			GENERAL SUPPORT			
COMMISSION ON CEMETERY PRESERVATION - 25701 SCIENCE PARK DRIVE - CLEVELAND, OH 44122	34-1771506	509 (A) (3)	13,535.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
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COMMUNITY BUILDING ART WORKS 11140 ROCKVILLE PIKE, #100-661 ROCKVILLE, MD 20852	81-4784695	509 (A) (2)	20,000.	0.			GENERAL SUPPORT			
CONGREGATION AGUDATH ISRAEL BORO PARK - 4911 16TH AVENUE - BROOKLYN, NY 11204	11-3132653	509 (A) (1)	20,000.	0.			general support			
CONGREGATION AHAVATH TORAH 240 BROAD AVENUE ENGLEWOOD, NJ 07631	22-1574510	509 (A) (1)	54,300.	0.			GENERAL SUPPORT			
CONGREGATION BEIS DONIEL 3685 BENDEMEER ROAD CLEVELAND, OH 44118	42-1749444	509 (A) (1)	201,700.	0.			TZEDAKAH FUND, GENERAL SUPPORT			
CONGREGATION BETH ABRAHAM OF BERGENFIELD - 396 NEW BRIDGE ROAD - BERGENFIELD, NJ 07621	22-6096170	509 (A) (1)	5,986.	0.			GENERAL SUPPORT			
CONGREGATION BNOS DEVORAH INC. 360 OAK STREET LAKEWOOD, NJ 08701	26-1671307	509 (A) (1)	202,500.	0.			TZEDAKAH FUND, GENERAL SUPPORT			
CONGREGATION K HAL YEREIM 1771 SOUTH TAYLOR ROAD CLEVELAND HEIGHTS, OH 44118	34-1314156	509 (A) (1)	45,666.	0.			general support			
CONGREGATION MISCHKNOIS LAVIER YAKOV, INC 5 WIENER DRIVE - MONSEY, NY 10952	31-1761339	509 (A) (1)	10,000.	0.			GENERAL SUPPORT			
CONGREGATION SHAAREY TIKVAH 26811 FAIRMOUNT BOULEVARD BEACHWOOD, OH 44122	34-0823457	509 (A) (1)	36,682.	300.	FMV	ISRAEL BOND	SYNAGOGUE SUPPORT, SHOFAR CAMPAIGN, GENERAL SUPPORT			

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
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CONGREGATION TIFERES TZVI										
11 12TH ST.										
LAKEWOOD, NJ 08701	13-4107680	509 (A) (1)	229,000.	0.			GENERAL SUPPORT			
CONGREGATION ZICHRON CHAIM										
2203 SOUTH GREEN ROAD							BUILDING CAMPAIGN,			
UNIVERSITY HTS., OH 44121	34-1196207	509 (A) (1)	300,864.	0.			GENERAL SUPPORT			
·										
CONGRESS FOR JEWISH CULTURE										
306 W. 18TH STREET, 2B										
NEW YORK, NY 10011	13-1677406	509 (A) (1)	15,000.	0.			GENERAL SUPPORT			
CORNELL UNIVERSITY										
BOX 37334										
BOONE, IA 50037	15-0532082	509 (A) (1)	10,190.	0.			GENERAL SUPPORT			
CROHNS & COLITIS FOUNDATION OF										
AMERICA, INC 733 THIRD AVENUE,				_						
SUITE 510 - NEW YORK, NY 10017	13-6193105	509 (A) (1)	8,680.	0.			GENERAL SUPPORT			
CUYAHOGA COMMUNITY COLLEGE							EQUITY AND SUCCESS FUND,			
FOUNDATION - 700 CARNEGIE AVENUE -							GAP SCHOLARSHIP, GENERAL			
CLEVELAND, OH 44115	23-7320719	509 (A) (1)	16,400.	0.			SUPPORT			
DIAN FOSSEY GORILLA FUND							ANTI POACHING PATROLS IN			
INTERNATIONAL - 800 CHEROKEE							RWANDA AND CONGO, GENERAL			
AVENUE SE - ATLANTA, GA 30315	52-1118866	509 (A) (1)	356,250.	0.			SUPPORT			
DING DADITHG WIIDITED COCTEMY THE										
DING DARLING WILDLIFE SOCIETY, INC PO BOX 565										
SANIBEL ISLAND, FL 33957	59-2240895	509 (A) (1)	17,500.	0.			GENERAL SUPPORT			
,							1			
DIVERSITY CENTER OF NORTHEAST							FUND A NEED PROGRAM,			
OHIO, INC 3659 GREEN ROAD,							ANNUAL CAMPAIGN , GENERAL			
SUITE 220 - CLEVELAND, OH 44122	20-1966761	509 (A) (1)	26,975.	0.			SUPPORT CON			

Part II Continuation of Grants and Other A	Assistance to Dor		and Domestic Go	vernments (Sch	edule I (Form 990), Pa		- Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOBAMA THEATRE, INC.							
2340 LEE ROAD							
CLEVELAND HEIGHTS, OH 44118	34-0943782	509 (A) (2)	60,675.	0.			GENERAL SUPPORT
DOCTORS WITHOUT BORDERS USA, INC. 40 RECTOR STREET, 16TH FLOOR							EMERGENCY RELIEF FUND, ANNUAL CAMPAIGN, GENERAL
NEW YORK, NY 10006	13-3433452	509 (A) (1)	18,150.	0.			SUPPORT
DUMBARTON ARTS AND EDUCATION INC. 3133 DUMBARTON STREET NW WASHINGTON, DC 20007	52_1182326	509 (A) (1)	9,375.	0.			GENERAL SUPPORT
WASHINGTON, DC 20007	32 1102320	309 (R) (1)	3,373.				GENERAL SULTORI
EARTHJUSTICE 50 CALIFORNIA ST., STE. 500							
SAN FRANCISCO, CA 94111	94-1730465	509 (A) (2)	210,000.	0.			LITIGATION SUPPORT
ELON UNIVERSITY OFFICE OF UNIVERSITY ADVANCEMENT							
ELON, NC 27244	56-0532303	509 (A) (1)	10,000.	0.			HILLEL, GENERAL SUPPORT
ENVISION EXCELLENCE IN STEM EDUCATION - 2108 LAMBERTON ROAD - CLEVELAND HTS., OH 44118	20-8622102	509 (A) (1)	10,000.	0.			SCORE WITH STEM NIGHT, CLEVELAND CAVS AND NEOSTEM ECOSYSTEM
FACING HISTORY AND OURSELVES, INC. 89 SOUTH STREET, SUITE 401			16,000				ANTI SEMITISM INITIATIVE
BOSTON, MA 02111	04-2761636	509 (A) (1)	16,200.	0.			GENERAL SUPPORT
FAIRMOUNT TEMPLE ANSHE CHESED CONGREGATION - 23737 FAIRMOUNT							SYNAGOGUE SUPPORT, EARLY CHILDHOOD CENTER, GENERA
BOULEVARD - BEACHWOOD, OH 44122	34-0208330	509 (A) (1)	335,077.	0.			SUPPORT
FAMILY CONNECTIONS OF NORTHEAST OHIO - 11811 SHAKER BLVD., #220 -							
CLEVELAND, OH 44120	34-1696816	509 (A) (1)	6,750.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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FARMWORKER JUSTICE FUND, INC. 1126 16TH ST. NW SUITE LL101							
WASHINGTON, DC 20036	52-1196708	509 (A) (1)	9,375.	0.			GENERAL SUPPORT
FEEDING AMERICA 161 NORTH CLARK STREET, SUITE 700 CHICAGO, IL 60601	36-3673599	509 (A) (1)	31,150.	0.			KENTUCKY AND ARKANSAS TORNADO RELIEF, GENERAL SUPPORT
FIRST TEE OF CLEVELAND 3841 WASHINGTON PARK BOULEVARD CLEVELAND, OH 44105	34-1915692	509 (A) (1)	16,800.	0.			GENERAL SUPPORT
FJC - A FOUNDATION OF DONOR ADVISED FUNDS - 31 WEST 34TH STREET, SUITE 8026 - NEW YORK, NY 10001	13-3848582		30,000.	0.			GENERAL SUPPORT
FLORENCE MELTON ADULT MINI-SCHOOL CORPORATION - 520 8TH AVENUE, 4TH FLOOR - NEW YORK, NY 10018	01-0725179	509 (A) (1)	6,000.	0.			ANNUAL CAMPAIGN
FOUNDATION FOR JEWISH CAMP, INC. 253 W. 35TH ST, 4TH FL NEW YORK, NY 10001	22-3551013	509 (A) (1)	25,000.	0.			GENERAL SUPPORT
FOUNDATION FOR THE DEFENSE OF DEMOCRACIES, INC PO BOX 33249 - WASHINGTON, DC 20033	13-4174402	509 (A) (1)	10,000.	0.			ANNUAL SUPPORT
FRIENDS OF ADERES HATORAH INC. 1072 MADISON AVE. LAKEWOOD, NJ 08701	51-0589445	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
FRIENDS OF BREAKTHROUGH SCHOOLS 3615 SUPERIOR AVE. E. CLEVELAND, OH 44114	20-4948838	509 (A) (1)	154,450.	0.			ANNUAL CAMPAIGN, GENERAL SUPPORT

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FRIENDS OF HORSESHOE LAKE							
PO BOX 201252							
SHAKER HEIGHTS, OH 44120	87-3535169	509 (A) (2)	16,000.	0.			GENERAL SUPPORT
FRIENDS OF PILGRIM SCHOOL							
540 S. COMMONWEALTH AVE.							
LOS ANGELES, CA 90020	95-4099278	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
FRIENDS OF THE ETHIOPIAN NATIONAL							
PROJECT INC 400 AURORA COMMONS							
CIRCLE #668 - AURORA, OH 44202	47-3865812	509 (A) (1)	33,185.	0.			GENERAL SUPPORT
EDIENDOUID CIDOLE OF CLEVELAND							
FRIENDSHIP CIRCLE OF CLEVELAND, INC 27900 GATES MILLS BOULEVARD							MEZUZAH PROJECT, ANNUAL
- PEPPER PIKE, OH 44124	20-8848426	509 (A) (1)	348,703.	0.			CAMPAIGN, GENERAL SUPPO
		(11) (1)		<u> </u>			
FRISCH SCHOOL							
120 WEST CENTURY ROAD							
PARAMUS, NJ 07652	22-1937461	509 (A) (1)	31,960.	0.			GENERAL SUPPORT
FUTURE HEIGHTS, INC.							
2843 WASHINGTON BLVD., STE 105							
CLEVELAND HEIGHTS, OH 44118	34-1948426	509 (A) (1)	6,100.	0.			GENERAL SUPPORT
GARDENS JEWISH EXPERIENCE							
180 BENT TREE DRIVE							
PALM BEACH GARDENS, FL 33418	35-2417359	509 (A) (1)	8,000.	0.			GENERAL SUPPORT
GATHERING PLACE							
ARNOLD & SYDELL MILLER FAMILY CAMPU							 ANNUAL CAMPAIGN, GENERAI
BEACHWOOD, OH 44122	34-1879035	509 (A) (1)	56,575.	0.			SUPPORT
GEALIGA GOLINEY HUMANE GOGLESY							
GEAUGA COUNTY HUMANE SOCIETY P.O. BOX 116							
NOVELTY, OH 44072	23-7358431	509 (A) (1)	6,850.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GESU CATHOLIC CHURCH							
2470 MIRAMAR BLVD.							
UNIVERSITY HTS., OH 44118	34-0714349	509 (A) (1)	6,400.	0.			GENERAL SUPPORT
,		(, (,	,,=,,				
GIVAT HAVIVA EDUCATIONAL							
FOUNDATION - 500 7TH AVENUE, 8TH							
FLOOR - NEW YORK, NY 10018	13-2584337	509 (A) (1)	26,500.	0.			GENERAL SUPPORT
GLOBAL CLEVELAND							
1422 EUCLID AVE., #1652							WORK WITH AFGHAN
CLEVELAND, OH 44115	27-5245539	509 (A) (1)	94,365.	0.			REFUGEES, GENERAL SUPPOR
GOOD PEOPLE FUND, INC.							
384 WYOMING AVENUE							
MILBURN, NJ 07041	26-1887249	509 (A) (2)	28,600.	0.			GENERAL SUPPORT
MIDDOM, NO 07041	20 1007243	303 (11) (2)	20,000.	· ·			DENEME BOTTON
GREATER CLEVELAND CONGREGATIONS,							
INC 6114 FRANCIS AVE							
CLEVELAND, OH 44127	27-5236392	509 (A) (1)	12,450.	0.			GENERAL SUPPORT
			·				
GREATER CLEVELAND FOOD BANK, INC.							FRESH PRODUCE CAMPAIGN,
13815 COIT ROAD							CAPITAL CAMPAIGN, GENERA
CLEVELAND, OH 44110	34-1292848	509 (A) (1)	888,869.	0.			SUPPORT
GREEN ROAD SYNAGOGUE							SYNAGOGUE SUPPORT,
2437 GREEN ROAD							BUILDING CAMPAIGN,
CLEVELAND, OH 44122	34-1114908	509 (A) (1)	221,778.	0.			GENERAL SUPPORT
GROSS SCHECHTER DAY SCHOOL							ANNIIAI. ALLOCATION
27601 FAIRMOUNT BOULEVARD							ANNUAL ALLOCATION, TUITION ASSISTANCE,
PEPPER PIKE, OH 44124	34-1283907	509 (A) (1)	806,824.	0.			GENERAL SUPPORT
FEFFER FIRE, ON 44124	34-1203907	309 (A) (I)	000,024.	0.			GENERAL SUFFORT
HANNA PERKINS SCHOOL							
19910 MALVERN ROAD							SCHOLARSHIPS, GENERAL
SHAKER HTS., OH 44122	34-1269765	509 (A) (1)	16,450.	0.			SUPPORT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
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HARVEST HOME INC.									
2118 WILSHIRE BLVD., PMB 358									
SANTA MONICA, CA 90403	95-4079490	509 (A) (1)	9,500.	0.			GENERAL SUPPORT		
,			,						
HATHAWAY BROWN SCHOOL							ENDOWMENT FUND, ANNUAL		
19600 NORTH PARK BOULEVARD							CAMPAIGN , GENERAL		
SHAKER HEIGHTS, OH 44122	34-0714426	509 (A) (1)	42,100.	0.			SUPPORT		
HAWKEN SCHOOL							SCHOLARSHIPS, WELLNESS		
P.O. BOX 8002	24 0544405	500 (5) (4)	100 550				CENTER, BUILDING FUND,		
GATES MILLS, OH 44040	34-0714427	509 (A) (1)	100,750.	0.			GENERAL SUPPORT		
HEBREW ACADEMY OF CLEVELAND							ANNUAL ALLOCATION,		
1860 SOUTH TAYLOR ROAD							TUITION ASSISTANCE,		
CLEVELAND HEIGHTS, OH 44118	34-0714428	509 (A) (1)	4,425,717.	0.			GENERAL SUPPORT		
CHEVERAND HEIGHID, OH 44110	34 0714420	303 (A) (I)	4,425,717.	· ·			GENERAL BOTTORT		
HEIGHTS JEWISH CENTER									
14270 CEDAR ROAD							SYNAGOGUE SUPPORT,		
UNIVERSITY HEIGHTS, OH 44121	34-6001361	509 (A) (1)	6,748.	0.			GENERAL SUPPORT		
HFLA OF NORTHEAST OHIO									
23300 CHAGRIN BOULEVARD, SUITE 204							EDUCATION SPONSOR,		
BEACHWOOD, OH 44122	34-0281800	509 (A) (1)	22,800.	0.			GENERAL SUPPORT		
HIAS, INC.									
1300 SPRING STREET, SUITE 500									
SILVER SPRING, MD 20910	13-5633307	509 (A) (1)	26,100.	0.			GENERAL SUPPORT		
HILLEL THE FOUNDATION FOR JEWISH									
CAMPUS LIFE - 613 EAST SUMMIT							ANNUAL CAMPAIGN, GENERAL		
STREET - KENT, OH 44240	34-6557290	509 (A) (1)	245,294.	0.			SUPPORT		
HILLEL THE FOUNDATION FOR JEWISH	34 0337230		243,234.	0.					
CAMPUS LIFE - NATIONAL									
HEADQUARTERS - WASHINGTON, DC									
20001	52-1844823	509 (A) (1)	123,050.	0.			GENERAL SUPPORT		
20001	32 1011023	(11) (1)	123,030.	٠.			Parantan Borrowi		

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HILLEL THE FOUNDATION FOR JEWISH										
CAMPUS LIFE - BEERMAN JEWISH										
STUDENT CENTER - OXFORD, OH 45056	31-6068732	509 (A) (1)	72,385.	0.			GENERAL SUPPORT			
HILLEL THE FOUNDATION FOR JEWISH										
CAMPUS LIFE - 21 MILL STREET -										
ATHENS, OH 45701	52-1758797	509 (A) (1)	72,060.	0.			GENERAL SUPPORT			
HOPEWELL INN										
147 BELL STREET, SUITE 303										
CHAGRIN FALLS, OH 44022	34-1739967	509 (A) (2)	5,600.	0.			GENERAL SUPPORT			
HOSPICE OF THE WESTERN RESERVE,										
INC 17876 SAINT CLAIR AVENUE -				_						
CLEVELAND, OH 44110	34-1256377	509 (A) (1)	12,750.	0.			GENERAL SUPPORT			
ICAHN SCHOOL OF MEDICINE AT MOUNT										
SINAI - ONE GUSTAVE L. LEVY PL.,										
BOX 1049 - NEW YORK, NY 10029	13-6171197	509 (A) (1)	10,000.	0.			GENERAL SUPPORT			
IDEASTREAM										
1375 EUCLID AVE.	24 1042065	F00 (3) (1)	64 005	0			ANNUAL FUND, GENERAL			
CLEVELAND, OH 44115	34-1943865	509 (A) (I)	64,295.	0.			SUPPORT			
IMPACTISRAEL, INC.										
200 HIGHLAND AVENUE, SUITE 301							ANNUAL FUND, GENERAL			
NEEDHAM, MA 02494	22-3090463	509 (A) (1)	11,000.	0.			SUPPORT			
INDEPENDENT MONTEFIORE SHELTER										
HOME - 29125 CHAGRIN BLVD	24 0045200	F00 (3) (1)	07.000	0			G T T T T T T T T T T T T T T T T T T T			
PEPPER PIKE, OH 44122	34-0845389	OU9 (A) (I)	97,808.	0.			GENERAL SUPPORT			
INDIANA UNIVERSITY FOUNDATION										
ADMINISTRATIVE OFFICES										
BLOOMINGTON, IN 47402	35-6018940	509 (A) (1)	16,000.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INMOTION 23905 MERCANTILE ROAD BEACHWOOD, OH 44122	46-4102770	509 (A) (1)	51,475.	0.			ANNUAL CAMPAIGN, CAPITAL CAMPAIGN, GENERAL SUPPORT
INTEGRITY FIRST FOR AMERICA PO BOX 1831 NEW YORK, NY 10156	82-1110585	509 (A) (1)	10,500.	0.			GENERAL SUPPORT
INTERLOCHEN CENTER FOR THE ARTS P.O. BOX 199 INTERLOCHEN, MI 49643	38-1689022	509 (A) (1)	26,100.	0.			SCHOLARSHIP FUND, GENERAL SUPPORT
INTERMUSEUM CONSERVATION ASSOCIATION - PIVOT CENTR ART DANCE EXPRESSION - CLEVELAND, OH 44113	34-0753538	509 (A) (1)	6,150.	0.			GENERAL SUPPORT
INTERNATIONAL FUND FOR ANIMAL WELFARE, INC 290 SUMMER STREET - YARMOUTH PORT, MA 02675	31-1594197	509 (A) (1)	35,000.	0.			GENERAL SUPPORT
INTERNATIONAL RESCUE COMMITTEE, INC PO BOX 6068 - ALBERT LEA, MN 56007	13-5660870	509 (A) (1)	12,900.	0.			UKRAINE EMERGENCY RELIEF, GENERAL SUPPORT
INTERNATIONAL RHINO FOUNDATION 201 MAIN STREET, SUITE 2600 FORT WORTH, TX 76102	75-2395006	509 (A) (1)	550,000.	0.			SUPPORT OF ANTI POACHING OPERATIONS
ISRAEL EMERGENCY ALLIANCE PO BOX 341069 LOS ANGELES, CA 90034	01-0566033	509 (A) (1)	5,400.	0.			SOUTHEAST REGION HIGH SCHOOL EDUCATIONAL SUPPORT
ISRAEL MEDICAL FUND CORP. 31100 SOLON ROAD, SUITE 9 SOLON, OH 44139	81-1016477	509 (A) (2)	6,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ISRAEL NATURE AND HERITAGE									
FOUNDATION OF AMERICA INC 5							L		
COLD HILL ROAD SOUTH, SUITE 28 -	00 1465040	F00 /3\ /1\	50 000				ROMAN THEATRE IN BEIT		
MENDHAM, NJ 07945	82-1465949	509 (A) (1)	50,000.	0.			SHEAN		
ISRAEL TENNIS CENTERS FOUNDATION, INC 165 EAST 56 STREET, 2ND							SCHOLARSHIP FUND, GENERAL		
FLOOR - NEW YORK, NY 10022	13-2961273	509 (A) (1)	12,398.	0.			SUPPORT		
J STREET EDUCATION FUND, INC. PO BOX 66073									
WASHINGTON, DC 20035	20-2777557	509 (A) (1)	18,950.	0.			GENERAL SUPPORT		
JEWISH AGENCY FOR ISRAEL - NORTH AMERICAN COUNCIL - 633 THIRD AVE, 21ST FLOOR - NEW YORK, NY 10017	23-0053483	509 (A) (1)	192,819.	0.			SHLICHIM FUND, UKRAINE EMERGENCY RELIEF, GENERAL SUPPORT		
JEWISH COMMUNITY CENTERS		, , , , , , , , , , , , , , , , , , ,							
ASSOCIATION OF NORTH AMERICA - 529									
EIGHTH AVENUE, 4TH FLOOR - NEW									
YORK, NY 10018	13-5599486	509 (A) (1)	115,500.	0.			GENERAL SUPPORT		
JEWISH COMMUNITY FOUNDATION OF THE WEST - 2130 21ST STREET - SACRAMENTO, CA 95818	68-0445835	509 (3) (1)	40.057.	0.			GENERAL SUPPORT		
BACKAMENTO, CA 93010	00 0443033	303 (A) (I)	40,037.	٠.			ANNUAL ALLOCATION,		
JEWISH EDUCATION CENTER OF CLEVELAND - 2030 SOUTH TAYLOR ROAD							SCHOLARSHIPS, JHUB, SIEGAL LIFELONG LEARNING		
- CLEVELAND HEIGHTS, OH 44118	34-0714554	509 (A) (2)	5,650,831.	0.			PROGRAM, GENERAL SUPPORT		
JEWISH FAMILY EXPERIENCE			, , ,				,		
2200 SOUTH GREEN ROAD							ANNUAL FUND, BUILDING		
UNIVERSITY HEIGHTS, OH 44121	26-0839035	509 (A) (1)	258,460.	0.			FUND, GENERAL SUPPORT		
JEWISH FAMILY SERVICE ASSOCIATION OF CLEVELAND, OHIO - 29125 CHAGRIN BLVD CLEVELAND, OH 44122	34-0714441	509 (3) (1)	4,479,723.	0.			ANNUAL ALLOCATION, HOLOCAUST SURVIVORS, GENERAL SUPPORT		
22.2. CDBVDDLED, OH 44122	24 0/14441	(11) (1)	=,=/5,/45.	0.			PENERUL BOLLOKI		

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF GREATER							
WASHINGTON - 6101 EXECUTIVE BLVD.,							AFGHANI RESETTLEMENT
SUITE 100 - NORTH BETHESDA, MD 20852	E2 021244E	E00 /3\ /1\	E2 000	0.			EFFORTS, UKRAINE EMERGENCY RELIEF
JEWISH FEDERATION OF PALM BEACH	53-0212445	509 (A) (1)	53,000.	0.			EMERGENCI RELIEF
COUNTY, INC 1 HARVARD CIRCLE,							UKRAINE EMERGENCY RELIE
SUITE 100 - WEST PALM BEACH, FL							ANNUAL CAMPAIGN, GENERA
33409	59-0948696	500 / 3 \ / 1 \	588,100.	0.			SUPPORT
JEWISH FEDERATION OF SOUTH PALM	33 0340030	505 (A) (1)	300,100.	· ·			BOTT OKT
BEACH COUNTY, INC 9901 DONNA							
KLEIN BOULEVARD - BOCA RATON, FL							ANNUAL CAMPAIGN, GENERA
33428	59-1945109	509 (A) (1)	10,000.	0.			SUPPORT
33420	33 1343103	303 (11) (1)	10,000.	•			
JEWISH FEDERATIONS OF NORTH							ISRAEL ACTION NETWORK,
AMERICA, INC 25 BROADWAY, STE.							UKRAINE EMERGENCY RELIE
1700 - NEW YORK, NY 10004	13-1624240	509 (A) (1)	14,856,723.	0.			GENERAL SUPPORT
	10 101111	(11) (1)	11,000,720.				
JEWISH FUNDERS NETWORK							ISRAEL FESTIVAL OF IDEA
150 WEST 30TH STREET, SUITE 900							SOCIAL VENTURE FUND,
NEW YORK, NY 10001	23-2742482	509 (A) (1)	83,660.	0.			ANNUAL FUND
	20 2712102	(11) (1)	00,000.				
JEWISH HOME LIFECARE, SARAH NEUMAN							
CENTER, WESTCHESTER - 845 PALMER							
AVENUE - MAMARONECK, NY 10543	13-3620568	509 (A) (2)	25,000.	0.			GENERAL SUPPORT
		(11) (1)	20,000.	•			
JEWISH LEARNING CONNECTION							
WAXMAN TORAH CENTER							ANNUAL FUND, GENERAL
UNIVERSITY HEIGHTS, OH 44121	34-1552628	509 (A) (2)	43,158.	0.			SUPPORT
JEWISH NATIONAL FUND -KEREN							
KAYEMETH LEISRAEL-, INC 78							
RANDALL AVENUE - ROCKVILLE CENTRE							ANNUAL FUND, FIRE ENGIN
NY 11570	13-1659627	509 (A) (1)	69,695.	5,000.	FMV	ISRAEL BOND	GENERAL SUPPORT
		,	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
JEWISHCOLORADO							
300 S. DAHLIA STREET							 UKRAINE EMERGENCY RELIE
DENVER, CO 80246	01-0831698	509 (A) (1)	30,000.	0.			ANNUAL CAMPAIGN

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOHN CARROLL UNIVERSITY							
UNIVERSITY ADVANCEMENT							MILITARY VETERANS
UNIVERSITY HEIGHTS, OH 44118	34-0714681	509 (A) (1)	39,500.	0.			ASSISTANCE ENDOWMENT FUND
JOSEPH AND FLORENCE MANDEL JEWISH							ANNUAL ALLOCATION, TUITION
DAY SCHOOL - 26500 SHAKER							ASSISTANCE, COVID GRANT,
BOULEVARD - BEACHWOOD, OH 44122	34-1043767	509 (A) (1)	953,516.	0.			GENERAL SUPPORT
JPRO NETWORK, INC.							
12555 BISCAYNE BLVD., SUITE 933							JPRO CONFERENCE, GENERAL
NORTH MIAMI, FL 33181	13-1624105	509 (A) (2)	25,000.	0.			SUPPORT
		(, (-,					
JTA-MJL NEW CORP.							
520 EIGHTH AVENUE, 4TH FLOOR							
NEW YORK, NY 10018	13-0887610	509 (A) (1)	46,159.	0.			GENERAL SUPPORT
		(==, (=,	11,231				
KASHI CHURCH FOUNDATION INC.							
11155 ROSELAND ROAD #10							
SEBASTIAN, FL 32958	59-1850384	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
KAVOD - ENSURING DIGNITY FOR	05 1000001	(11) (1)	20,000.				
HOLOCAUST SURVIVORS - 820 S.							
MONACO PKWY, #234 - DENVER, CO							
80224	47-5495289	509 (A) (1)	61,632.	0.			GENERAL SUPPORT
	47 3433203	303 (11) (1)	01,032.	••			SENERAL BOTTON
KEREN HASHVIIS, INC.							
560 SYLVAN AVENUE, SUITE 2050							
ENGLEWOOD CLIFFS, NJ 07632	46-4203790	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
ENGLEWOOD CHIFFS, NO 07032	40 4203730	505 (A) (1)	10,000.	٠.			GENERAL BOTTORT
KOL ISRAEL FOUNDATION, INC.							
PO BOX 22274							
BEACHWOOD, OH 44122	34-1439802	509 (A) (2)	125,550.	0.			GENERAL SUPPORT
	31 1133302	(11) (2)	123,330.	••			
KOLLEL AVREICHIM							
2451 CLAVER RD.							
UNIVERSITY HTS., OH 44118	46-1812644	509 (A) (1)	377,548.	0.			GENERAL SUPPORT

KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. GENERAL SUPPORT LAA,N,D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	Part II Continuation of Grants and Other	er Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	r age
2402 AVENUE P RROOKLIN, NY 11229 11-3014287 509 (A) (1) 85,000. 0. SENERAL SUPPORT ROLLEL OF YOUNG ISRAEL 2463 SOUTH GREEN ROAD BEACHWOOD, OH 44122 47-3539515 509 (A) (1) 116,136. 0. SENERAL SUPPORT ROLLEL TORAH INC. 17 OVERHILL ROAD MONSEY, NJ 10952 ROLLEL YOUNG 2573 LARCHMONT ROAD BEACHMOOD, OH 44122 47-5635505 509 (A) (1) 18,000. 0. SENERAL SUPPORT ROLLEL YOUNG 2573 LARCHMONT ROAD BEACHMOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. SENERAL SUPPORT ROLOT CHAYEINU, INC. 320 TH AVENUE, #314 RROCKLIN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. OUR JOURNEY PORWARD FT RULLANU, INC. 165 WEST END AVENUE, APT. 3R REW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. SENERAL SUPPORT LAA.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. DENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. PELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	· ,	(b) EIN		(d) Amount of cash grant	noncash	valuation (book, FMV,		
2402 AVENUE P RROOKLIN, NY 11229 11-3014287 509 (A) (1) 85,000. 0. SENERAL SUPPORT ROLLEL OF YOUNG ISRAEL 2463 SOUTH GREEN ROAD BEACHWOOD, ON 44122 47-3539515 509 (A) (1) 116,136. 0. SENERAL SUPPORT ROLLEL TORAH INC. 17 OVERHILL ROAD MONSEY, NY 10952 81-4125039 509 (A) (1) 18,000. 0. SENERAL SUPPORT ROLLEL TORAH INC. 17 OVERHILL ROAD MONSEY, NY 10952 ROLLEL YCM 2573 LARCHWOOD, ON 44122 47-5635505 509 (A) (1) 143,525. 0. SENERAL SUPPORT ROLLEL YCM 2573 LARCHWOOD, ON 44122 47-5635505 509 (A) (1) 143,525. 0. SENERAL SUPPORT ROLLEL YCM 2573 LARCHWOOD, ON 44122 47-5635505 509 (A) (1) 10,000. 0. SENERAL SUPPORT ROLLEL YCM 2573 LARCHWOOD, ON 44122 47-5635505 509 (A) (1) 10,000. 0. SENERAL SUPPORT ROLLEL YCM 2573 LARCHWOOD, ON 40122 47-5635505 509 (A) (1) 10,000. 0. SENERAL SUPPORT ROLLIANU, INC. 165 WEST END AVENUE, APT. 3R REW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. SENERAL SUPPORT LAA. N.D. STUDIO INC. 1939 W. 257H ST., STE. 200 CLEVELAND, ON 44113 34-1212421 509 (A) (1) 8,800. 0. SENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, ON 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	KOLLEL RNET VESHTVAS							
BROOKLYN, NY 11229 11-3014287 509 (A) (1) 85,000. 0. DENERAL SUPPORT KOLLEL OF YOUNG ISRAEL 2463 SOUTH GREEN ROAD BEACHWOOD, OH 44122 47-3539515 509 (A) (1) 116,136. 0. DENERAL SUPPORT KOLLEL TORAH INC. 17 OVERHILL ROAD MONSEY, NJ 10952 81-4125039 509 (A) (1) 18,000. 0. DENERAL SUPPORT KOLLEL YCM 2573 LARCHMONT ROAD BEACHWOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. DENERAL SUPPORT KOLOT CHAYEINU, INC. 320 7TH AYRNUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY FORWARD FI KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. DENERAL SUPPORT L.A.N.D. STUDIO INC. 1939 W. 257H ST., STE. 200 CLEVELAND, OH 44113 34-121421 509 (A) (1) 8,800. 0. DENERAL SUPPORT LAKE ERIE INSTITUTE FO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. DENERAL SUPPORT LAKE HOSPITAL FOUNDATION INC. 7590 AUBUNN ROAD								
2463 SOUTH GREEN ROAD BEACHMOOD, OH 44122 47-3539515 509 (A) (1) 116,136. 0. ENERAL SUPPORT KOLLEL TORAH INC. 17 OVERHILL ROAD MONSEY, NY 10952 81-4125039 509 (A) (1) 18,000. 0. ENERAL SUPPORT KOLLEL YCM 2573 LARCHMONT ROAD BEACHMOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. BENERAL SUPPORT KOLOT CHAYEINU, INC. 320 7TH AVENUE, #314 BROOKLIN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY PORWARD FI KULANU, INC. 155 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. ENERAL SUPPORT L.A.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. ENERAL SUPPORT LAKE BIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. ELAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD		11-3014287	509 (A) (1)	85,000.	0.			GENERAL SUPPORT
2463 SOUTH GREEN ROAD ERACHMOOD, OH 44122 47-3539515 509 (A) (1) 116,136. 0. DENERAL SUPPORT KOLLEL TORAH INC. 17 OVERHILL ROAD MONSEY, NJ 10952 81-4125039 509 (A) (1) 18,000. 0. DENERAL SUPPORT KOLLEL YCM 2573 LARCHMONT ROAD BEACHMOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. DENERAL SUPPORT KOLOT CHAYEINU, INC. 320 77H AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY PORWARD FI KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. DENERAL SUPPORT L.A. N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. DENERAL SUPPORT LAKE RISE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. PELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBUNN ROAD	KOLLEL OF YOUNG ISRAEL							
KOLLEL TORAH INC. 17 OVERHILL ROAD MONSEY, NJ 10952 81-4125039 509 (A) (1) 18,000. 0. SENERAL SUPPORT KOLLEL YCM 2573 LARCHMONT ROAD BEACHMOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. SENERAL SUPPORT KOLOT CHAYEINU, INC. 320 77H AVENUE, \$314 BEROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY FORWARD FT KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. SENERAL SUPPORT L.A.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. SENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIF								
17 OVERHILL ROAD MONSEY, NJ 10952 81-4125039 509 (A) (1) 18,000. 0. SENERAL SUPPORT KOLLEL YCM 2573 LARCHMONT ROAD BERACHWOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. SENERAL SUPPORT KOLOT CHAYEINU, INC. 320 77H AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY FORWARD FI KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. SENERAL SUPPORT L.A.N.D. STUDIO INC. 1939 W, 257H ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. SENERAL SUPPORT JEMISH ECOLOGICAL GETES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. JEMISH ECOLOGICAL FELLOWSHIP		47-3539515	509 (A) (1)	116,136.	0.			GENERAL SUPPORT
17 OVERHILL ROAD MONSEY, NJ 10952 81-4125039 509 (A) (1) 18,000. 0. SENERAL SUPPORT KOLLEL YCM 2573 LARCHMONT ROAD BEACHWOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. SENERAL SUPPORT KOLOT CHAYEINU, INC. 320 77H AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY FORWARD FI KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. SENERAL SUPPORT L.A.N.D. STUDIO INC. 1939 W, 257H ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. SENERAL SUPPORT JEMISH ECOLOGICAL GETS MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. JEMISH ECOLOGICAL FELLOWSHIP	KOLLEL TORAH INC.							
MONSEY, NJ 10952 81-4125039 509 (A) (1) 18,000. 0. GENERAL SUPPORT KOLLEL YCM 2573 LARCHMONT ROAD BEACHWOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. GENERAL SUPPORT KOLOT CHAYEINU, INC. 320 7TH AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. OUR JOURNEY PORWARD FI KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. GENERAL SUPPORT L.A.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP								
2573 LARCHMONT ROAD BEACHWOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. GENERAL SUPPORT KOLOT CHAYEINU, INC. 320 7TH AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. OUR JOURNEY FORWARD FOR WARD FOR		81-4125039	509 (A) (1)	18,000.	0.			GENERAL SUPPORT
2573 LARCHMONT ROAD BEACHWOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. GENERAL SUPPORT KOLOT CHAYEINU, INC. 320 7TH AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. OUR JOURNEY FORWARD FOR WARD FOR	TOTAL VAL							
BEACHWOOD, OH 44122 47-5635505 509 (A) (1) 143,525. 0. SENERAL SUPPORT KOLOT CHAYEINU, INC. 320 7TH AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY FORWARD FI KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. SENERAL SUPPORT L.A.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. SENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD								
KOLOT CHAYEINU, INC. 320 7TH AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY FORWARD FOR WARD F		47-5635505	509 (A) (1)	143 525	0			GENERAL SUPPORT
320 7TH AVENUE, #314 BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. OUR JOURNEY FORWARD FOR STREET OF AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. GENERAL SUPPORT LAA.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. ELAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	<u> </u>	1, 3033303	303 (11) (1)	113,323.	•			DINDIGIE BOTTONI
BROOKLYN, NY 11215 11-3223086 509 (A) (1) 10,000. 0. DUR JOURNEY FORWARD FUNCTION OF THE PROPERT	KOLOT CHAYEINU, INC.							
KULANU, INC. 165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. GENERAL SUPPORT LAA.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	320 7TH AVENUE, #314							
165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. GENERAL SUPPORT LA.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP	BROOKLYN, NY 11215	11-3223086	509 (A) (1)	10,000.	0.			OUR JOURNEY FORWARD FUND
165 WEST END AVENUE, APT. 3R NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. GENERAL SUPPORT LA,N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP	KIII.ANII INC							
NEW YORK, NY 10023 52-1919094 509 (A) (1) 10,108. 0. GENERAL SUPPORT L.A.N.D. STUDIO INC. 1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD								
1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD		52-1919094	509 (A) (1)	10,108.	0.			GENERAL SUPPORT
1939 W. 25TH ST., STE. 200 CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD								
CLEVELAND, OH 44113 34-1212421 509 (A) (1) 8,800. 0. GENERAL SUPPORT LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD								
LAKE ERIE INSTITUTE PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	•	24 1212421	F00 /3\ /1\	0.000	_			GENERAL GURRORE
PO BOX 153 GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	CLEVELAND, OH 44113	34-1212421	509 (A) (1)	8,800.	0.			GENERAL SUPPORT
GATES MILLS, OH 44040 82-0657143 509 (A) (2) 10,754. 0. FELLOWSHIP LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	LAKE ERIE INSTITUTE							
LAKE HOSPITAL FOUNDATION INC. 7590 AUBURN ROAD	PO BOX 153							JEWISH ECOLOGICAL
7590 AUBURN ROAD	GATES MILLS, OH 44040	82-0657143	509 (A) (2)	10,754.	0.			FELLOWSHIP
7590 AUBURN ROAD	LAKE HOSDITAL FOUNDATION INC							
CONCORD TWP., OH 44077 34-1425872 509 (A) (1) 10,000. 0. CAPITAL CAMPAIGN	CONCORD TWP., OH 44077	34-1425872	509 (A) (1)	10,000.	0.			CAPITAL CAMPAIGN

Part II Continuation of Grants and Other			s and Domestic Go	overnments (Scho	edule I (Form 990), Pa	rt II.)	54-0714445 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAURA & ALVIN SIEGAL COLLEGE OF							
JUDAIC STUDIES EDUCATIONAL							
FOUNDATION - 25701 SCIENCE PARK							
DRIVE - CLEVELAND, OH 44122	34-0946903	509 (A) (1)	31,256.	0.			GENERAL SUPPORT
LAUREL SCHOOL							
ONE LYMAN CIRCLE							LAUREL FUND, GENERAL
SHAKER HEIGHTS, OH 44122	34-0714451	509 (A) (1)	18,350.	0.			SUPPORT
LEGACY FOUNDATION							
23775 COMMERCE PARK RD., STE. 1							
BEACHWOOD, OH 44122	34-1942288	509 (A) (1)	6,300.	0.			GENERAL SUPPORT
			,				
LEGAL AID SOCIETY OF CLEVELAND							
1223 WEST 6TH STREET							ANNUAL CAMPAIGN, GENERAL
CLEVELAND, OH 44113	34-0866026	509 (A) (1)	32,300.	0.			SUPPORT
LEONARD AND SUSAN FUCHS MIZRACHI							ANNUAL ALLOCATION,
SCHOOL - 26600 SHAKER BOULEVARD -							TUITION ASSISTANCE,
CLEVELAND, OH 44122	34-1400924	509 (A) (1)	874,339.	0.			GENERAL SUPPORT
			,				
LIFEACT							
210 BELL STREET							
CHAGRIN FALLS, OH 44022	34-1724365	509 (A) (1)	10,250.	0.			GENERAL SUPPORT
LINCOLN PARK COMMUNITY SERVICES							
1521 N. SEDGWICK STREET							
CHICAGO, IL 60610	36-3293380	509 (A) (1)	9,375.	0.			GENERAL SUPPORT
MAGNOLIA CLUBHOUSE INC.							
11101 MAGNOLIA DRIVE	F0 0444055	E00 (3) (1)		_			
CLEVELAND, OH 44106	52-2441206	509 (A) (1)	6,700.	0.			GENERAL SUPPORT
MALTZ JUPITER THEATRE INC.							
1001 EAST INDIANTOWN ROAD							
JUPITER, FL 33477	65-0985652	509 (A) (1)	25,000.	0.			GENERAL SUPPORT

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MALTZ MUSEUM OF JEWISH HERITAGE							ANNUAL ALLOCATION, COVID
2929 RICHMOND ROAD							GRANT - WEBSITE SUPPORT,
BEACHWOOD, OH 44122	04-3684531	509 (A) (1)	368,435.	0.			GENERAL SUPPORT
MANAGEMENT CENTER							
1920 L STREET NW, SUITE 775							
WASHINGTON, DC 20036	20-5197607	509 (A) (2)	50,000.	0.			GENERAL SUPPORT
MANDEL JEWISH COMMUNITY CENTER OF							ANNUAL ALLOCATION,
CLEVELAND - 26001 SOUTH WOODLAND							SCHOLARSHIPS, ANNUAL
ROAD - BEACHWOOD, OH 44122	34-0714439	509 (A) (2)	2,392,086.	0.			FUND, GENERAL SUPPORT
		(, (-,					
MARIE SELBY BOTANICAL GARDENS INC.							
1534 MOUND STREET							
SARASOTA, FL 34236	59-1848965	509 (A) (2)	7,500.	0.			GENERAL SUPPORT
MARYS CENTER FOR MATERNAL AND							
CHILD CARE, INC HEADQUARTERS -							ANNUAL FUND, GENERA
WASHINGTON, DC 20009	52-1594116	509 (A) (1)	12,500.	0.			SUPPORT
MATAN B'SAYSER, INC.							
3528 BLANCHE AVENUE							
CLEVELAND HEIGHTS, OH 44118	34-1577230	509 (A) (1)	110,690.	0.			GENERAL SUPPORT
MAZON INC. A JEWISH RESPONSE TO							
HUNGER - 10850 WILSHIRE BLVD.	22 2624522	E00 (3) (1)	142 025	0			GENERAL GURRORE
SUITE 400 - LOS ANGELES, CA 90024	22-2624532	509 (A) (I)	142,025.	0.			GENERAL SUPPORT
MEDWISH INTERNATIONAL							UKRAINE EMERGENCY RELIEF
1625 EAST 31ST STREET						1	ANNUAL CAMPAIGN, GENERAL
CLEVELAND, OH 44114	34-1903712	509 (A) (1)	26,250.	0.			SUPPORT
MENODAL DADA							
MENORAH PARK 27100 CEDAR ROAD							ANNIIAI, ALLOCAMION CONTI
CLEVELAND, OH 44122	24 0714442	509 (A) (1)	7,421,383.	0.			ANNUAL ALLOCATION, COVII GRANT, GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	r ago r
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MENORAH PARK FOUNDATION							REHABILITATION CENTER,
27100 CEDAR ROAD							CAPITAL CAMPAIGN, GENERAL
CLEVELAND, OH 44122	34-1778478	509 (A) (1)	318,640.	5,000.	FMV	ISRAEL BOND	SUPPORT
METROHEALTH FOUNDATION, INC.							L
PO BOX 74107	24 6605605	500 (5) (0)	15.000				RHEUMATOLOGY RESEARCH,
CLEVELAND, OH 44197	34-6607695	509 (A) (2)	15,800.	0.			GENERAL SUPPORT
MGVP, INC.							
PO BOX 356							
DAVIS, CA 95617	06-1752363	509 (A) (1)	6,250.	0.			GENERAL SUPPORT
MIAMI UNIVERSITY FOUNDATION INC.							SCHOOL OF BUSINESS,
MAIN CAMPUS - PANUSKA DEVELOPMENT	Ē						SCHOLARSHIP FUND, GENERAL
OXFORD, OH 45056	31-6026014	509 (A) (1)	5,900.	0.			SUPPORT
MIDDLE FLOR FORM							
MIDDLE EAST FORUM							
1650 MARKET STREET, SUITE 3600 PHILADELPHIA, PA 19103	23_7740706	509 (A) (1)	6,000.	0.			GENERAL SUPPORT
PHILADELPHIA, PA 19103	23-7749790	509 (A) (1)	8,000.	0.			GENERAL SUPPORT
MIDWEST CAMPERS INC							
2437 SOUTH GREEN RD							
BEACHWOOD, OH 44122	34-0897622	509 (A) (2)	21,800.	0.			GENERAL SUPPORT
MILESTONES AUTISM RESOURCES							
4853 GALAXY PARKWAY, SUITE A							
WARRENSVILLE HEIGHTS, OH 44128	20-0721205	509 (A) (1)	64,770.	0.			GENERAL SUPPORT
MODII EMEDI ING							
MOBILEMED1 INC.							ANNUAL CAMPATON CENEDAL
1950 RICHMOND RD. TR 205	26_3858360	509 (A) (1)	11 000	0.			ANNUAL CAMPAIGN, GENERAL SUPPORT
LYNDHURST, OH 44124	20-3636369	P03 (A) (I)	11,000.	0.			POLLOKI
MOISHE HOUSE							
441 SAXONY ROAD, BARN 2							
ENCINITAS, CA 92024	26-2599786	509 (A) (1)	65,870.	0.			GENERAL SUPPORT
	l .	1				·L	0-11-1-1/5000\

Part II Continuation of Grants and Other	Assistance to Dor		s and Domestic Go	vernments (Sch	edule I (Form 990), Pa		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTESSORI DEVELOPMENT							
PARTNERSHIPS - 975 EAST BLVD	24.4650420	500 (5) (4)	10.000	•			
CLEVELAND, OH 44108	34-1658439	509 (A) (1)	10,000.	0.			GENERAL SUPPORT
MORSELIFE FOUNDATION INC.							HOLOCAUST SURVIVORS
4847 DAVID S. MACK DRIVE							INITIATIVE, GENERAL
WEST PALM BEACH, FL 33417	59-2774476	509 (A) (1)	16,000.	0.			SUPPORT
MQ FOUNDATION INC.							
598 MADISON AVE., 3RD FLOOR							
NEW YORK, NY 10022	82-3922797	509 (A) (1)	100,000.	0.			ANNUAL CAMPAIGN
,			,				
MT. SINAI HEALTH CARE FOUNDATION							
10501 EUCLID AVE., 2ND FLOOR							
CLEVELAND, OH 44106	34-1777878	509 (A) (3)	13,654.	0.			GENERAL SUPPORT
MUSEUM OF CONTEMPORARY ART							
CLEVELAND - 11400 EUCLID AVE							ANNUAL FUND, GENERAL
CLEVELAND, OH 44106	34-1148828	509 (A) (2)	177,282.	0.			SUPPORT
,			, , , , , , , , , ,				
MUSICAL ARTS ASSOCIATION							
SEVERANCE HALL							ANNUAL FUND, GENERAL
CLEVELAND, OH 44106	34-0714468	509 (A) (1)	462,217.	0.			SUPPORT
MUSICAL UPCOMING STARS IN THE							
CLASSICS - 3939 LANDER ROAD -							
CHAGRIN FALLS, OH 44022	26-1830710	509 (A) (2)	11,046.	0.			GENERAL SUPPORT
,							
NAALEH CLEVELAND INC.							ANNUAL FUND,
5010 MAYFIELD ROAD, SUITE 306							ADMINISTRATIVE SUPPO
LYNDHURST, OH 44124	82-2610258	509 (A) (1)	106,614.	0.			GENERAL SUPPORT
NAAMATIICA CIEVELAND COINCII							
NAAMAT USA CLEVELAND COUNCIL 5001 MAYFIELD ROAD #317							
LYNDHURST, OH 44124	34-0737806	509 (A) (1)	11,117.	0.			GENERAL SUPPORT
	1 31 3,3,300	(11) (1)	1,,	٠.			Schodulo I (For

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	ırt II.)	1 age 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL COUNCIL OF JEWISH WOMEN INCORPORATED - CLEVELAND SECTION - WARRENSVILLE HEIGHTS, OH 44128	34-0714651	509 (A) (1)	81,066.	0.			MAGAZINE PUBLICATION, ANNUAL FUND, GENERAL SUPPORT
NATIONAL COUNCIL OF JEWISH WOMEN INCORPORATED - 2055 L. STREET, NW SUITE 650 - WASHINGTON, DC 20036	13-1641076	509 (A) (1)	21,850.	0.			LEADERSHIP DEVELOPMENT FUND, ANNUAL CAMPAIGN, GENERAL SUPPORT
NATIONAL COUNCIL OF YOUNG ISRAEL BUSINESS OFFICES BEACHWOOD, OH 44122	34-1634425	509 (A) (1)	54,469.	0.			GENERAL SUPPORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY - NATIONAL HEADQUARTERS - NEW YORK, NY 10017	13-5661935	509 (A) (1)	51,941.	0.			MEDICAL RESEARCH, GENERAL SUPPORT
NATIONAL SOCIETY FOR HEBREW DAY SCHOOLS - 620 FOSTER AVE BROOKLYN, NY 11230	13-5564128	509 (A) (1)	306,250.	0.			GENERAL SUPPORT
NATURE CONSERVANCY ADIRONDACK CHAPTER KEENE VALLEY, NY 12943	53-0242652	509 (A) (1)	181,900.	0.			GENERAL SUPPORT
NCH HEALTHCARE SYSTEMS, INC. 350 7TH STREET NORTH NAPLES, FL 34102	59-2314655	509 (A) (1)	15,000.	0.			GENERAL SUPPORT
NEGEV FOUNDATION 2121 SOUTH GREEN ROAD, SUITE 210 SOUTH EUCLID, OH 44121	34-1690546	509 (A) (1)	99,916.	0.			GENERAL SUPPORT
NETWORK OF JEWISH HUMAN SERVICES AGENCIES, INC 50 EISENHOWER DRIVE, SUITE 100 - PARAMUS, NJ 07652	13-2752418	509 (A) (2)	7,800.	0.			GENERAL SUPPORT

(a) Name and address of	/L.\ EINI	(a) IDO a a diam	(4) A	(- \	(C) NA sales sales 6	(a) Description of	(b) D
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ISRAEL FUND							
PO BOX 70358							PARENTS CIRCLE FUND,
PHILADELPHIA, PA 19176	94-2607722	509 (A) (1)	22,800.	0.			GENERAL SUPPORT
NEW ORCHESTRA OF WASHINGTON INC.							
15800 CRABBS BRANCH WAY, #300							
ROCKVILLE, MD 20855	46-0755411	509 (A) (1)	9,375.	0.			GENERAL SUPPORT
NEW VENTURE FUND							
1828 L. STREET NW, SUITE 300A							SCIENCE PHILANTHROPY
WASHINGTON, DC 20036	20-5806345	509 (A) (1)	75,000.	0.		1	ALLIANCE PROJECT
NEW YORK LEAGUE OF CONSERVATION		(11) (1)	,,,,,,,	-			
VOTERS EDUCATION FUND INC 30							
BROAD ST., 30TH FL NEW YORK, NY							
10004	13-3727122	509 (A) (1)	20,000.	0.			GENERAL SUPPORT
NEW YORK SHAKESPEARE FESTIVAL							
425 LAFAYETTE STREET	12 1044050	E00 (3) (1)	6 000				GTNTD11 GUDDOD#
NEW YORK, NY 10003	13-1844852	509 (A) (I)	6,000.	0.			GENERAL SUPPORT
NORTH COAST COMMUNITY HOMES							
14221 BROADWAY AVENUE							
CLEVELAND, OH 44125	34-1455487	509 (A) (1)	10,500.	0.			GENERAL SUPPORT
NORTHEAST OHIO SPCA, INC.							
9555 BROOKPARK ROAD							
PARMA, OH 44129	04-3767472	509 (A) (1)	40,750.	0.			GENERAL SUPPORT
			,				
OHEB ZEDEK - CEDAR SINAI SYNAGOGUE							
23749 CEDAR ROAD							
CLEVELAND, OH 44122	34-0859259	509 (A) (1)	14,940.	0.			GENERAL SUPPORT
OHIO STATE UNIVERSITY FOUNDATION							
PO BOX 710811							COLLEGE OF LAW, GENERAL
COLUMBUS, OH 43271	31-1145986	509 (A) (1)	6,250.	0.			SUPPORT

Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	r ago
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
31-4379585	509 (A) (1)	50,000.	0.			CAREER CONNECTION
		,				
31-1269170	509 (A) (1)	11,366.	0.			GENERAL SUPPORT
13-3275531	509 (A) (1)	15,000.	0.			ANNUAL FUND
20-4830666	509 (3) (1)	11 000	_			GENERAL SUPPORT
20-4030000	503 (A) (1)	11,000.	0.			GENERAL SUFFORT
23-7167089	509 (A) (1)	249,000.	0.			GENERAL SUPPORT
		, -				
						FOREST LAND PURCHASE IN
95-4112467	509 (A) (1)	245,000.	0.			BORNEO
						UKRAINE EMERGENCY RELIEF
						ANNUAL CAMPAIGN, GENERAL
13-5562424	509 (A) (2)	84,535.	0.			SUPPORT
21 1427001	E00 /3\ /1\	F 700	,			GENERAL SUPPORT
31-142/001	DU3 (A) (1)	5,790.	0.			GENERAL SUFFORI
26-2697228	509 (A) (1)	11,000.	0.			GENERAL SUPPORT
	(b) EIN 31-4379585 31-1269170 13-3275531 20-4830666 23-7167089 95-4112467 13-5562424 31-1427001	(b) EIN (c) IRC section	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (2) 23-7167089 509 (A) (1) 11,000. 23-7167089 509 (A) (1) 249,000. 23-5562424 509 (A) (1) 245,000. 31-1427001 509 (A) (1) 5,790.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (e)	(b) EIN (c) IRC section if applicable applicable if applicable applicable if applicable applicable applicable if applicable applicable applicable if applicable applicabl	If applicable Cash grant noncash assistance (book, FMV, appraisal, other)

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PALM BEACH ORTHODOX SYNAGOGUE INC. 120 NORTH COUNTY ROAD PALM BEACH, FL 33480	65-0478910	509 (A) (1)	13,000.	0.			DISCRETIONARY FUND, YOUNG JEWISH PROFESSIONALS, GENERAL SUPPORT
PARK AVENUE SYNAGOGUE 50 EAST 87TH STREET NEW YORK, NY 10128	13-1659707	509 (A) (1)	10,822.	0.			GENERAL SUPPORT
PARK SYNAGOGUE 27500 SHAKER BOULEVARD PEPPER PIKE, OH 44124	34-0714533	509 (A) (1)	592,204.	20,000.	FMV	ISRAEL BOND	CAPITAL CAMPAIGN, MILLER CHAPEL, SYNAGOGUE SUPPORT, ANNUAL FUND
PARTNERS IN TORAH OF CLEVELAND, INC 14455 EAST CARROLL BLVD UNIVERSITY HTS., OH 44118	47-1209575	509 (A) (1)	11,330.	0.			ANNUAL FUND, GENERAL SUPPORT
PATHWAYS TO HOUSING DC 828 EVARTS STREET NE WASHINGTON, DC 20018	37-1464353	509 (A) (1)	9,375.	0.			GENERAL SUPPORT
PAWSITIVITY SERVICE DOGS 197 GRIGGS STREET N ST. PAUL, MN 55104	47-1446634	509 (A) (1)	80,000.	0.			GENERAL SUPPORT
PENIMI INC. 1266 56TH STREET BROOKLYN, NY 11219	81-1789981	509 (A) (1)	25,000.	0.			GENERAL SUPPORT
PHILLIPS COLLECTION 1600 21ST STREET NW WASHINGTON, DC 20009	53-0204620	509 (A) (1)	9,375.	0.			GENERAL SUPPORT
PHYSICIANS FOR HUMAN RIGHTS, INC. 256 WEST 38TH STREET, 9TH FLOOR NEW YORK, NY 10018	22-2488437	509 (A) (1)	31,500.	0.			VIRTUAL GALA, LEADERSHIP COUNCIL, GENERAL SUPPORT

Part II Continuation of Grants and Other A	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIANO INTERNATIONAL ASSOCIATION OF							
NORTHERN OHIO - 20600 CHAGRIN							
BLVD., STE 1110 - SHAKER HEIGHTS,							
OH 44122	34-1774615	509 (A) (1)	63,350.	0.			GENERAL SUPPORT
PLANNED LIFETIME ASSISTANCE							
NETWORK OF NORTHEAST OHIO, INC							HOLISTIC RECOVERY
29125 CHAGRIN BLVD PEPPER PIKE,							PROGRAM, SCHOLARSHIPS,
OH 44122	34-1621291	509 (A) (2)	41,200.	0.			GENERAL SUPPORT
PLANNED PARENTHOOD FEDERATION OF							
AMERICA, INC 123 WILLIAM							
STREET, 10TH FLOOR - NEW YORK, NY							
10038	13-1644147	509 (A) (1)	5,850.	0.			GENERAL SUPPORT
PLANNED PARENTHOOD OF GREATER OHIO 206 EAST STATE STREET							
COLUMBUS, OH 43215	34-1015976	509 (A) (1)	84,885.	0.			GENERAL SUPPORT
PLAYHOUSE SQUARE FOUNDATION 1501 EUCLID AVENUE, SUITE 200 CLEVELAND, OH 44115	23-7304942	509 (A) (1)	115,550.	0.			CAPITAL CAMPAIGN, ANNUAL CAMPAIGN, GENERAL SUPPOR
PM FOUNDATION, INC. 4909 LORAIN AVENUE CLEVELAND, OH 44102	34-6608706	509 (A) (1)	13,250.	0.			GENERAL SUPPORT
POPULATION ACTION INTERNATIONAL 1300 19TH STREET NW, SUITE 200 WASHINGTON, DC 20036	52-0812075	509 (A) (1)	130,000.	0.			INDONESIA & AFRICA PROGRAM SUPPORT
PRESIDENT AND FELLOWS OF HARVARD COLLEGE - PO BOX 419209 - CAMBRIDGE, MA 02241	04-2103580	509 (A) (1)	5,400.	0.			DENTAL & MEDICAL SCHOOL SUPPORT, GENERAL SUPPORT
PRETERM CLEVELAND, INC. 12000 SHAKER BOULEVARD CLEVELAND, OH 44120	23-7314836	509 (A) (2)	5,400.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROJECT WITNESS							
201 FOSTER AVE.							
BROOKLYN, NY 11230	11-3456787	509 (A) (1)	25,000.	0.			GENERAL SUPPORT
PROVIDENCE HOUSE, INC.							
2050 W. 32ND ST.							
CLEVELAND, OH 44113	34-1336325	509 (A) (1)	9,400.	0.			GENERAL SUPPORT
RABBINICAL COLLEGE OF TELSHE, INC.							
28400 EUCLID AVENUE							ANNUAL CAMPAIGN, GENERAL
WICKLIFFE, OH 44092	34-0801310	509 (A) (1)	294,006.	0.			SUPPORT
mickeliti, on 44052	34 0001310	303 (11) (1)	234,000.	<u> </u>			DOTT ON T
RATNER SCHOOLS							
27575 SHAKER BOULEVARD							
PEPPER PIKE, OH 44124	34-1367106	509 (A) (1)	37,750.	0.			GENERAL SUPPORT
,			, ,	-			
REGENTS OF THE UNIVERSITY OF							
MICHIGAN - OFFICE OF DEVELOPMENT -							
ANN ARBOR, MI 48109	38-6006309	509 (A) (1)	13,000.	0.			GENERAL SUPPORT
REPAIR THE WORLD							SERVE THE MOMENT SERVICE
DEVELOPMENT DEPT, PO BOX 2015							CORPS & EPISODIC SERVICE
NEW YORK, NY 10101	36-4524686	509 (A) (1)	105,360.	0.			GENERAL SUPPORT
12W 10W, N1 10101	30 1321000	303 (11) (1)	100,000.	••			DELICITION DOLLOWS
ROCK AND ROLL HALL OF FAME AND							BOARD RETREAT, CAPITAL
MUSEUM, INC DEVELOPMENT							CAMPAIGN, ANNUAL FUND,
DEPARTMENT - CLEVELAND, OH 44114	34-1520995	509 (A) (1)	68,300.	0.			GENERAL SUPPORT
RONALD MCDONALD HOUSE CHARITIES OF			, ,				
NORTHEAST OHIO, INC 10415							
EUCLID AVENUE - CLEVELAND, OH							
44106	34-1269123	509 (A) (1)	253,450.	0.			GENERAL SUPPORT
SALVATION ARMY							
CLEVELAND CHAPTER							ANNUAL CAMPAIGN, GENERAL
CLEVELAND, OH 44115	13-5562351	509 (A) (1)	17,750.	0.			SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	ı ago
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE COMMUNITY FOUNDATION							
P.O. BOX 1827							
SANTA FE, NM 87504	85-0303044	509 (A) (1)	6,000.	0.			GENERAL SUPPORT
SARASOTA MANATEE JEWISH HOUSING COUNCIL INC 1951 N. HONORE AVE.							
- SARASOTA, FL 34235	65-0091025	509 (A) (1)	5,500.	0.			GENERAL SUPPORT
SEGULA							
2030 SOUTH TAYLOR ROAD							
CLEVELAND, OH 44118	34-1832419	509 (A) (1)	25,170.	0.			GENERAL SUPPORT
SEMACH SEDEK RIAS							
2004 SOUTH GREEN ROAD							
SOUTH EUCLID, OH 44121	34-1754767	509 (A) (1)	26,816.	0.			GENERAL SUPPORT
,		, , , , , , , , , , , , , , , , , , ,					
SHAKER SCHOOLS FOUNDATION							
15600 PARKLAND DRIVE							
SHAKER HEIGHTS, OH 44120	34-1351470	509 (A) (1)	11,375.	0.			GENERAL SUPPORT
SHEFA SCHOOL INC.							
40 EAST 29TH STREET							
NEW YORK, NY 10016	47-2048496	509 (A) (1)	18,000.	0.			GENERAL SUPPORT
SHOES AND CLOTHES FOR KIDS, INC.							
PO BOX 93785							ANNUAL FUND, GENERAL
CLEVELAND, OH 44101	34-1554285	509 (A) (1)	35,150.	0.			SUPPORT
GIMGUAG VOGDA ING. II							
SIMCHAS YOSPA INC. II 3618 SHANNON ROAD							
CLEVELAND HTS., OH 44118	82-4070183	509 (A) (1)	7,280.	0.			GENERAL SUPPORT
	22 20,0203	(, (-)	,,250.	· ·			
SKOWHEGAN SCHOOL OF PAINTING AND							
SCULPTURE, INC 136 WEST 22ND	01 000000	F00 (3) (4)		_			SCHOLARSHIP FUND, GENERA
ST NEW YORK, NY 10011	01-0263908	DU9 (A) (1)	6,500.	0.			SUPPORT Color to L. (5 anno 200

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	Т
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SKYSTONE FOUNDATION INC.							
28 S. BEAVER STREET							
LAGSTAFF, AZ 86001	94-2842873	PRIVATE OPERATIN	100,000.	0.			GENERAL SUPPORT
SOUTHAMPTON HOSPITAL FOUNDATION,							
INC 240 MEETING HOUSE LANE -	11 2466516	F00 (3) (1)					
SOUTHAMPTON, NY 11968	11-3466516	509 (A) (1)	6,000.	0.			GENERAL SUPPORT
SOUTHERN CALIFORNIA INSTITUTE OF ARCHITECTURE - 960 EAST 3RD STREET							
- LOS ANGELES, CA 90013	95-2789388	509 (A) (1)	25,000.	0.			GENERAL SUPPORT
SOUTHERN POVERTY LAW CENTER, INC.	62.0500542	500 (3) (1)	6 185				
MONTGOMERY, AL 36104	63-0598/43	509 (A) (1)	6,175.	0.			GENERAL SUPPORT
ST. BALDRICKS FOUNDATION 1333 SOUTH MAYFLOWER AVENUE, SUITE							
MONROVIA, CA 91016	20-1173824	509 (A) (1)	30,125.	0.			GENERAL SUPPORT
ST. JUDE CHILDRENS RESEARCH HOSPITAL - 501 ST. JUDE PLACE -							
MEMPHIS, TN 38105	62-0646012	509 (A) (1)	29,130.	0.			GENERAL SUPPORT
ST. PAUL'S SCHOOL PO BOX 8100							
BROOKLANDVILLE, MD 21022	52-0591463	509 (A) (1)	8,750.	0.			GENERAL SUPPORT
STELLA MARIS INC.							
CLEVELAND, OH 44113	34-0896181	509 (A) (1)	7,200.	0.			GENERAL SUPPORT
STEPHEN SILLER TUNNEL TO TOWERS COUNDATION - 2361 HYLAN BLVD							
TATEN ISLAND, NY 10306	02-0554654	509 (A) (1)	5,350.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other A	ssistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	ı ayı
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUBURBAN TEMPLE - KOL AMI							SYNAGOGUE SUPPORT,
22401 CHAGRIN BOULEVARD							DISCRETIONARY FUND,
BEACHWOOD, OH 44122	34-0760596	509 (A) (1)	47,809.	0.			GENERAL SUPPORT
		, , , , , , , , , , , , , , , , , , ,					
SYRACUSE UNIVERSITY							
ADVANCEMENT SERVICES							
SYRACUSE, NY 13244	15-0532081	509 (A) (1)	5,500.	0.			GENERAL SUPPORT
TALMUDIC RESEARCH CENTER OF							
NORTHERN NEW JERSEY - 35 ASCENSION							
STREET - PASSAIC, NJ 07055	22-2041389	509 (A) (1)	25,000.	0.			GENERAL SUPPORT
TALMUDICAL YESHIVA OF PHILADELPHIA							
6063 DREXEL ROAD							
PHILADELPHIA, PA 19131	23-1476335	500 / 3) /1)	25,200.	0.			GENERAL SUPPORT
THIBADEBINIA, TA 19131	23 1470333	303 (A) (I)	25,200.	· ·			BENEKAL BUTTOKT
TAYLOR TALKS, INC.							
610 NW 103RD AVE.							
PLANTATION, FL 33324	83-1589806	509 (A) (2)	5,840.	0.			 GENERAL SUPPORT
,			,				
TEACHERS COLLEGE, COLUMBIA							TEACHERS COLLEGE
UNIVERSITY - 525 W. 120TH ST., BOX							COMMUNITY SCHOOL, STEM
306 - NEW YORK, NY 10027	13-1624202	509 (A) (1)	8,000.	0.			PROGRAM
TEMPLE BETH EL							
2702 ARBOR DRIVE							SYNAGOGUE SUPPORT,
MADISON, WI 53711	39-6007966	509 (A) (1)	5,500.	0.			GENERAL SUPPORT
MEMDIE EMANUEL							
TEMPLE EMANU EL 4545 BRAINARD ROAD							
	34-0806503	500 /3\ /1\	26 926	0.			GENERAL SUPPORT
ORANGE VILLAGE, OH 44022	24-0000000	507 (A) (I)	26,926.	0.			PENERAL SOLLOKI
TEMPLE ISRAEL OF GREATER CLEVELAND							
1732 LANDER ROAD							
MAYFIELD HEIGHTS, OH 44124	34-1472695	509 (A) (1)	10,100.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	1 ago 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE SPECIAL FUNDS RESTRICTED							
26000 SHAKER BOULEVARD							SYNAGOGUE SUPPORT, ANNUAL
BEACHWOOD, OH 44122	34-0714713	509 (A) (1)	150,536.	0.			CAMPAIGN, GENERAL SUPPORT
THE HARRY RATNER HUMAN SERVICES FD							
25701 SCIENCE PARK DRIVE							
CLEVELAND, OH 44122	34-1360076	509 (A) (1)	24,000.	0.			GENERAL SUPPORT
MUD MUDY							
THE TURN ONE GOLFVIEW LANE							ANNUAL CAMPAIGN, BUILDING
NORTH OLMSTED, OH 44070	34-6519665	509 (A) (2)	5,600.	0.			FUND, GENERAL SUPPORT
NORTH CHMCTHD, ON 44070	34 0313003	303 (11) (2)	3,000.	· ·			I OND, CEMERCE BOTTORT
TORAH HIGH OF CLEVELAND							
25400 FAIRMOUNT BLVD.							
BEACHWOOD, OH 44122	47-1477057	509 (A) (1)	97,496.	0.			GENERAL SUPPORT
TORAH INSTITUTE BEYOND CAMPUS							
14500 E. CARROLL BLVD.							
CLEVELAND, OH 44118	84-3372698	509 (A) (1)	28,000.	0.			GENERAL SUPPORT
TORAH LIFE INSTITUTE OF CLEVELAND 1861 SOUTH TAYLOR ROAD							
CLEVELAND HEIGHTS, OH 44118	31-1837292	509 (A) (1)	134,200.	0.			GENERAL SUPPORT
CHEVERAND HEIGHID, OH 44110	34 1037232	505 (A) (1)	154,200.	<u> </u>			BENERAL BUTTORT
TORAS CHESED, INC.							
421 6TH STREET							
LAKEWOOD, NJ 08701	22-3297123	509 (A) (1)	7,200.	0.			GENERAL SUPPORT
TOV VCHESED FOUNDATION INC.							
PO BOX 855							
MONSEY, NY 10952	27-3994158	509 (A) (1)	148,000.	0.			GENERAL SUPPORT
MDITE FACE OUMDEAGU MINICEPIES							
TRUE FAST OUTREACH MINISTRIES 638 SIXTH ST.							
WEST PALM BEACH, FL 33401	30-0194610	509 (A) (1)	14,380.	0.			GENERAL SUPPORT
	20 0131010	(**/ (*/	1 11,500.	· ·			Och chala I /F acces 000)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUST FOR PUBLIC LAND, OHIO 1250 OLD RIVER ROAD, SUITE 202	22 722222	509 (A) (1)	85,500.	0.			GENEDAL GUDDODE
CLEVELAND, OH 44113	23-1222333	509 (A) (I)	85,500.	0.			GENERAL SUPPORT
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - OFFICE OF THE TREASURER - PHILADELPHIA, PA 19176	23-1352685	509 (A) (1)	57,150.	0.			CANCER CENTER, SCHOOL OF DESIGN, GENERAL SUPPORT
TWINSBURG CHABAD 2275 GARY DRIVE TWINSBURG, OH 44087	82-2751235	509 (A) (1)	14,908.	0.			BUILDING CAMPAIGN, GENERAL SUPPORT
U.S. COMMITTEE FOR REFUGEES AND IMMIGRANTS, INC 2231 CRYSTAL DRIVE, SUITE 350 - ARLINGTON, VA 22202	13-1878704		8,200.	0.			GENERAL SUPPORT
UC SAN DIEGO FOUNDATION 9500 GILMAN DRIVE, MAIL CODE 0940	05 0050101						
LA JOLLA, CA 92093	95-28/2494	509 (A) (1)	7,000.	0.			GENERAL SUPPORT
UNION FOR REFORM JUDAISM NATIONAL HEADQUARTERS NEW YORK, NY 10017	13-1663143	509 (A) (1)	5,520.	0.			CAMP SUPPORT, GENERAL SUPPORT
UNION OF ORTHODOX JEWISH CONGREGATIONS OF AMERICA - 40 RECTOR ST., 4TH FLOOR - NEW YORK, NY 10006	13-5623717	509 (2) (1)	68,458.	0.			GENERAL SUPPORT
UNITED JEWISH APPEAL FEDERATION OF JEWISH PHILANTHROPIES NY - 130 EAST 59TH STREET - NEW YORK, NY	13 3023717	505 (11) (1)	00,430.				SHARITE BOLLOKI
10022	51-0172429	509 (A) (1)	6,200.	0.			GENERAL SUPPORT
UNITED JEWISH CEMETERIES 2749 MAYFIELD ROAD	24 0714710	500 (A) (A)	F 720				
CLEVELAND HEIGHTS, OH 44106	34-0714718	DU9 (A) (3)	5,730.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T uge T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES HOLOCAUST MEMORIAL							
COUNCIL - 100 RAOUL WALLENBERG							ANNUAL FUND, GENERAL
PLACE S.W WASHINGTON, DC 20024	52-1309391	509 (A) (1)	108,250.	0.			SUPPORT
UNITED WAY OF GREATER CLEVELAND 1331 EUCLID AVENUE							ANNUAL FUND, ANTI POVERTY INNOVATION FUND, GENERAL
CLEVELAND, OH 44115	34-6516654	509 (A) (1)	168,672.	0.			SUPPORT
UNIVERSITY CIRCLE INCORPORATED 10831 MAGNOLIA DRIVE							
CLEVELAND, OH 44106	34-0823464	509 (A) (2)	29,400.	0.			GENERAL SUPPORT
UNIVERSITY HOSPITALS HEALTH SYSTEMS INC INSTITUTIONAL RELATIONS & DEVELOPMENT -							PARENT BEREAVEMENT ENDOWMENT, GENERAL
CLEVELAND, OH 44106	34-0714775	509 (A) (1)	1,612,733.	0.			SUPPORT
UNIVERSITY OF CALIFORNIA SAN FRANCISCO FOUNDATION - PO BOX 45339 - SAN FRANCISCO, CA 94145	94-2829914	509 (A) (1)	7,500.	0.			GENERAL SUPPORT
Bin Hamerbee, on 31115	31 2023311	303 (11, (1,	,,500.	••			SERVICE SOFTORT
UNIVERSITY OF COLORADO FOUNDATION 1800 GRANT ST., SUITE 725 DENVER, CO 80203	04 6040011	509 (A) (1)	24,000.	0.			GENERAL SUPPORT
DENVER, CO 80203	84-8049811	509 (A) (1)	24,000.	0.			GENERAL SUPPORT
UNIVERSITY SETTLEMENT, INC. 4800 BROADWAY AVENUE							
CLEVELAND, OH 44127	34-0714776	509 (A) (1)	5,250.	0.			GENERAL SUPPORT
VALUES IN ACTION FOUNDATION 6700 BETA DRIVE, SUITE 120							
MAYFIELD, OH 44143	34-1795459	509 (A) (1)	21,050.	0.			GENERAL SUPPORT
WALKING MOUNTAINS SCIENCE CENTER PO BOX 9469							
AVON, CO 81620	84-1436731	509 (A) (1)	8,250.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON INSTITUTE FOR NEAR EAST							
POLICY - 1111 19TH ST. NW, SUITE							ANNUAL FUND, GENERAL
500 - WASHINGTON, DC 20036	52-1376034	509 (A) (1)	80,000.	0.			SUPPORT
WESTERN RESERVE HISTORICAL SOCIETY 10825 EAST BOULEVARD							JEWISH ARCHIVES, ANNUAL
CLEVELAND, OH 44106	34-0714724	509 (A) (1)	30,204.	0.			FUND, GENERAL SUPPORT
WILLOWS COMMUNITY SCHOOL 8509 HIGUERA STREET CULVER CITY, CA 90232	95-4466863	509 (A) (1)	6,000.	0.			ANNUAL FUND
CONVERCENT, CA 30232	22 4400003	505 (R) (1)	0,000.	••			ANNOAL FOND
WOMENSV							
PO BOX 3982							
LOS ALTOS, CA 94024	81-5015102	509 (A) (1)	10,000.	0.			ANNUAL FUND
WOUNDED WARRIOR PROJECT INC. 4899 BELFORT RD., STE. 300							
JACKSONVILLE, FL 32256	20-2370934	509 (A) (1)	5,750.	0.			GENERAL SUPPORT
YALE UNIVERSITY CONTRIBUTION PROCESSING OFFICE NEW HAVEN, CT 06521	06-0646973	509 (A) (1)	25,200.	0.			ART GALLERY
YESHIVA AHAVAS HATORAH 14480 SUMMERFIELD RD. UNIVERSITY HEIGHTS, OH 44118	38-3837139	509 (A) (1)	68,089.	0.			BUILDING CAMPAIGN, GENERAL SUPPORT
ONIVERSITI INCIDENTS, ON 44110	30 3037133	303 (11) (1)	00,005.	••			DENERGIE BOTTOKI
YESHIVA DERECH HATORAH							ANNUAL ALLOCATION,
1508 WARRENSVILLE CENTER ROAD							TUITION ASSISTANCE,
CLEVELAND HTS., OH 44121	47-4574851	509 (A) (1)	961,092.	0.			GENERAL SUPPORT
YESHIVA GEDOLAH IMREI YOSEF DSPINKA INC 1466 56TH ST							
BROOKLYN, NY 11219	11-2960037	509 (A) (1)	85,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other A (a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(D) CIIN	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
YESHIVA KTANA OF PASSAIC							
1 MAIN AVE.							
PASSAIC, NJ 07055	22-2823304	509 (A) (1)	35,000.	0.			GENERAL SUPPORT
YESHIVA OF CLEVELAND							
1516 WARRENSVILLE CENTER ROAD							
CLEVELAND, OH 44121	82-0667400	509 (A) (1)	75,640.	0.			GENERAL SUPPORT
YESHIVA OF NORTH JERSEY							
666 KINDERKAMACK ROAD							SCHOLARSHIP CAMPAIGN,
RIVER EDGE, NJ 07661	22-1526652	509 (A) (1)	7,960.	0.			GENERAL SUPPORT
			·				
YESHIVA UNIVERSITY							
500 W. 185TH ST.							
NEW YORK, NY 10033	13-1624225	509 (A) (1)	10,680.	0.			GENERAL SUPPORT
YOUNG WOMENS CHRISTIAN ASSOCIATION							
OF CLEVELAND, OHIO - 4019 PROSPECT							
AVENUE - CLEVELAND, OH 44103	34-0714800	509 (A) (2)	7,284.	0.			GENERAL SUPPORT
2212222, 011 11200		(11) (1)	7,201.	-			
YOUTH OPPORTUNITIES UNLIMITED							
THE HALLE BUILDING							
CLEVELAND, OH 44115	34-1381135	509 (A) (1)	7,850.	0.			GENERAL SUPPORT
ADGUED NUDONOM ING							
ZECHER AVROHOM INC. 1715 51ST STREET							ETHIOPIAN ISRAELI
BROOKLYN, NY 11204	26-3744888	509 (A) (1)	6,000.	0.			ETHIOPIAN ISRAELI STUDENTS
DAGONDIN, NI 11204	20-3/44000	505 (A) (I)	0,000.	0.			DIODEMIS
			I .			1	<u> </u>

Schedule I (Form 990) 2021 JEWISH FEDERATION OF	CLEVELAND				34-0714445	Page
Part III Grants and Other Assistance to Domestic Individu Part III can be duplicated if additional space is neede		e organization answe	ered "Yes" on Form 9	90, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash	n assistance
Part IV Supplemental Information. Provide the information	required in Part I, lir	ne 2; Part III, column	ı (b); and any other ac	lditional information.		
PART I, LINE 2:						
ALL GRANTEES ARE SUBJECT TO PRE-GRANT REVIEWS TH	ROUGH GUIDESTA	R TO CONFIRM				
THEIR INCLUSION IN THE IRS' EXEMPT ORGANIZATION	MASTER FILE (5	01(C)(3)				
STATUS AND PUBLIC CHARITY CLASSIFICATION), AND A	REVIEW TO CON	FIRM THAT THE				
GRANTEE IS NOT ON THE OFAC LIST ("US TREASURY OF	FICE OF FOREIG	N ASSETS				
CONTROL LIST OF SPECIALLY DESIGNATED NATIONALS A	ND BLOCKED PER	sons").				
STATEMENTS AND DOCUMENTATION ARE OBTAINED FROM E						
A COPY OF ITS IRS DETERMINATION LETTER; MISSION		•				
GRANTEE'S BOARD MEMBERS AND CHIEF PROFESSIONAL:	•					
CIVILITIE O DOMED MEMBERS AND CHIEF FROTESSIONAL:	ים המתבחר ש היייי	T 4 7 T T.T.T.T.T.N T				

Part IV Supplemental Information
CONFIRMING THE GRANTEE'S SECTION 501(C)(3) STATUS AND PUBLIC CHARITY
CLASSIFICATION AND CERTIFYING THAT GRANTS MADE TO THE GRANTEE WILL BE USED
ONLY FOR CHARITABLE PURPOSES, WILL NOT RESULT IN GOODS OR SERVICES BEING
PROVIDED IN RETURN TO ANY PERSON, AND THAT THE ORGANIZATION IS IN
COMPLIANCE WITH U.S. LAW REGARDING NO USE OF FUNDS FOR TERRORIST
ACTIVITIES. ALLOCATIONS FROM THE ANNUAL CAMPAIGN FOR JEWISH NEEDS AND
ENDOWMENT FUND GRANTS ARE FURTHER EVALUATED BEFORE THE GRANTS ARE MADE,
INCLUDING, WHERE APPROPRIATE, REVIEW OF BUDGET INFORMATION, AND ARE
MONITORED AFTERWARDS BY THE STAFF OF THE FEDERATION'S PLANNING, ALLOCATION
AND ENDOWMENT DEPARTMENTS THROUGH WRITTEN REPORTS, AND WHERE APPROPRIATE,
SITE VISITS. FURTHER, GRANTEES WHO RECEIVE SUCH ENDOWMENT FUND GRANTS ARE
REQUIRED TO SIGN A GRANT AWARD LETTER THAT STIPULATES THE TERMS AND
CONDITIONS OF THE GRANT INCLUDING HOW THE GRANT FUNDS ARE TO BE SPENT, OVER
WHAT PERIOD OF TIME, AND REPORTING REQUIREMENTS. CERTAIN GRANTEES ARE
REQUIRED TO COMPLETE A GRANT USE REPORT.
THE FEDERATION REPORTS GRANTS ON SCHEDULE I TO VARIOUS 501(C)(3) DOMESTIC
U.S. CHARITIES WHICH, AS PART OF THEIR ACTIVITIES, FUND OVERSEAS PROJECTS.
SOME OF THE GRANTS INCLUDE RECOMMENDATIONS THAT SUCH GRANTS BE USED TO
SUPPORT CERTAIN FOREIGN CHARITABLE ORGANIZATIONS OR THEIR PROJECTS. SUCH
RECOMMENDATIONS ARE ADVISORY ONLY AND SUCH U.S. ORGANIZATIONS MAKE THE
FUNDING DECISIONS. THESE U.S. TAX-EXEMPT ORGANIZATIONS ARE EXPECTED TO FILE
SEPARATE FORM 990'S WITH A SCHEDULE F FOR THEIR GRANTS TO FOREIGN GRANTEES.
GRANTS TO DOMESTIC 501(C)(3) ORGANIZATIONS THAT SUPPORT A SINGLE FOREIGN
ENTITY HAVE BEEN INCLUDED ON SCHEDULE F.

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.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

JEWISH FEDERATION OF CLEVELAND

Employer identification number 34-0714445

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account 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		х
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	х	
	, , , , , , , , , , , , , , , , , , , ,			
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.			
	X Compensation committee			
	☐ Independent compensation consultant ▼ Compensation survey or study			
	X Form 990 of other organizations X 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		х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
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		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)?	a		

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

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 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) ERIKA B RUDIN-LURIA	(i)	441,655.	0.	11,347.	17,125.	36,068.	506,195.	0.	
PRESIDENT * SEE SCH O	(ii)	0.	0.	0.	126,700.	0.	126,700.	0.	
(2) BARRY REIS	(i)	348,663.	0.	14,717.	15,125.	35,694.	414,199.	0.	
ASST TREASURER, SR. VP & CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) OREN BARATZ	(i)	202,425.	0.	4,122.	10,121.	645.	217,313.	0.	
SENIOR VP-EXTERNAL AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) DANIEL STROM	(i)	201,725.	0.	395.	9,836.	645.	212,601.	0.	
VP, CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) RACHEL LAPPEN	(i)	205,725.	0.	182.	10,286.	645.	216,838.	0.	
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) ABBIE LEVIN	(i)	170,674.	0.	542.	8,598.	11,115.	190,929.	0.	
ASST SECRETARY, SR. VP OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) ROBERT BERICK	(i)	160,450.	0.	565.	8,145.	13,452.	182,612.	0.	
ASST VP, CHIEF MARKETING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) CAROL WOLF	(i)	154,488.	0.	3,382.	8,221.	33,528.	199,619.	0.	
ASST. VP, PLANNED GIVING & ENDOWMENTS		0.	0.	0.	0.	0.	0.	0.	
(9) TAMI CAPLAN	(i)	134,029.	0.	1,602.	7,359.	44,220.	187,210.	0.	
SECRETARY, SR. VP & CHRO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) ALLEN ROTH	(i)	132,404.	0.	2,066.	7,312.	44,919.	186,701.	0.	
SR. DIRECTOR, BUSINESS APPLICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) KARI BLUMENTHAL	(i)	135,616.	0.	369.	7,004.	16,069.	159,058.	0.	
MANAGING DIRECTOR OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(12) STEPHEN HOFFMAN * SEE SCH O	(i)	0.	0.	20,329.	0.	0.	20,329.	0.	
TRUSTEE/PRESIDENT EMERITUS	(ii)	0.	0.	0.	137,494.	0.	137,494.	0.	
(13) J. DAVID HELLER * SEE SCH O	(i)	0.	0.	0.	0.	0.	0.	0.	
TTEE/BD CHAIR THRU 6/9/22	(ii)	0.	0.	0.	153,685.	0.	153,685.	0.	
	(i)								
_	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Page 2

Tart in 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.
PART I, LINE 1A:
ONE EMPLOYEE IS PERMITTED TO TRAVEL BUSINESS OR FIRST CLASS FOR FLIGHTS
OVER 4 HOURS, AS SPECIFIED IN THE EMPLOYEE'S ENGAGEMENT LETTER.
THE SPOUSE OF ONE EMPLOYEE IS PERMITTED TO ACCOMPANY THAT EMPLOYEE TO 1-2
CONFERENCES PER YEAR, PER THAT EMPLOYEE'S ENGAGEMENT LETTER. THE COST OF
SUCH TRAVEL IS INCLUDED ON THE EMPLOYEE'S W-2.
PART I, LINE 1B:
WITH REGARDS TO SPOUSE TRAVEL, AS NOTED IT IS AUTHORIZED AS PART OF THAT
EMPLOYEE'S ENGAGEMENT LETTER.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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 FEDERATION OF CLEVELAND Employer identification number 34-0714445

Pai	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of det noncash contribut			_
		applicable		Form 990, Part VIII, line 1g	noncash contribut	lon am	ounts	5
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	X	561	23,150,999.	AVG HIGH/LOW GIFT	DATE	:	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous	Х	22	105,450.	COST			
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 by the organiza	=	•					
	for which the organization completed Form 828	3, Part V, D	onee Acknowledg	ement 29		—т		
	B						Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date		•	•		00-		v
	exempt purposes for the entire holding period?					30a		X
	If "Yes," describe the arrangement in Part II.	alia, that ra	autica tha ravious	of any nanatandard contribut	iono?	04	v	
31	Does the organization have a gift acceptance po				} & I OI I OI	31	Х	
32a	Does the organization hire or use third parties o		•			222	х	
h	contributions? If "Yes," describe in Part II.					32a		
	•	dumn (a) fa:	a type of property	for which column (a) is about	skod			
33	If the organization didn't report an amount in co describe in Part II.	numm (C) f01	a type of property	nor which column (a) is ched	incu,			
	UESCHUE III FAIL II.							

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

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 M, LINE 32B:
THE FEDERATION USES THIRD PARTY BROKERS TO DISPOSE OF DONATED
MARKETABLE SECURITIES. IN ADDITION, THE FEDERATION WILL OCCASIONALLY
HIRE A REAL ESTATE BROKER TO MARKET DONATED PROPERTIES, AND UTILIZE AN
AUTO BROKER FOR GIFTS OF USED CARS. THE FEDERATION DOES NOT HIRE OR
USE ANY RELATED ORGANIZATIONS TO SOLICIT, PROCESS OR SELL NON-CASH
CONTRIBUTIONS.
SCHEDULE M, LINE 33:
SCHEDULE M, PART I COLUMN B - REPRESENTS NUMBER OF INDIVIDUAL
CONTRIBUTIONS DURING THE YEAR.

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.

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

2021 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

•

Inspection
Employer identification number

34-0714445 JEWISH FEDERATION OF CLEVELAND PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: LIFE IN CLEVELAND AND THROUGHOUT THE WORLD. IT FUNDS AND SUPPORTS A WIDE ARRAY OF CHARITABLE, EDUCATIONAL, RELIGIOUS, HUMANITARIAN, HEALTH CULTURAL AND SOCIAL SERVICE ACTIVITIES THAT STRENGTHEN THE JEWISH AND GENERAL COMMUNITIES. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: APPLICATION TO IMPROVE PEOPLE'S LIVES; ENCOURAGE OUR MEMBERS TO FULFILL THE RESPONSIBILITY OF TIKKUN OLAM, TO MAKE THE WORLD A BETTER PLACE; SUPPORT ISRAEL AS A JEWISH AND DEMOCRATIC STATE; AND PROMOTE COLLECTIVE ACTION BY INDIVIDUALS AND ORGANIZATIONS TO ADVANCE THESE PURPOSES. FORM 990. PART III. LINE 4B. PROGRAM SERVICE ACCOMPLISHMENTS: CARING FOR THE SICK, HELPING THE NEEDY, BEAUTIFYING COMMUNITY CEMETERIES AND NEIGHBORHOODS. AND MANY OTHERS. VOLUNTEER EXPERIENCES THROUGH JVN ARE OFFERED DAILY, WEEKLY, BI-MONTHLY, OR CAN BE TAILORED TO INDIVIDUAL SCHEDULES. HUNDREDS OF VOLUNTEERS PARTICIPATED IN VIRTUAL VOLUNTEER OPPORTUNITIES TO HELP COMMUNITY MEMBERS COPING WITH THE COVID-19 PANDEMIC. FEDERATION'S COMMUNITY OPTIONS AND JEWISH COMMUNITY HOUSING PROGRAMS HELP 900 SENIORS IN THE COMMUNITY LIVE LONGER INDEPENDENTLY THROUGH PROVISION OF ACTIVITIES, ON-SITE HEALTH AND WELLNESS PROGRAMS, VOLUNTEER OPPORTUNITIES, AND SERVICE REFERRALS, THE OVERSEAS CONNECTIONS COMMITTEE OVERSEES AND RECOMMENDS FUNDING TO JEWISH FEDERATIONS OF NORTH AMERICA AND OTHER NATIONAL AND INTERNATIONAL ORGANIZATIONS FOR A MYRIAD OF SPECIALIZED PROGRAMS THAT

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

Name of the organization **Employer identification number** JEWISH FEDERATION OF CLEVELAND 34-0714445 HELP DISADVANTAGED CHILDREN, YOUNG ADULTS, AND FAMILIES IN ISRAEL, HUNGARY, UKRAINE, AND RUSSIA, AND TO FOSTER THE REVIVAL OF JEWISH LIFE. CLEVELANDERS ACTIVELY PARTICIPATE IN THESE INITIATIVES. THE FEDERATION'S PJ LIBRARY PROGRAM FOR JEWISH FAMILIES WITH YOUNG CHILDREN (BIRTH TO 12 YEARS), HAS DISTRIBUTED OVER 133,000 BOOKS TO OVER 4,300 CHILDREN (SINCE JANUARY 2009) AND ORGANIZED A LARGE RANGE OF EVENTS TO BUILD COMMUNITY AROUND THE PROGRAM. ACCESS JEWISH CLEVELAND, FORMERLY KNOWN AS THE INFORMATION & REFERRAL SERVICE. IS A COMPREHENSIVE RESOURCE THAT COMMUNITY MEMBERS CAN ACCESS EITHER THROUGH PERSONALIZED, CONFIDENTIAL PHONE ASSISTANCE OR A WEBSITE. THE PROGRAM IS A SINGLE POINT OF CONTACT AND COLLABORATION BETWEEN THE FEDERATION, ITS BENEFICIARY AGENCIES, SYNAGOGUES, AND ORGANIZATIONS IN THE CLEVELAND JEWISH COMMUNITY AND PROVIDED ACCESS TO A HOST OF INFORMATION ABOUT PROGRAMS, SERVICES, AND SPECIAL EVENTS. FEDERATION'S ROUNDTABLE ON FINANCIAL DISTRESS CONVENES ALL COMMUNITY ORGANIZATIONS THAT WORK WITH CLIENTS FACING FINANCIAL HARDSHIP SO THEY CAN NETWORK AND COLLABORATE ON IMPORTANT ISSUES FACING THEIR CLIENTS. AS A RESULT OF THIS ROUNDTABLE. THE FRONT LINE STAFF FROM EVERY ORGANIZATION HAVE UNPRECEDENTED LEVELS OF COLLABORATION TO SERVE THE CLIENTS. THIS COLLABORATION LEVERAGES THE SPECIALTIES AND EXPERTISE OF EACH ORGANIZATION AND MAXIMIZES THE EFFECTIVENESS OF SERVICES DELIVERED TO CLIENTS BY EACH AND EVERY ORGANIZATION. THIS WOULD NOT BE POSSIBLE WITHOUT THE COORDINATING EFFORTS OF ACCESS JEWISH CLEVELAND.

 $[\]ensuremath{\text{6.}}$ The Cleveland israel arts connection is a program of the jewish

Schedule O (Form 990) 2021 Page **2**

Name of the organization JEWISH FEDERATION OF CLEVELAND	Employer identification number 34-0714445
FEDERATION OF CLEVELAND, CONNECTING OUR COMMUNITY WITH THE MOST DYNAMIC	
21ST CENTURY CULTURAL EXPERIENCES THAT ISRAEL HAS TO OFFER. WORKING IN	
PARTNERSHIP WITH NORTHEAST OHIO'S LEADING ARTS ORGANIZATIONS, WE STRIVE	
TO IDENTIFY, ENHANCE, PROMOTE, AND CREATE UNIQUE AND ENGAGING ISRAELI	
CULTURAL OPPORTUNITIES. THOUSANDS OF CLEVELANDERS ENJOY ATTENDING	
ISRAELI CULTURAL EVENTS PRESENTED BY OUR FINE ARTS PARTNERS. THE ROE	
GREEN GALLERY, LOCATED AT THE FEDERATION, HOSTED ART EXHIBITIONS	
DESIGNED TO APPEAL TO BOTH THE JEWISH AND GENERAL COMMUNITY AUDIENCES.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
FEDERATION, JEWISH ORGANIZATIONS, AND THE BROADER COMMUNITY TO PREPARE	
FOR THE CHALLENGES AND OPPORTUNITIES THAT WILL PRESENT THEMSELVES IN	
THE COMING YEARS.	
3. THE COMMUNITY RELATIONS COMMITTEE (CRC) SERVES AS THE CENTRAL	
COORDINATING AND RESOURCE BODY FOR THE JEWISH COMMUNITY IN THE	
COMMUNITY RELATIONS FIELD AND IS AN ACTIVE FORCE IN CLEVELAND'S CIVIC	
AND COMMUNAL LIFE. THE CRC: PROMOTES EQUALITY OF OPPORTUNITY AND FULL	
CIVIL RIGHTS AND CIVIL LIBERTIES FOR JEWISH AND ALL OTHER RACIAL,	
RELIGIOUS, AND ETHNIC GROUPS IN CLEVELAND; ENCOURAGES AMICABLE	
RELATIONSHIPS, MUTUAL UNDERSTANDING, AND RESPECT AMONG THE VARIOUS	
GROUPS IN CLEVELAND; HELPS CREATE AND MAINTAIN CONDITIONS THAT ARE	
CONDUCIVE TO ENCOURAGING THE CONTINUITY AND VITALITY OF JEWISH LIVING	
IN A PLURALISTIC SOCIETY; PROTECTS AND STRENGTHENS THE RIGHTS AND	
INTERESTS OF THE JEWISH COMMUNITY IN CLEVELAND; COMBATS ANTISEMITISM	
AND EVERY OTHER FORM OF RACISM OR GROUP PREJUDICE; AND PROVIDES FORUMS	
FOR JEWISH COMMUNAL LEADERSHIP TO EXCHANGE VIEWS WITH KEY LOCAL,	
NATIONAL, AND GLOBAL PUBLIC OFFICIALS AND INFLUENCERS.	

Employer identification number Name of the organization JEWISH FEDERATION OF CLEVELAND 34-0714445 CENTRAL SERVICES PROVIDE BENEFIT PROGRAMS, SECURITY ADVICE, RISK MANAGEMENT ADVICE, INVESTMENT ASSISTANCE, FUNDS FOR CAPITAL REPAIRS AND REPLACEMENTS, AND TRAINING AND INFORMATION ON TOPICS SUCH AS SECURITY, RETIREMENT PLANNING, AND PROFESSIONAL DEVELOPMENT TO THE FEDERATION'S 15 LOCAL BENEFICIARIES AND PROGRAMS. THE GOVERNMENT RELATIONS COMMITTEE ADVOCATES ON ISSUES SUCH AS SECURITY, MEDICAID, MEDICARE, TRANSPORTATION, AND CHILDREN'S HEALTH AND NUTRITION, HELPING CLEVELAND CITIZENS RECEIVE NEEDED SERVICES AND SUPPORT. THE ENDOWMENTS AND FOUNDATIONS PROGRAM PROVIDES SUPPORT TO HIGH PRIORITY FEDERATION INITIATIVES AND PROGRAMS AND OFFERS DONORS OPPORTUNITIES TO FUND INNOVATIVE AND PRIORITY CHARITABLE, EDUCATIONAL AND RELIGIOUS PROGRAMS, AND PROMOTES COLLABORATION BETWEEN THE FEDERATION AND OTHER FUNDERS IN CLEVELAND. 7) THE FEDERATION PROVIDES FUNDING AND ADMINISTRATIVE SUPPORT FOR SECURITY SERVICES TO LOCAL JEWISH BENEFICIARY AGENCIES. SYNAGOGUES. JEWISH PRESCHOOLS, AND OTHER JEWISH ORGANIZATIONS. THE FEDERATION ENGAGES JFC SECURITY, LLC (A SINGLE-MEMBER LLC WITH THE FEDERATION AS ITS MEMBER) AS ITS PRIMARY PROVIDER OF SUCH SERVICES. FORM 990, PART V, LINE 7G THE FEDERATION RECEIVED NO CONTRIBUTIONS OF QUALIFIED INTELLECTUAL PROPERTY AND THEREFORE WAS NOT REQUIRED TO FILE FORM 8899.

Employer identification number Name of the organization 34-0714445 JEWISH FEDERATION OF CLEVELAND FORM 990, PART VI, SECTION A, LINE 2: THE FOLLOWING TRUSTEES HAVE A FAMILY RELATIONSHIP: LYNNE COHEN & GREG MARCUS; MINDY DAVIDSON & EVIE SAFRAN; SHOSHANA DESSLER JACOBS & REUVEN DESSLER; GRANT DINNER, JARED MILLER, PENNI WEINBERG & STEPHEN WEINBERG; GARY GROSS, HARLEY GROSS & ROCHELLE GROSS; AARON GROSS, HARLEY GROSS & ROCHELLE GROSS; GARY GROSS & SARAH ZIMMERMAN; ADAM GIMBEL, SHELLEY GIMBEL, J. DAVID HELLER, REBECCA HELLER & WILLIAM HELLER; EVAN HIRSCH, MICHELLE HIRSCH, TODD STEIN; EDNA JAFFA & NATHAN KLEIN; JUSTIN KADIS AND SUELLEN KADIS; MILTON MALTZ & TAMAR MALTZ; PETER MEISEL, SUSI MEISEL & KIM PESSES; DAVID ORLEAN, CAMERON ORLEAN & DAYNA ORLEAN; CHARLES RATNER & JAMES RATNER; DAVID ROSENBERG & ENID ROSENBERG; BARBARA ROSSKAMM & BETTY ROSSKAMM; GARY SHAMIS & MARY ANN SHAMIS; BRADLEY SHERMAN & ELISABETH SHERMAN; JEFFREY WEISS, JUDITH WEISS & MORRY WEISS; JEFFREY WEISS, DANIELLE WILD & JEFFREY WILD; JASON WULIGER, SANDRA WULIGER & TIMOTHY WULIGER; ALAN YANOWITZ, DARA YANOWITZ & DONNA YANOWITZ;

Name of the organization **Employer identification number** JEWISH FEDERATION OF CLEVELAND 34-0714445 ANDREW ZELMAN & DANIEL ZELMAN ERICA LAZZARO & LOREE POTASH THE FOLLOWING TRUSTEES AND OFFICERS HAVE A BUSINESS RELATIONSHIP: RENEE CHELM, REUVEN DESSLER, MITCHELL SCHNEIDER; DAVID ORLEAN & CAMERON ORLEAN; EVAN HIRSCH & ABBIE PAPPAS; ALBERT RATNER, JAMES RATNER, & CHARLES RATNER; GRANT DINNER, JARED MILLER, STEPHEN WEINBERG; LARRY GOLDBERG & ERIC BELL; TODD STEIN, MICHELLE HIRSCH; GARY GROSS, HARLEY GROSS & SARAH ZIMMERMAN; AARON GROSS, HARLEY & ROCHELLE GROSS; J. DAVID HELLER, STEPHEN HOFFMAN, ERIKA B. RUDIN-LURIA & STEPHEN WEINBERG; IRA KAPLAN, KEVIN MARGOLIS, JEFFREY WILD; TAMAR MALTZ & MILTON MALTZ; PETER MEISEL & KIM PESSES; JEFFREY WEISS, JUDY WEISS, & MORRY WEISS; BRADLEY SHERMAN & MITCHELL SCHNEIDER; ROBERT GOLDBERG, J. DAVID HELLER, WILLIAM HELLER, ROBERT IMMERMAN, AMY MORGENSTERN, ALBERT RATNER, MICHAEL SIEGAL, JASON WULIGER, SANDRA WULIGER, TIMOTHY WULIGER & DANIEL ZELMAN; ANDREW ZELMAN & DANIEL ZELMAN; MITCH WOLF, EDNA JAFFA, & NATHAN KLEIN FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERS OF THE JEWISH FEDERATION OF CLEVELAND (THE "FEDERATION") SHALL CONSIST OF ALL JEWISH PERSONS WHO CONTRIBUTE, OR FACILITATE A CONTRIBUTION

90

Schedule O (Form 990) 2021 Page **2**

Employer identification number Name of the organization JEWISH FEDERATION OF CLEVELAND 34-0714445 (BY RECOMMENDATION OR OTHERWISE), IN EACH CASE AS REFLECTED IN THE RECORDS OF THE FEDERATION, AT LEAST TEN DOLLARS (\$10) TO THE FEDERATION, IN ANY ONE FISCAL YEAR. EACH SUCH PERSON SHALL BE A MEMBER BEGINNING WITH AND DURING THE FISCAL YEAR OF THE FEDERATION FOLLOWING THAT IN WHICH SUCH CONTRIBUTION IS PAID. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS ELECT THE TRUSTEES AT THE ANNUAL MEETING OF MEMBERS. FORM 990, PART VI, SECTION A, LINE 7B: UNDER STATE LAW, MEMBERS MUST APPROVE ANY DISSOLUTION ACTION ADOPTED BY THE TRUSTEES AND ANY TRUSTEE APPROVED SALE OR OTHER DISPOSITION OF SUBSTANTIALLY ALL OF THE FEDERATION'S ASSETS AS WELL AS MERGER OR CONSOLIDATION. FORM 990, PART VI, SECTION B, LINE 11B: THE BOARD OF TRUSTEES IS NOTIFIED THAT A PUBLIC DISCLOSURE COPY OF THE FORM 990 IS AVAILABLE TO ALL BOARD MEMBERS FOR THEIR REVIEW BEFORE FILING. UPON REQUEST. THE 990 IS ALSO DISTRIBUTED TO THE OFFICERS AND ADMINISTRATIVE COMMITTEE OF THE FEDERATION AND BOTH OF THESE GROUPS SPEND TIME DURING A MEETING TO REVIEW THE FORM IN DETAIL BEFORE FILING. SCHEDULE B, WHICH REFLECTS CONTRIBUTOR INFORMATION AND IS NOT REQUIRED TO BE PUBLICLY DISCLOSED, IS OMITTED FROM THE COPY DISTRIBUTED AND REVIEWED BY THESE GROUPS, TO MAINTAIN DONOR CONFIDENTIALITY. THE FORM 990 IS PREPARED BY THE FEDERATION'S STAFF AND THEN IS REVIEWED AND SIGNED BY THE FEDERATION'S OUTSIDE AUDITORS.

FORM 990, PART VI, SECTION B, LINE 12C:

Name of the organization JEWISH FEDERATION OF CLEVELAND	Employer identification number 34-0714445
EVERY TRUSTEE, OFFICER, COMMITTEE MEMBER AND EMPLOYEE IN A POSITION TO	
INFLUENCE, PROVIDE NON-PUBLIC INFORMATION OR VOTE ON FEDERATION POLICIES OR	
EXPENDITURES, (A "KEY INDIVIDUAL") IS REQUIRED TO SIGN A STATEMENT	_
ACKNOWLEDGING AND AGREEING TO THE TERMS OF THE CONFLICT OF INTEREST POLICY	
PRIOR TO EMPLOYMENT OR SERVING ON THE FEDERATION BOARD OR KEY COMMITTEE.	
THE CONFLICT OF INTEREST POLICY IS THEN REVIEWED ANNUALLY AT THE INITIAL	
MEETING OF THE BOARD OF TRUSTEES FOLLOWING THE FEDERATION'S ANNUAL MEETING.	
IN ADDITION, ANY NEW KEY INDIVIDUAL IS PROVIDED A COPY OF THE POLICY UPON	
COMMENCEMENT OF HIS OR HER POSITION AS A KEY INDIVIDUAL AND IS REQUIRED TO	
SIGN AND DELIVER TO THE FEDERATION A STATEMENT ACKNOWLEDGING AND AGREEING	
TO THE TERMS OF THE POLICY. A COPY OF THE POLICY IS SENT ANNUALLY TO ALL	
KEY INDIVIDUALS. THE FEDERATION HUMAN RESOURCE DEPARTMENT IS RESPONSIBLE	
FOR MAINTAINING COPIES OF SIGNED STATEMENTS AND FOLLOWING UP TO ENSURE THAT	
A STATEMENT IS OBTAINED FROM EACH KEY INDIVIDUAL.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE COMPENSATION COMMITTEE, WHICH IS COMPRISED OF ALL PAST BOARD CHAIRS,	
THE CURRENT BOARD CHAIR AND ONE OTHER CURRENT OFFICER, APPROVE ALL SENIOR	
MANAGEMENT COMPENSATION, BASED ON COMPARATIVE DATA GATHERED BY JEWISH	
FEDERATIONS OF NORTH AMERICA FROM OTHER FEDERATIONS, AND OTHER NON-PROFIT	
OR FOR-PROFIT CORPORATE ENTITIES. MANAGEMENT WHOSE COMPENSATION IS BEING	
DISCUSSED IS NOT IN THE ROOM AT THE TIME OF THESE DISCUSSIONS AND	
CONTEMPORANEOUS MINUTES OF THE MEETINGS, DOCUMENTING THE PROCEDURES	
FOLLOWED AND THE DATA USED, ARE PRODUCED.	
FORM 990, PART VI, SECTION C, LINE 18:	
THE FEDERATION WAS RECOGNIZED AS EXEMPT UNDER SECTION 501(C)(3) OF THE	
INTERNAL REVENUE CODE IN A DETERMINATION LETTER ISSUED IN AUGUST 1952. A	

Employer identification number Name of the organization JEWISH FEDERATION OF CLEVELAND 34-0714445 COPY OF THE APPLICATION FOR TAX EXEMPTION (FORM 1023) WAS NOT AVAILABLE ON JULY 15, 1987. ACCORDINGLY, UNDER THE SECTION 6104 REGULATIONS, SUCH APPLICATION IS NOT REQUIRED TO BE MADE AVAILABLE FOR PUBLIC INSPECTION. FORM 990, PART VI, SECTION C, LINE 19: UPON REASONABLE REQUEST THE FEDERATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE GENERALLY AVAILABLE. FINANCIAL STATEMENTS ARE NOT AVAILABLE TO THE PUBLIC. PART VII, SECTION A, COLUMNS E & F INCLUDED IN THE COLUMNS HEADED "REPORTABLE COMPENSATION FROM RELATED ORGANIZATIONS" AND "OTHER COMPENSATION FROM RELATED ORGANIZATIONS" FOR ERIKA RUDIN-LURIA, STEPHEN H. HOFFMAN, AND J. DAVID HELLER IS COMPENSATION THEY EACH RECEIVE AS DIRECTORS OF AN ENTITY (PARKWOOD LLC) THAT PROVIDES ADMINISTRATIVE SERVICES TO PARKWOOD TRUST COMPANY, AN ORGANIZATION 100% OWNED BY PARKWOOD LLC. PARKWOOD TRUST COMPANY PROVIDES ADVISORY SERVICES TO MANDEL SUPPORTING FOUNDATION ("MSF"), WHICH IS RELATED TO THE REPORTING ENTITY (JEWISH FEDERATION OF CLEVELAND). MS. RUDIN-LURIA'S DIRECTOR COMPENSATION FROM PARKWOOD LLC IN 2020 WAS \$126,700. MESSRS, HOFFMAN AND HELLER RECEIVED DIRECTOR COMPENSATION FROM PARKWOOD LLC OF \$137,494 AND \$153,685, RESPECTIVELY, DURING THIS SAME PERIOD. MSF, PARKWOOD LLC AND PARKWOOD TRUST COMPANY ARE INCLUDED IN SCHEDULE R. MSF OWNS A 65 PERCENT NON-VOTING PROFITS INTEREST IN PARKWOOD LLC. NEITHER THE JEWISH FEDERATION OF CLEVELAND NOR MSF ARE INVOLVED IN SELECTING THE DIRECTORS FOR PARKWOOD LLC, WHICH OPERATES INDEPENDENTLY OF THE JEWISH FEDERATION OF CLEVELAND AND MSF.

Schedule O (Form 990) 2021 Page **2**

Schedule O (Form 990) 2021		Page 2
Name of the organization JEWISH FEDERATION OF CLEVELAND		Employer identification number 34-0714445
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
ADJUSTMENT TO NET ASSETS-MINIMUM PENSION LIABILITY	784,541.	
CHANGE IN VALUE OF PROJECTED REVENUE RELATED TO CHARITABLE		
TRUSTS AND CGAS	-4,414,889.	
PARTNERSHIP INCOME REPORTED ON 990 NOT RECORDED ON BOOKS	-1,197,921.	
LIFE INSURANCE PREMIUMS NET OF INCREASE IN CSV	199,017.	
CHANGE IN RESERVE FOR UNCOLLECTIBLE PLEDGES	-560,317.	
PRIOR PERIOD ADJUSTMENT	-1,659.	
TOTAL TO FORM 990, PART XI, LINE 9	-5,191,228.	
FORM 990, PART XI, LINES 2B AND 2C AUDITED FINANCIALS AND AUDIT COMMITTEE: THE FINANCIAL STATEM	MENTS OF THE	
JEWISH FEDERATION OF CLEVELAND ARE AUDITED ON A CONSOLIDATED	D BASIS,	
WITH ITS SUPPORTING FOUNDATIONS. THE FEDERATION'S AUDIT COM-	MITTEE,	
COMPRISED OF INDEPENDENT VOLUNTEERS, RECOMMENDS THE INDEPENDENT	DENT	
ACCOUNTANTS TO THE FEDERATION'S BOARD OF TRUSTEES WHICH MUST	r Approve	
THE APPOINTMENT. THE AUDIT COMMITTEE PROVIDES OVERSIGHT OF	THE AUDIT	
AND REVIEWS THE AUDITED FINANCIAL STATEMENTS WITH STAFF AND	THE	
INDEPENDENT ACCOUNTANTS PRIOR TO ISSUANCE. THE AUDIT COMMIT	TTEE ALSO	
MEETS INDEPENDENTLY WITH THE INDEPENDENT ACCOUNTANTS TO DISC	CUSS THE	
AUDIT PROCESS.		
FORM 000 PART W. LTMP 2A		
FORM 990, PART V, LINE 2A INCLUDED IN THE TOTAL NUMBER OF EMPLOYEES REPORTED FOR CALE	JDAR 2021	
(238) WERE:	ND1111 2021	
(200) HIME.		

^{1) 50} EMPLOYEES FOR A BENEFICIARY AGENCY FOR WHICH THE FEDERATION ACTS

<u>Schedule O (Form 990) 2021</u> Page **2**

Employer identification number Name of the organization JEWISH FEDERATION OF CLEVELAND 34-0714445 AS PAYMASTER , AND 46 EMPLOYEES FOR JFC SECURITY, LLC., A SINGLE MEMBER LLC WITH THE FEDERATION AS ITS MEMBER. THESE EMPLOYEES ARE NOT EMPLOYEES OF THE FEDERATION, BUT THE EMPLOYEE COUNT IS INCLUDED SOLELY BECAUSE JFC SECURITY, LLC IS A DISREGARDED ENTITY FOR TAX PURPOSES. IT HAS ITS OWN EMPLOYER IDENTIFICATION NUMBER AND HAS FILED W-2'S FOR ITS EMPLOYEES UNDER THAT NUMBER. 3) 142 EMPLOYEES FOR JEWISH FEDERATION OF CLEVELAND. FORM 990, PART VI, LINE 16B PROCEDURE REGARDING JOINT VENTURES: THE FEDERATION'S FINANCE AND INVESTMENT COMMITTEE APPROVES ALL NEW INVESTMENTS AND EVALUATES THESE INVESTMENTS ON AN ONGOING BASIS. DOCUMENTS RELATED TO THESE INVESTMENTS GO THROUGH A LEGAL REVIEW AND A REVIEW BY THE FEDERATION'S STAFF. ATTENTION IS GIVEN TO THE FEDERATION'S EXEMPT STATUS IN THAT REVIEW PROCESS. THERE IS NO ACTIVE PARTICIPATION IN THE OPERATION OF THESE INVESTMENTS AS THEY ARE HELD FOR INVESTMENT PURPOSES ONLY. FORM 990, PART IX - FUNCTIONAL EXPENSES THE EXPENSES INCLUDED IN THIS STATEMENT INCLUDE THE COSTS OF ADMINISTERING THE FEDERATION'S SUPPORTING FOUNDATION PROGRAM, INCLUDING PROCESSING OF GRANTS AND INVESTMENT OVERSIGHT, FOR 49 FOUNDATIONS (SEE SCHEDULE R) WITH ASSETS TOTALING OVER \$3.5 BILLION, AND \$46 MILLION OF GRANT MAKING DURING THE FISCAL YEAR ENDED JUNE 30, 2022. THE ASSETS AND GRANT MAKING OF THESE FOUNDATIONS ARE REFLECTED IN THEIR SEPARATE

990'S AND ARE NOT REFLECTED IN THIS 990.

Schedule O (Form 990) 2021	Page 2
Name of the organization JEWISH FEDERATION OF CLEVELAND	Employer identification number 34-0714445
FORM 990, PART VII SECTION B AND PART IX, LINE 11C	
AUDIT AND TAX SERVICES: PART IX LINE 11C REFLECTS AUDIT AND TAX	
SERVICES INCURRED BY THE FEDERATION NET OF REIMBURSEMENT FROM	
SUPPORTING FOUNDATIONS, TRUSTS, FEDERATION'S RETIREMENT PLAN AND	
BENEFICIARY AGENCIES.	
FORM 990, PART IX, LINE 11F	
INVESTMENT MANAGEMENT FEES ARE NETTED WITH INVESTMENT INCOME REPORTED	
ELSEWHERE IN THIS FORM 990.	
THE FEDERATION ALLOCATES POOL INVESTMENT INCOME TO PARTICIPATING FUNDS NET OF INVESTMENT FEES. TOTAL INVESTMENT FEES OF \$1,032,000 WERE PAID	
BY FEDERATION ON BEHALF OF THE POOLS. ADDITIONALLY, CERTAIN INVESTMENT	
FEES ARE DEDUCTED FROM INVESTMENT INCOME BY INVESTMENT MANAGERS.	
THE FEDERATION'S SHARE OF THESE INVESTMENT FEES CANNOT BE DETERMINED.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

JEWISH FEDERATION OF CLEVELAND

Employer identification number
34-0714445

Part I	Identification of Disregarded Entities.	Complete if the organization answered	"Yes" or	n Form 990, Part IV, line 33.	

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
WORKMEN'S CIRCLE CEMETERY LLC - 45-3201893					
25701 SCIENCE PARK DRIVE	BURIALS & MAINTENANCE OF				COMMISSION ON CEMETERY
CLEVELAND, OH 44122-7302	CEMETERY	оніо		1.	PRESERVATION
JCH WARRENSVILLE LLC - 26-1126354	OWNERSHIP AND MANAGEMENT OF				
25701 SCIENCE PARK DRIVE	HOUSING FOR ELDERLY AND				JEWISH COMMUNITY
CLEVELAND, OH 44122-7302	DISABLED	оніо	-157,119.	5,786,175.	HOUSING, INC.
JAFFA FAMILY FOUNDATION LLC - 81-3360267					
25701 SCIENCE PARK DRIVE					JEWISH FEDERATION OF
CLEVELAND, OH 44122-7302	INVESTMENTS	оніо		6,341,275.	CLEVELAND
JFC SECURITY LLC - 81-2450731	PROVIDE SECURITY & SERVICES				
25701 SCIENCE PARK DRIVE	TO ORGANIZATIONS SERVING				JEWISH FEDERATION OF
CLEVELAND, OH 44122-7302	THE JEWISH COMMUNITY	оніо	-82,519.	195,419.	CLEVELAND

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
JOANN AND THOMAS ADLER FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1858749, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		i
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
MILDRED & MARTIN BECKER FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1711965, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
THE SEMI J. & RUTH W. BEGUN FOUNDATION -	SUPPORT CHARITABLE,						
34-1594565, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		i
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
CHELM FAMILY FOUNDATION - 30-0226826	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		ĺ
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х

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

Part I Continuation of Identification of Disregarded Entities

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
SIMON CHARITABLE PUBLIC LLC - 20-3948339					
25701 SCIENCE PARK DRIVE					MANDEL SUPPORTING
LEVELAND, OH 44122-7302	INVESTMENTS	DELAWARE	69,551,259.	1,068,416,366.	FOUNDATION
MSF PRIVATE EQUITY FUND LLC - 20-5060858					
25701 SCIENCE PARK DRIVE					MANDEL SUPPORTING
CLEVELAND, OH 44122-7302	INVESTMENTS	DELAWARE	141,197,049.	1,476,271,252.	FOUNDATION
MSF REAL ESTATE FUND LLC - 20-5060891					
25701 SCIENCE PARK DRIVE					MANDEL SUPPORTING
CLEVELAND, OH 44122-7302	INVESTMENTS	DELAWARE	40,505,154.	294,689,854.	FOUNDATION
MAF INVESTMENTS LTD - 34-1796304					
25701 SCIENCE PARK DRIVE					MANDEL SUPPORTING
CLEVELAND, OH 44122-7302	INVESTMENTS	оніо	-279,671.	12,052,406.	FOUNDATION

(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	(f) Direct controlling	Section 5	
of related organization	1 milary activity	foreign country)	section	status (if section	entity	contr	rolled zation?
or rotation of garmination		Toroigh country)		501(c)(3))		Yes	No
CLEVELAND HEBREW SCHOOLS EDUCATIONAL FDTN -	SEE SCHEDULE R, PART VII,					163	INO
34-0714599, 25701 SCIENCE PARK DRIVE,	SUPPLEMENTAL INFORMATION				JEWISH FEDERATION		İ
CLEVELAND, OH 44122-7302	FOR PRIMARY ACTIVITY	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
ELLEN E. & VICTOR J. COHN SUPPORTING	SUPPORT CHARITABLE,						
FOUNDATION - 31-1606939, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	- PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
COMMISSION ON CEMETERY PRESERVATION -	SEE SCHEDULE R, PART VII,						
34-1771506, 25701 SCIENCE PARK DRIVE,	SUPPLEMENTAL INFORMATION				JEWISH FEDERATION		ĺ
CLEVELAND OH 44122-7302	FOR PRIMARY ACTIVITY	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
FEDERATION HOLDINGS, INC 23-7133908							
25701 SCIENCE PARK DRIVE	HOLDS LEGAL TITLE TO				JEWISH FEDERATION		İ
CLEVELAND, OH 44122-7302	DONATED REAL ESTATE	оніо	501(C)(2)	N/A	OF CLEVELAND		х
IRVING B. FINE FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
86-3861172, 25702 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		İ
CLEVELAND, OH 44122-7302	- PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
FGI FOUNDATION - 34-1916912	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		İ
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
RINA & SAMUEL M. FRANKEL FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
31-1502121, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		İ
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
PEGGY AND JOHN GARSON FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1916905, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		İ
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
J. DAVID AND REBECCA HELLER FAMILY	SUPPORT CHARITABLE,						
FOUNDATION - 36-4954283, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		İ
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
ROBERT AND SUSAN R. HURWITZ FAMILY	SUPPORT CHARITABLE,						
FOUNDATION - 34-1916908, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		İ
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
THE IMMERMAN FOUNDATION - 34-1533181	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		ĺ
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
JEWISH COMMUNITY HOUSING INC 34-1276120	SEE SCHEDULE R, PART VII,						
25701 SCIENCE PARK DRIVE	SUPPLEMENTAL INFORMATION				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	FOR PRIMARY ACTIVITY	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х

(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile (state or	(d) Exempt Code section	(e) Public charity	(f) Direct controlling	contr	g) 512(b)(13) rolled
of related organization		foreign country) section		status (if section 501(c)(3))	entity	organiz	
THE MT. SINAI HEALTH CARE FOUNDATION -	SUPPORT CHARITABLE,			(-)(-)/		Yes	No
34-1777878, 11000 EUCLID AVE, CLEVELAND, OH	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
44106	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
MADAV IX FOUNDATION - 34-1638258	SUPPORT CHARITABLE.						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302		оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
MADAV XVII FOUNDATION - 34-1827879	SUPPORT CHARITABLE.						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302		оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
MADAV XVIII FOUNDATION - 34-1827878	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
MALTZ FAMILY FOUNDATION - 31-1566163	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
JACK, JOSEPH AND MORTON MANDEL SUPPORTING	SUPPORT CHARITABLE,						
FOUNDATION - 34-1350566, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
MEISEL & PESSES FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
31-1583883, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
ALEX & ANNE MILLER FAMILY CHARITABLE FUND -	SUPPORT CHARITABLE,						
31-1204735, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
DAVID & RUTH MOSKOWITZ FAMILY CHARITABLE	SUPPORT CHARITABLE,						
FOUNDATION - 34-1806783, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
DAVID AND INEZ MYERS FOUNDATION - 34-656094	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
EILEEN AND MYRON NICKMAN FAMILY SUPPORTING	SUPPORT CHARITABLE,						
FOUNDATION - 34-1916911, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		1
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
PHYLLIS & DEBRA ANN NOVEMBER CHILDREN'S FUN	SUPPORT CHARITABLE,						
- 31-1566156, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		1
CLEVELAND OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND	ı	х

(a)	(b)	(c)	(d)	(e)	(f)	Section 5	3) 512(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Exempt Code section	Public charity status (if section	Direct controlling entity	contr organiz	rolled
of related organization		foreign country)	Section	501(c)(3))	entity		
OSTARA - 31-1606934	SUPPORT CHARITABLE,			33.(5)(5))		Yes	No
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
THE HARRY RATNER HUMAN SERVICES FUND -	SEE SCHEDULE R, PART VII,						
34-1360076, 25701 SCIENCE PARK DRIVE,	SUPPLEMENTAL INFORMATION				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	FOR PRIMARY ACTIVITY	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
THE RIMON XLI FOUNDATION - 34-1916913	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		l
CLEVELAND, OH 44122-7302	- PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
ROBERT S. & SYLVIA K. REITMAN FAMILY	SUPPORT CHARITABLE,						
FOUNDATION - 31-1502117, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	- PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
DAVID AND ENID ROSENBERG FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
37-1777614, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
SCHOLNICK FAMILY FOUNDATION - 61-1749334	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
NATHAN & FANNYE SHAFRAN FOUNDATION -	SUPPORT CHARITABLE,						
34-1458950, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
LAWRENCE C. SHERMAN FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1806781, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		l
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
MICHAEL & ANITA SIEGAL FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1832962, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
LAURA & ALVIN SIEGAL CLG JUD STDIES ED FDTN	SUPPORT CHARITABLE,						
- 34-0946903, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
NORMA AND ERNIE SIEGLER FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1546349, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х
ROBERT AND EILEEN SILL FAMILY FOUNDATION -	SUPPORT CHARITABLE,						Ī
46-4104662, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		İ
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		Х

(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	(f) Direct controlling		rolled
of related organization		foreign country)	section	status (if section 501(c)(3))	entity	organiz	
SIMON FAMILY FOUNDATION - 34-1808584	SUPPORT CHARITABLE,			C/C//		Yes	No
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	- PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
NAOMI G. & EDWIN Z. SINGER FAMILY FUND -	SUPPORT CHARITABLE,						
34-1638257, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
LIPMAN STEIGER FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
88-0682344, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
IRVING I. STONE SUPPORT FOUNDATION -	SUPPORT CHARITABLE,						
34-1476465, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
NINA & NORMAN WAIN FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
31-1502119, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
STANLEY E. AND SALLY HARRIS WERTHEIM FAMILY	SUPPORT CHARITABLE,						
FOUNDATION - 30-0884987, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
WOLF FAMILY FOUNDATION - 34-1638259	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
BENNETT & DONNA YANOWITZ FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1562999, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
DAN AND ELLEN ZELMAN FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
38-3876650, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
DAVID AND IVY ZELMAN FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
87-1854300, 25702 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
ZILBER FAMILY FOUNDATION - 34-1711966	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		İ
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	12A TYPE 1	OF CLEVELAND		х
	1						İ
	7						i

Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(ł	1)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Dispropo alloca	tions?	Code V-UBI amount in box 20 of Schedule	manag partne	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes I	10
LEVINE - MEDINA - 34-1500670											
1660 WEST 2ND STREET STE											
1100, CLEVELAND, OH	RENTAL REAL			(D) REVENUE							
44113-1448	ESTATE	ОН	N/A	EXCLUDED	-146.	135,987.		X	N/A	х	99.00%
KULBER-MEDINA LIMITED											
PARTNERSHIP - 34-1715418, 126]										
WEST STREETSBORO ST STE 1,	RENTAL REAL			(D) REVENUE							
HUDSON, OH 44236	ESTATE	ОН	N/A	EXCLUDED	-57.	-32,722.		X	N/A	x	98.00%
JCF DROST HOLDINGS LTD -											
34-1848052, 25701 SCIENCE											
PARK DRIVE, CLEVELAND, OH]		MADAV XVII	(C)UNRELATED							
44122-7302	INVESTMENTS	ОН	FOUNDATION	BUS REV	-94,503.	4,443,173.		X	52,769.	х	99.00%
PARKWOOD LLC - 37-1665471	FINANCIAL AND		MANDEL								
1000 LAKESIDE AVENUE	INVESTMENT		SUPPORTING	(C)UNRELATED							
CLEVELAND, OH 44114	SERVICES	DE	FOUNDATION	BUS REV	8,796,511.	49,984,997.		X	7,809,947.	Х	65.00%

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	contr	ti) etion b)(13) rolled ity?
GUIDINI DE DEMINISTRE MONGRA (5)		country)		,				Yes	No
CHARITABLE REMAINDER TRUSTS (5)	-								ĺ
25701 SCIENCE PARK DRIVE	CHARITABLE REMAINDER								1
CLEVELAND, OH 44122-7302	TRUST	OH		TRUST					Х
PARKWOOD TRUST COMPANY - 34-1851693									
919 N. MARKET ST STE 429	FINANCIAL, TRUST AND								ĺ
WILMINGTON, DE 19801	INVESTMENT SERVICES	DE	PARKWOOD LLC	C CORP	2,881,450.	15,356,900.	65.00%		Х

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	portion-	Code V-UBI	Gene	ral or	Percentage
of related organization		(state or	entity	(related, unrelated, excluded from tax under	income	end-of-year assets	ate allo	cations?	amount in box 20 of Schedule	part	aging ner?	ownership
		foreign country)		sections 512-514)		833013	Yes	No	K-1 (Form 1065)	Yes	No	
CLEVELAND FEDERATION PE I,												
LLC - 46-3664554, 25701			JEWISH									
SCIENCE PARK DRIVE,			FEDERATION OF	(D) REVENUE								
CLEVELAND, OH 44122-7302	INVESTMENTS	ОН	CLEVELAND	EXCLUDED	2,728,611.	16,609,682.		x	-9,062.		x	70.00%
CLEVELAND FEDERATION PE I,												
LLC - 46-3664554, 25701]		DAVID & INEZ									
SCIENCE PARK DRIVE,]		MYERS	(D) REVENUE								
CLEVELAND, OH 44122-7302	INVESTMENT	OH	FOUNDATION	EXCLUDED	584,703.	3,558,883.		x	-1,942.		x	15.00%
CLEVELAND FEDERATION PE I,												_
LLC - 46-3664554, 25701]		MT SINAI									
SCIENCE PARK DRIVE,]		HEALTH CARE	(D) REVENUE								
CLEVELAND, OH 44122-7302	INVESTMENT	OH	FOUNDATION	EXCLUDED	584,703.	3,558,886.		x	-1,942.		x	15.00%
CLEVELAND FEDERATION PE II,												
LLC - 83-3457838, 25701]		JEWISH									
SCIENCE PARK DRIVE,]		FEDERATION OF	(D) REVENUE								
CLEVELAND, OH 44122-7302	INVESTMENT	OH	CLEVELAND	EXCLUDED	735,871.	17,178,354.		x	-56,427.		x	75.00%
CLEVELAND FEDERATION PE II,												
LLC - 83-3457838, 25701]		DAVID & INEZ									
SCIENCE PARK DRIVE,]		MYERS	(D) REVENUE								
CLEVELAND, OH 44122-7302	INVESTMENT	ОН	FOUNDATION	EXCLUDED	123,062.	2,900,443.		x	-9,520.		x	12.50%
CLEVELAND FEDERATION PE II,												
LLC - 83-3457838, 25701			MT SINAI									
SCIENCE PARK DRIVE,			HEALTH CARE	(D) REVENUE								
CLEVELAND, OH 44122-7302	INVESTMENT	OH	FOUNDATION	EXCLUDED	123,062.	2,900,443.		x	-9,520.		x	12.50%
]											
]											
]											
]											
]											
]											
]											
]											

Part V Trans	actions With Related Organiza	tions. Complete if the	organization answered	"Yes" on F	Form 990, Parl	: IV, line 34,	, 35b, or 36.
--------------	-------------------------------	------------------------	-----------------------	------------	----------------	----------------	---------------

Note	: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1	During the tax year, did the organization engage in any of the following transactions	with one or more rel	ated organizations listed in	n Parts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х		
	Gift, grant, or capital contribution to related organization(s)				1b	Х			
	Gift, grant, or capital contribution from related organization(s)				1c	Х			
	Loans or loan guarantees to or for related organization(s)				1d		Х		
	Loans or loan guarantees by related organization(s)				1e		Х		
f	Dividends from related organization(s)				1f		X		
	f Dividends from related organization(s) g Sale of assets to related organization(s)								
	Purchase of assets from related organization(s)				1g 1h		X		
					1i		X		
	i Exchange of assets with related organization(s)j Lease of facilities, equipment, or other assets to related organization(s)						X		
	•								
k	k Lease of facilities, equipment, or other assets from related organization(s)								
	I Performance of services or membership or fundraising solicitations for related organization(s)								
	m Performance of services or membership or fundraising solicitations by related organization(s)								
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	n(s)			1n	Х			
					10	Х			
р	Reimbursement paid to related organization(s) for expenses				1p		Х		
q	Reimbursement paid by related organization(s) for expenses				1q	Х			
r	Other transfer of cash or property to related organization(s)				1r	Х			
	Other transfer of cash or property from related organization(s)				1s	Х			
2	If the answer to any of the above is "Yes," see the instructions for information on wh	o must complete thi	s line, including covered re	elationships and transaction thresholds.					
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved				
		_	552 O14	2007	·		·		

(1) CLEVELAND FEDERATION PE I, LLC 553,014.COST (2) CLEVELAND FEDERATION PE II, LLC 10,555,865.COST В (3) CLEVELAND FEDERATION PE I, LLC S 5,322,821.COST (4) CLEVELAND FEDERATION PE II, LLC S 910,969.COST (5)

Schedule R (Form 990) 2021 JEWISH FEDERATION OF CLEVELAND 34-0714445 Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprotion allocat	por- ate ions?		Gener mana partn Yes	(kal or Perceiging owne	k) entage ership
	-										
	_							Ochodolo			

SCHEDULE R, PART II, COLUMN B

DISABILITIES

Schedule R (Form 990) 2021

CONTINUATION OF PRIMARY ACTIVITY:

THE HARRY RATNER HUMAN SERVICES FUND:

SUPPORT CHARITABLE, EDUCATIONAL AND RELIGIOUS PURPOSES OF THE

FEDERATION, INCLUDING ASSISTING WITH THE EMERGENCY NEEDS OF SEVERAL

LOCAL AGENCIES' CLIENTS.

SCHEDULE R, PART II, COLUMN B

CONTINUATION OF PRIMARY ACTIVITY:

132165 11-17-21 Schedule R (Form 990) 2021

Form 8879-TF

IRS e-file Signature Authorization for a Tax Exempt Entity

or calendar year 2021, or fiscal year beginning	JUL 1	, 2021, and ending	JUN 30	, 20 2
or calendar year 2021, or liscal year beginning	001 1	, 202 i, and ending	0014 50	, 20 -

2

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.

► Go to www.irs.gov/Form8879TE for the latest information. Name of filer EIN or SSN JEWISH FEDERATION OF CLEVELAND 34-0714445

Name and title of officer or person subject to tax

ASST TREASURER

BARRY REIS

Part I Type of Return and Return Informat	ion
---	-----

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)		1b			
2a Form 990-EZ check here b		b	Total revenue, if any (Form 990-EZ, line 9)		2b			
За	Form 1120-POL check here	b	Total tax (Form 1120-POL, line 22)		3b			
4a	Form 990-PF check here >		Tax based on investment income (Form 990-PF, Part V, line 5		4b			
5a	Form 8868 check here	b	Balance due (Form 8868, line 3c)		5b			
6a	Form 990-T check here > X		Total tax (Form 990-T, Part III, line 4)		6b	226,376.		
7a	Form 4720 check here		Total tax (Form 4720, Part III, line 1)		7b			
8a Form 5227 check here b FMV of assets at end of tax y		FMV of assets at end of tax year (Form 5227, Item D)		8b				
9a	Form 5330 check here >	b	Tax due (Form 5330, Part II, line 19)		9b			
10a	Form 8038-CP check here	b	Amount of credit payment requested (Form 8038-CP, Part III,	, line 22)	10b			
Part II Declaration and Signature Authorization of Officer or Person Subject to Tax								
Jnder _I	penalties of perjury, I declare that	l a	m an officer of the above entity or I am a person subject to	tax with respe	ect to (name			
of entity	y)		, (EIN) ar	nd that I have	examined a	copy of the		
	and the second control of the second control of the second	1.	les and above and a soul to the least of any larger days and belief			-1		

2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. Lalso authorize the financial institutions involved in the processing of the electronic later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only									
I authorize		to enter my PIN							
	ERO firm name	Enter five numbers, b							

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed

return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

ignature of officer or person subject to tax

Certification and Authentication Part III

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

34585119559

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

Date _ 05/15/23 ERO's signature

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

Form	990-T	Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))							
		For cal	endar year 2021 or other tax year beginning JUL 1, 2021 , and ending JUN 30, 2022		2021				
Depar Intern	rtment of the Treasury al Revenue Service	Ор 50	pen to Public Inspection for 11(c)(3) Organizations Only						
Α	DEmployer identification number								
B E	xempt under section	Print	JEWISH FEDERATION OF CLEVELAND	3,	4-0714445				
X	501(c)(3) 408(e) 220(e)	or Type	Number, street, and room or suite no. If a P.O. box, see instructions. 25701 SCIENCE PARK DRIVE		xemption number tructions)				
	408A 530(a) 529(a) 529A		City or town, state or province, country, and ZIP or foreign postal code CLEVELAND, OH 44122-7302	F	Check box if				
	_ , ,	С Во	ok value of all assets at end of year 521,768,610.	1	an amended return.				
G	Check organization		X 501(c) corporation 501(c) trust 401(a) trust Other trust						
Н	Check if filing only to	>	Claim credit from Form 8941 Claim a refund shown on Form 2439						
1	Check if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding corporation						
J	Enter the number of	attach	ed Schedules A (Form 990-T)	2					
			e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? d identifying number of the parent corporation.		Yes X No				
			MOZELLE JACKSON Telephone number ▶ 23	16.593	.2900				
Pa	rt I Total Unr	elate	d Business Taxable Income						
1	Total of unrelated	busines	ss taxable income computed from all unrelated trades or businesses (see						
	instructions)			1	1,197,921.				
2	Reserved			2					
3	Add lines 1 and 2			3	1,197,921.				
4	Charitable contrib	utions (see instructions for limitation rules) STMT 1	4	119,692.				
5	Total unrelated bu	siness	taxable income before net operating losses. Subtract line 4 from line 3	5	1,078,229.				
6	Deduction for net	operati	ng loss. See instructions	6					
7	Total of unrelated	busines	ss taxable income before specific deduction and section 199A deduction.						
	Subtract line 6 from	m line 5	j	7	1,078,229.				
8	Specific deduction	n (genei	ally \$1,000, but see instructions for exceptions)	8	1,000.				
9	Trusts. Section 19	99A dec	duction. See instructions	9					
10	Total deductions.	. Add lii	nes 8 and 9	10	1,000.				
11	Unrelated busine	ss taxa	ble income. Subtract line 10 from line 7. If line 10 is greater than line 7,						
	enter zero			11	1,077,229.				
Ра	rt II Tax Com	•							
1			s corporations. Multiply Part I, line 11 by 21% (0.21)	1	226,218.				
2			ates. See instructions for tax computation. Income tax on the amount on						
	Part I, line 11 from		Tax rate schedule or Schedule D (Form 1041)	2					
3	Proxy tax. See ins			3					
4	Other tax amounts			4					
5	Alternative minimu			5					
6			cility income. See instructions	6	226 210				
7			n 6 to line 1 or 2, whichever applies	7	226,218.				
LHA	For Paperwork F	⊀educt	on Act Notice, see instructions.		Form 990-T (2021)				

123701 07-06-22

	0-T (2021)				F	age 2
Part I						
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a				
	Other credits (see instructions)			1 /		
C	General business credit, Attach Form 3800 (see instructions)	1c				
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d				
e	Total credits. Add lines 1a through 1d	*************		1e		
	Subtract line 1e from Part II, line 7			2	226,	218.
3	Other amounts due, Check if from: Form 4255 Form 8611 Fo	rm 8697	Form 8866	3		
	Total tax. Add lines 2 and 3 (see instructions), Check if includes tax p section 1294. Enter tax amount here	Action to the first of the second second	ed under	4	226,	218.
	Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (I	and the second		5		0.
6a	Payments: A 2020 overpayment credited to 2021		30,273.			
	2021 estimated tax payments. Check if section 643(g) election applies					
	Tax deposited with Form 8868		265,500.			
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d				
	Backup withholding (see instructions)			1 9		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f				
	Other credits, adjustments, and payments: Form 2439					
g	Form 4136 Other Total					
				- 1	295,	772
	Total payments. Add lines 6a through 6g		4	7	223,	113.
				8		_
	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed			9		e e e
	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount ov			10	69,	555.
Part I	Enter the amount of line 10 you want: Credited to 2022 estimated tax Klassian Statements Regarding Certain Activities and Other Inform.	09,555	- Refunded ▶	11		0.
2 [f	During the tax year, did the organization receive a distribution from, or was it the goreign trust? f "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Enter available pre-2018 NOL carryovers here \$ Do not shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here be cost-2017 NOL carryovers. Enter available Business Activity Code and post-2017 the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17	ot include any p ny any deduction NOL carryovers.	ost-2017 NOL carr reported on Part Don't reduce	yover		x
	Business Activity Code	Available	post-2017 NOL ca			
	901101	\$		7,518,		
		\$				
6a [Did the organization change its method of accounting? (see instructions)					Х
	f 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 99 explain in Part V	0-PF, or Form 1	128? If "No,"			
Part V		***********	Oleron and resolution of the state of the st	a ta sa para a constante de la	1	
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules accorrect, and portulets Declaration of preparer (other than taxpayer) is based on all information of which pr		o the best of my knowledge.	ge and belief, it is to y the IRS discuss the preparer shown bee	his return wi	ith
	Signature of officer Date Title	I note	inst	ructions)?	Yes X	No
Date:	Print/Type preparer's name Preparer's signature	Date	Check if	PTIN		
Paid	PAUL HAMMERSCHMIDT PAUL HAMMERSCHMIDT	5/15/2023	self- employed	D0120415	10	
Prepar	er	10.000	Produced N	P0138417		
Jse Or	100 PARK AVENUE		Firm's EIN ▶	13-538	1990	
	Firm's address NEW YORK, NY 10017-5001		Dhaui - 01	0 005 0000		
23711 01-3			Phone no. 21	2-885-8000	990-T	
water in the fact	11.54			Form	221-11	11000

FORM 990-T	CONTRIBUTIONS	STATEMENT 1
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
CASH 6/30/22 SECURITIES	N/A AVG HIGH/LOW GIFT DATE	65,027,467. 23,256,449.
TOTAL TO FORM 990-T, PART I, LI	INE 4	88,283,916.

FORM 990-T CONTRIBUTIONS SUMMA	RY STATEMENT 2
QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT	
CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS FOR TAX YEAR 2016 73,889,808 FOR TAX YEAR 2017 94,239,796 FOR TAX YEAR 2018 62,690,952 FOR TAX YEAR 2019 82,757,097 FOR TAX YEAR 2020 63,606,439	
TOTAL CARRYOVER TOTAL CURRENT YEAR 10% CONTRIBUTIONS	
TOTAL CONTRIBUTIONS AVAILABLE TAXABLE INCOME LIMITATION AS ADJUSTED	465,468,008 119,692
EXCESS CONTRIBUTIONS EXCESS 100% CONTRIBUTIONS TOTAL EXCESS CONTRIBUTIONS	465,348,316 0 465,348,316
ALLOWABLE CONTRIBUTIONS DEDUCTION	119,692
TOTAL CONTRIBUTION DEDUCTION	119,692

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2021

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Name of the organization

JEWISH FEDERATION OF CLEVELAND

C Unrelated business activity code (see instructions)

901101

B Employer identification number
34-0714445

D Sequence: 1 of 3

<u>E I</u>	Describe the unrelated trade or business INCOME FROM PARTNE	RSHIP	S		
Pa	rt I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)). See instructions	4a			
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement) STATEMENT 3	5	-9,062.		-9,062.
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)	10			
11	Advertising income (Part IX)	11			
12	Other income (see instructions; attach statement)	12			
13	Total. Combine lines 3 through 12	13	-9,062.		-9,062.

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)	1	
2	Salaries and wages	2	
3	Repairs and maintenance	3	
4	Bad debts	4	
5	Interest (attach statement). See instructions	5	
6	Taxes and licenses	6	
7	Depreciation (attach Form 4562). See instructions		
8	Depreciation (attach Form 4562). See instructions 7 Less depreciation claimed in Part III and elsewhere on return 8a	8b	
9	Depletion	9	
10	Contributions to deferred compensation plans	10	
11	Employee benefit programs	11	
12	Excess exempt expenses (Part VIII)	12	
13	Excess readership costs (Part IX)	13	
14	Other deductions (attach statement)	14	
15	Total deductions. Add lines 1 through 14	15	0.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,		
	column (C)	16	-9,062.
17	Deduction for net operating loss. See instructions	17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16	18	-9,062.

LHA For Paperwork Reduction Act Notice, see instructions.

$D \sim \sim \sim$	
raue	

Part	III Cost of Goods Sold Enter meth	od of inventory valuation	on 🕨		Page Z
1	Inventory at beginning of year			1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h	ere and in Part I, line 2		8	
9	Do the rules of section 263A (with respect to property p				Yes No
Part					
1	Description of property (property street address, city, st	ate, ZIP code). Check i	f a dual-use. See instr	uctions.	
	A				
	B				
	C				
		A	В	С	
2	Rent received or accrued	A	В		<u> </u>
a	From personal property (if the percentage of				
u	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns A	through D. Enter here a	and on Part I, line 6, co	olumn (A)	0.
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
					0
5 Part	Total deductions. Add line 4 columns A through D. Ent V Unrelated Debt-Financed Income (se	er here and on Part I, I	ine 6, column (B)		0.
1	Description of debt-financed property (street address, ci	,	and if a dual upa. San	inatruations	
'	A S	ity, state, ZIP code). Gr	ieck ii a duai-use. See	instructions.	
	В —				
	c \square				
	D				
		Α	В	С	
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	<u>%</u>
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D).	Enter here and on Part	t I, line /, column (A)	>	0.
0	Allegable deductions Multiply line Cale Visa C	Т	Т		
9 10	Allocable deductions. Multiply line 3c by line 6 Total allocable deductions. Add line 9, columns A thro	yugh D. Enter here and	on Part Lling 7	an (R)	0.
10 11	Total dividends-received deductions included in line				0.
<u></u>					

	lle A (Form 990-T) 2021					1						Page 3
Part	VI Interest, Annu	uities, R	oyalties, and Re	ents fror	n Control	led Or	ganizations	S (s	ee instruct	ions)		
						E	Exempt Contro	lled O	ganization	ıs		
	1. Name of controlle	ed	2. Employer	3. Net	unrelated	4. Tota	al of specified		art of colu		6. D	eductions directly
	organization		identification	incor	ne (loss)	payn	nents made		s included rolling orga		(connected with
			number	(see ins	structions)				s gross inc		inc	come in column 5
(1)												
(2)												
(3)												
(4)												
			No	nexempt (Controlled O	ganizati	ions					
7	. Taxable Income	8.	Net unrelated	T .	otal of specif		10. Part	of colu	ımn 9	11.	Dec	luctions directly
		ir	ncome (loss)	pa	yments mad	е	that is inc				con	nected with
		(se	e instructions)				controlling	organı incon		in	com	e in column 10
(1)				1			9.500					
(2)				1								
(3)												
(4)												
,							Add colum	ne 5 a	and 10	Δα	d co	umns 6 and 11.
							Enter here					ere and on Part I,
							line 8, d	columr	n (A)		line a	3, column (B)
Totals						_			0.			0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (9). or (17)	Organ	nization (s	oo ine	tructions)	l		
		cription of		. (=)(.), (2. Amou		3. Deduction			asides	Ę	i. Total deductions
	1, 500	onpuon or	ii loomo		incon		directly conn		(attach st			and set-asides
							(attach state		`		´	(add cols 3 and 4)
(1)											_	
(2)											\dashv	
(3)											_	
(4)											_	
(")					Add amou	unts in						Add amounts in
					column 2							column 5. Enter
					here and o							here and on Part I,
Tatala					line 9, colu	(A) חוווו 0 .						line 9, column (B)
Totals Part	VIII Exploited E	vomnt /	Activity Income	Other 7	Than Adve	•	a Incomo	/ ·	- 4 4			
				, Other	Illali Auve	ı uəni	g income	(see in	structions)			
1	Description of exploite	•		5		- D11		- (A)				
2	Gross unrelated busin						•	٠,		2		
3	Expenses directly con							,				
_	line 10, column (B)									3		
4	Net income (loss) from						• .					
	lines 5 through 7									4		
5	Gross income from ac									5		
6	Expenses attributable									6		
7	Excess exempt expen			s, but do n	ot enter mor	e than th	ne amount on I	ine				
	4. Enter here and on F	Part II. line	12							7		

_	
Page	

Part	IX Advertising Income					
1	Name(s) of periodical(s). Check box if reporting	ig two or r	nore periodicals on a c	onsolidated basis	S.	
	Α 🔲					
	В 💹					
	c					
	D					
Enter	amounts for each periodical listed above in the	correspon ז	ding column.			
		-	Α	В	С	D
2	Gross advertising income	· ·				
	Add columns A through D. Enter here and on	Part I, line	e 11, column (A)		>	0.
а		ſ				
3	Direct advertising costs by periodical	·-				
а	Add columns A through D. Enter here and on	Part I, line	e 11, column (B)		>	0.
	Advantage of the second of the					
4	Advertising gain (loss). Subtract line 3 from lin	ne				
	2. For any column in line 4 showing a gain,	,				
	complete lines 5 through 8. For any column ir line 4 showing a loss or zero, do not complete	I				
	lines 5 through 7, and enter zero on line 8	I				
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is less than					
-	line 5, subtract line 6 from line 5. If line 5 is les	ss				
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gain of	n				
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the gr	eater of th	ne line 8a, columns tot	al or zero here an	d on	
	Part II, line 13)	0.
Part	X Compensation of Officers, Dir	ectors,	and Trustees (Se	ee instructions)		
					3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
					to business	unrelated business
<u>(1)</u>					%	
(2)					%	
(3)					%	
(4)					%	
T-4-1	Fater have and an Dort II line 1					0
Part	XI Supplemental Information (se				>	0.
rait	Supplemental information (se	e instructi	ons)			

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 3
DESCRIPTION	NET INCOME OR (LOSS)
CLEVELAND FEDERATION PE I, LLC - ORDINARY BUSINESS INCOM (LOSS)	-9,062.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	-9,062.

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). 501(c)(3) Organizations Only Name of the organization B Employer identification number JEWISH FEDERATION OF CLEVELAND 34-0714445 D Sequence: Unrelated business activity code (see instructions) Describe the unrelated trade or business INCOME FROM PARTNERSHIPS Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances Cost of goods sold (Part III, line 8) 2 2 Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions 4a b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 4 -56,427. -56,427. Rent income (Part IV) 6 Unrelated debt-financed income (Part V) 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Exploited exempt activity income (Part VIII) 10 10 11 Advertising income (Part IX) 11 Other income (see instructions; attach statement) 12 12 13 -56,427. **Total.** Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income Compensation of officers, directors, and trustees (Part X) 2 2 Salaries and wages 3 Repairs and maintenance 4 4 Bad debts Interest (attach statement). See instructions 5 5 6 Taxes and licenses 6 Depreciation (attach Form 4562). See instructions 7 Less depreciation claimed in Part III and elsewhere on return 8b 8 9 Depletion _____ 9 10 Contributions to deferred compensation plans 10 Employee benefit programs 11 11 12 Excess exempt expenses (Part VIII) 12 Excess readership costs (Part IX) 13 13 Other deductions (attach statement) 14 14 0. Total deductions. Add lines 1 through 14 15 15 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, 16

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2021

-56,427.

16

17

18

column (C)

Deduction for net operating loss. See instructions

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กรด	\sim

Part	III Cost of Goods Sold Enter met	hod of inventory valua	ation •		rago <u>z</u>
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter	here and in Part I, line	2	8	
9	Do the rules of section 263A (with respect to property	produced or acquired	for resale) apply to the	organization?	Yes No
Part	IV Rent Income (From Real Property and	d Personal Prope	rty Leased with F	Real Property)	
1	Description of property (property street address, city, s	state, ZIP code). Chec	k if a dual-use. See ins	tructions.	
	A				
	В 🔲				
	c 🗆				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns A	through D. Enter her	e and on Part I, line 6,	column (A)	0.
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through D. Er	nter here and on Part I	, line 6, column (B)	>	0.
Part	V Unrelated Debt-Financed Income (s	ee instructions)			
1	Description of debt-financed property (street address,	city, state, ZIP code).	Check if a dual-use. Se	e instructions.	
	A				
	В				
	c				
	D		_		
		A	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	9	6 %	6 %	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D		art I, line 7, column (A)	>	0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A th	rough D. Enter here ar	nd on Part I, line 7, colu	umn (B)	0.
11	Total dividends-received deductions included in line				0.

Schedule A (Form 990-T) 2021 Page:

Part	VI Interest, Annu	uities, R	oyalties, and Re	ents fror	n Control	led Or	ganization	S (see	instruct	ions)	Page 3
		-					Exempt Contro	`			
	Name of controlled organization		identification ind				al of specified nents made 5. Part of col that is include controlling or tion's gross in		of colur ncluded ling orga	nn 4 in the iniza-	Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
<u>(4)</u>											
		1	No	nexempt C	Controlled O	rganizati	1				
7	. Taxable Income	ir	Net unrelated ncome (loss) e instructions)		otal of specif syments mad		that is inc controlling gross	cluded in	the	С	Deductions directly onnected with one in column 10
(1)											
(2)											
(3)											
(4)											
							Add colum Enter here line 8, c		Part I,	Enter	columns 6 and 11. here and on Part I, le 8, column (B)
Totals						•			0.		0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orgai	nization (s	ee instru	ctions)		
		cription of			2. Amou incor	nt of	3. Deduction directly connumber (attach states	ected (a	4. Setattach st	asides atement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)					Add amag	ınto in					Add amounts in
Totals				_	Add amor column 2 here and o line 9, colu	. Enter n Part I,					Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Part	VIII Exploited F	xempt /	Activity Income	Other 1	⊥ Γhan Adve		g Income	see instr	ructions)		0.
1	Description of exploite			, 3			geee	OCC IIIOLI	dollor13)		
2	Gross unrelated busin	,		ness. Ente	r here and o	n Part I.	line 10. colum	n (A)		2	
3	Expenses directly con					,	,	٠,			
	line 10, column (B)		•					,		3	
4	Net income (loss) from										
	lines 5 through 7									4	
5	Gross income from ac	tivity that	is not unrelated bus	iness incor	me					5	
6	Expenses attributable									6	
7	Excess exempt expen										
	4. Enter here and on F	Part II. line	12							7	

Sched	ule A (Form 990-T) 2021				Page 4
1	Name(s) of periodical(s). Check box if reportir	ng two or more periodicals on a	consolidated basis	S.	
	A				
	В 💹				
	c				
	D				
Enter	amounts for each periodical listed above in the	corresponding column.	T	1	
		A	В	С	D
2	Gross advertising income				
	Add columns A through D. Enter here and on	Part I, line 11, column (A)		>	0.
а					
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on	Part I, line 11, column (B)		>	0.
4	Advertising gain (loss). Subtract line 3 from line	ne			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in	n			
	line 4 showing a loss or zero, do not complete	e			
	lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is le	ss			
	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain of	on			
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the g	reater of the line 8a, columns to	tal or zero here and	d on	
	Part II, line 13			>	0.
Part	X Compensation of Officers, Di	rectors, and Trustees $_{(S)}$	ee instructions)		
				3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
				to business	unrelated business
<u>(1)</u>				%	
(2)				%	
(3)				%	
(4)				%	
	. Enter here and on Part II, line 1				0.
Part	XI Supplemental Information (se	ee instructions)			

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 4
DESCRIPTION	NET INCOME OR (LOSS)
INVESTMENTS - ORDINARY BUSINESS INCOME (LOSS)	-56,427.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	-56,427.

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

0004

2021

OMB No. 1545-0047

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Name of the organization

JEWISH FEDERATION OF CLEVELAND

B Employer identification number

34-0714445

C Unrelated business activity code (see instructions)
901101

D Sequence: 3 of 3

Pai	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)). See instructions	4a	1,089,539.		1,089,539.
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement) STATEMENT 5	5	112,882.		112,882.
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)	10			
11	Advertising income (Part IX)	11			
12	Other income (see instructions; attach statement)	12			
13	Total. Combine lines 3 through 12	13	1,202,421.		1,202,421.

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)		1	
2	Salaries and wages		1,500.	
3	Repairs and maintenance			
4	Bad debts			
5	Interest (attach statement). See instructions			
6	Taxes and licenses			
7	Depreciation (attach Form 4562). See instructions			
8	Less depreciation claimed in Part III and elsewhere on return	8a	8b	
9	Depletion		9	
10				
11	Employee benefit programs		11	
12	Excess exempt expenses (Part VIII)			
13	Excess readership costs (Part IX)		13	
14	Other deductions (attach statement)	SEE STATEMENT 6	14	3,000.
15	Total deductions. Add lines 1 through 14		15	4,500.
16	Unrelated business income before net operating loss deduction. Subtract	line 15 from Part I, line 13,		
	column (C)		16	1,197,921.
17	Deduction for net operating loss. See instructions		17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16			1,197,921.
1114	For Denominant Deduction Act Notice and instructions		Calaaduda A	(Farma 000 T) 0004

LHA For Paperwork Reduction Act Notice, see instructions.

	3 Page 2
Yes	No
D	
	0.
D	
	%
	70

Part	III Cost of Goods Sold Enter me	thod of inventory valua	tion		
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter	here and in Part I, line	2	8	
9	Do the rules of section 263A (with respect to property				Yes No
Part	` ' '	•			
1	Description of property (property street address, city,	state, ZIP code). Checl	cif a dual-use. See instr	uctions.	
	A				
	В				
	c				
	D	Т	1		
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns and Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	A through D. Enter here	e and on Part I, line 6, c	olumn (A)	0.
_				_	0
5 Part \	Total deductions. Add line 4 columns A through D. E V Unrelated Debt-Financed Income	nter here and on Part I	, line 6, column (B)		0.
1	Description of debt-financed property (street address,	•	Chook if a dual usa. Soc	instructions	
•	A Street address,	city, state, Zir codej. (Sileck ii a duaruse. See	HISHUCHOHS.	
	В —				
	c –				
		Α	В	С	
2	Gross income from or allocable to debt-financed				
_					
3	Deductions directly connected with or allocable				
•	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b,				
_	columns A through D)				
4	Amount of average acquisition debt on or allocable				
•	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
•	financed property (attach statement)				
6	Divide line 4 by line 5		Ś %	%	%
7	Gross income reportable. Multiply line 2 by line 6		70	70	70
8	Total gross income (add line 7, columns A through D		art I line 7 column (A)	•	0.
•	. Jam. grood moonie (add into 1, columns A timough b	,. Lines field and off Fe	,o 7, coluitiii (A)	/	
9	Allocable deductions. Multiply line 3c by line 6				_
10	Total allocable deductions. Add line 9, columns A th	rough D. Enter here an	id on Part I, line 7. colui	mn (B)	0.
	Total dividends-received deductions included in line				0.

Schedule A (Form 990-T) 2021 Page

Part	VI Interest, Annu	uities, R	oyalties, and Re	ents fror	n Control	led Or	ganization	s (see ins	structions)		Page 3
		Exempt Controlled Organizations									
	Name of controlled organization (1)		2. Employer identification number 3. Net unrelate income (loss) (see instruction		ne (loss)	4. Total of specified payments made		5. Part of column 4 that is included in the controlling organization's gross income		e connected with	
(1)											
(2)										\perp	
(3)										┷	
<u>(4)</u>										Ш	
	 			1	Controlled O						
1	7. Taxable Income	ir	Net unrelated acome (loss) e instructions)		otal of specif yments mad		that is inc	of column 9 cluded in the organization income	e n's	СО	eductions directly onnected with me in column 10
(1)											
(2)											
(3)											_
(4)											
							Enter here	nns 5 and 10 and on Part column (A)		nter h	olumns 6 and 11. nere and on Part I, e 8, column (B)
Totals						•			0.		0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orga	nization (s	ee instruction	ons)		
	1. Desc	cription of	income		2. Amou incor		3. Deduction directly connumber (attach states	ected (atta	. Set-aside		5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)					Add amou	ınte in					Add amounts in
					column 2 here and o line 9, colu	. Enter n Part I,					column 5. Enter here and on Part I, line 9, column (B)
Totals				•	11110 0, 0010	0.					0.
Part		xempt A	ctivity Income	, Other 1	han Adve	ertising	gIncome	see instruct	ions)		
1	Description of exploite			•		`				\top	
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)	2		
3	Expenses directly con	nected wit	h production of unr	elated busi	iness income	e. Enter l	here and on Pa	art I,			
	line 10, column (B)								3	\perp	
4	Net income (loss) from										
	lines 5 through 7								4	┷	
5	Gross income from ac	tivity that	s not unrelated bus	iness incor	me				5	\bot	
6	Expenses attributable								6	+	
7	Excess exempt expen			6, but do no	ot enter mor	e than th	ne amount on I	ine			
	4. Enter here and on F	Part II. line	12						7	1	

Part	IX	Advertising Income				
1	Name	e(s) of periodical(s). Check box if reporting	two or more periodicals on a	consolidated basis.		
	Α 🗌					
	в					
	с□					
	D					
Enter a	mount	s for each periodical listed above in the co	orresponding column.			
		·	Α	В	С	D
2	Gross	s advertising income				
		columns A through D. Enter here and on P		•	•	0.
а		ŭ	, , , , , , , , , , , , , , , , , , , ,			
3	Direct	t advertising costs by periodical				
а		columns A through D. Enter here and on P	Part I, line 11, column (B)		•	0.
4	Adver	rtising gain (loss). Subtract line 3 from line				
	2. For	r any column in line 4 showing a gain,				
	comp	elete lines 5 through 8. For any column in				
	line 4	showing a loss or zero, do not complete				
	lines 5	5 through 7, and enter zero on line 8				
5	Reade	ership costs				
6	Circul	lation income				
7	Exces	ss readership costs. If line 6 is less than				
	line 5	, subtract line 6 from line 5. If line 5 is less	3			
	than I	line 6, enter zero				
8	Exces	ss readership costs allowed as a				
		ction. For each column showing a gain on	I			
		, enter the lesser of line 4 or line 7	· · · · · · · · · · · · · · · · · · ·			
а	Add li	ine 8, columns A through D. Enter the grea	ater of the line 8a, columns to	tal or zero here and o	n	
	Part I	I, line 13	······································		>	0.
Dort	V	Componentian of Officers Dire				
Part	X	Compensation of Officers, Dire	ectors, and Trustees (s	ee instructions)	•	1.0
Part	X				3. Percentage	4. Compensation
Part	X	1. Name	ectors, and Trustees (s		of time devoted	attributable to
	X				of time devoted to business	
1)	X				of time devoted to business %	attributable to
1)	X				of time devoted to business % %	attributable to
1) 2) 3)	X				of time devoted to business % % %	attributable to
1) 2) 3)	X				of time devoted to business % %	attributable to
1) 2) 3) 4)		1. Name			of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to
1) 2) 3) 4) Total	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business
(1) (2) (3) (4)	. Enter	1. Name	2. Title		of time devoted to business % % %	attributable to unrelated business

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 5
DESCRIPTION	NET INCOME OR (LOSS)
M MAGAZINE LTD - ORDINARY BUSINESS INCOME (LOSS)	-1,202.
TOWNSEND REAL ESTATE FUND LP - NET RENTAL REAL ESTATE	
INCOME	505.
TOWNSEND REAL ESTATE ALPHA FUND III LP - ORDINARY BUSINESS	
INCOME (LOSS)	-744.
TOWNSEND REAL ESTATE ALPHA FUND III LP - NET RENTAL REAL	
ESTATE INCOME	5,188.
TOWNSEND REAL ESTATE ALPHA FUND III LP - INTEREST INCOME	39.
TOWNSEND REAL ESTATE ALPHA FUND III LP - OTHER INCOME (LOSS)	9.
VARDE INVESTMENT PARTNERS LP - ORDINARY BUSINESS INCOME	۶.
(LOSS)	-20,409.
VARDE INVESTMENT PARTNERS LP - NET RENTAL REAL ESTATE	,
INCOME	-143.
VARDE INVESTMENT PARTNERS LP - INTEREST INCOME	73,135.
VARDE INVESTMENT PARTNERS LP - DIVIDEND INCOME	15,309.
VARDE INVESTMENT PARTNERS LP - ROYALTIES	311.
VARDE INVESTMENT PARTNERS LP - OTHER INCOME (LOSS)	44,542.
DARLINGTON PARTNERS LP - DIVIDEND INCOME	-3,502.
THE INN OF CHAGRIN FALLS LMTD. PTNR - ORDINARY BUSINESS	
INCOME (LOSS)	1,124.
BROOKFIELD STRATEGIC REAL ESTATE PARTNERS II B, LP -	
ORDINARY BUSINESS INCOM	-1,279.
BROOKFIELD STRATEGIC REAL ESTATE PARTNERS II B, LP - OTHER	
INCOME (LOSS)	-1.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	112,882.

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 6
DESCRIPTION		AMOUNT
ACCOUNTING FEES		3,000.
TOTAL TO SCHEDULE A, PART	II, LINE 14	3,000.

SCHEDULE D (Form 1120)

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Employer identification number

JEWISH FEDERATION OF CLEVEL	AND			34-	0714445
Did the corporation dispose of any investment of "Yes," attach Form 8949 and see its instruction.					► Yes X No
Part I Short-Term Capital Gai	-				
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part I, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on Form(s) 8949 with Box A checked					
Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on					
Form(s) 8949 with Box C checked					50,290.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 37		•	4	
5 Short-term capital gain or (loss) from like-kind				5	
6 Unused capital loss carryover (attach computa				6	()
7 Net short-term capital gain or (loss). Combine Part II Long-Term Capital Gain				7	50,290.
Part II Long-Term Capital Gai	ns and Losses - Asse	ets Held More Tha	n One Year		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked 9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					1,001,084.
11 Enter gain from Form 4797, line 7 or 9				11	38,165.
12 Long-term capital gain from installment sales	from Form 6252 line 26 or 37			12	,
13 Long-term capital gain or (loss) from like-kind				13	
4.4. One that each add add to at a con-				14	
15 Net long-term capital gain or (loss). Combine				15	1,039,249.
Part III Summary of Parts I and					· · ·
16 Enter excess of net short-term capital gain (lir		loss (line 15)		16	50,290.
17 Net capital gain. Enter excess of net long-term				17	1,039,249.
18 Add lines 16 and 17. Enter here and on Form				18	1,089,539.
Note: If losses exceed gains, see Capital Los					
•					

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2021

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. OMB No. 1545-0074

Name(s) shown on return

Social security number or taxpayer identification no.

34-0714445

JEWISH FEDERATION OF CLEVELAND Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your

broker and may even tell you which box to check. Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term Part I transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box.

If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (C) Short-term transactions no	ot reported to you	u on Form 1099-E	3				
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	in column column (f	ot, if any, to gain or ou enter an amount (g), enter a code in b. See instructions. (g) Amount of	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
				the instructions	0000(0)	adjustment	with Column (g)
VARDE INVESTMENT PARTNERS							50.000
LP							50,290.
2 Totals. Add the amounts in colur negative amounts). Enter each to Schedule D, line 1b (if Box A abo above is checked), or line 3 (if Box A)	tal here and incluove is checked),	ide on your line 2 (if Box B					50,290.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2021)

Form 8949 (2021) Attachment Sequence No. 12A

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or

• •			·	. •		taxpayer ide	ntification no.
JEWISH FEDERATION OF	CLEVELAND					34-0	714445
efore you check Box D, E, or F belo tatement will have the same informa roker and may even tell you which b	w, see whether y tion as Form 109 oox to check.	ou received any 99-B. Either will s	Form(s) 1099-B o show whether you	or substitute statem Ir basis (usually you	ent(s) from y r cost) was i	your broker. A sui reported to the IF	bstitute S by your
Part II Long-Term. Transaction see page 1. Note: You may aggregate all	ons involving capitations	ions reported on F	orm(s) 1099-B show	ing basis was reported	d to the IRS a	nd for which no adj	ustments or
codes are required. Enter the							
ou must check Box D, E, or F below. O you have more long-term transactions than will							each applicable box.
(D) Long-term transactions rep			-				
(E) Long-term transactions rep	orted on Form(s	,) 1099-B showing	g basis wasn't re	eported to the IRS		•	
X (F) Long-term transactions not	reported to you	on Form 1099-B	_				
(a)	(b)	(c)	(d)	(e)	Adjustment	, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other		enter an amount g), enter a code in	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the Note below and		See instructions.	Subtract column (e) from column (d) &
		(Mo., day, yr.)		see Column (e) in the instructions	(f) Code(s)	(g) Amount of adjustment	combine the result with column (g)
OWNSEND REAL ESTATE ALPHA						•	
UND III LP							-5,
ARDE INVESTMENT PARTNERS							
P							-14,585.
ARLINGTON PARTNERS LP							1,015,674.
Totals. Add the amounts in colun							
negative amounts). Enter each tot		-					
Schedule D, line 8b (if Box D abo							
above is checked), or line 10 (if B	Box F above is ch	necked)_		<u> </u>			1,001,084.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2021)

Form **4797**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

► Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Identifying number JEWISH FEDERATION OF CLEVELAND 34-0714445 1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (a) Description (b) Date acquired (C) Date sold (d) Gross sales basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) SEE STATEMENT 7 acquisition expense of sale Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 38 165. 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions 38,165. Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 14 14 Net gain or (loss) from Form 4684, lines 31 and 38a Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 Combine lines 10 through 16 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines 18 a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2021)

Part III Gain From Disposition of Propert	y Und	er Sections 1245, 125	0, 1252, 1	1254,	and 1255 (see	instructions)
19 (a) Description of section 1245, 1250, 1252, 1254, c	or 1255	property:			(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
_ A						
<u>B</u>						
<u>C</u>				_		
<u>D</u>						
These columns relate to the properties on						
lines 19A through 19D.	•	Property A P	Property B		Property C	Property D
20 Gross sales price (Note: See line 1a before completing.)	20					
21 Cost or other basis plus expense of sale	21					
22 Depreciation (or depletion) allowed or allowable	22			_		
23 Adjusted basis. Subtract line 22 from line 21	23					
24 Total gain. Subtract line 23 from line 20	24			-		
25 If section 1245 property:	05-					
a Depreciation allowed or allowable from line 22	25a 25b					
b Enter the smaller of line 24 or 25a	250					
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.						
a Additional depreciation after 1975. See instructions	26a			_		
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b					
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c					
d Additional depreciation after 1969 and before 1976	26d					
e Enter the smaller of line 26c or 26d	26e					
f Section 291 amount (corporations only)	26f					
g Add lines 26b, 26e, and 26f 7 If section 1252 property: Skip this section if you didn't	26g					
dispose of farmland or if this form is being completed for a partnership.	_					
a Soil, water, and land clearing expenses	27a					
b Line 27a multiplied by applicable percentage	27b					
c Enter the smaller of line 24 or 27b 28 If section 1254 property:	27c					
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a					
b Enter the smaller of line 24 or 28a	28b					
 29 If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instructions 	29a					
b Enter the smaller of line 24 or 29a. See instructions	29b					
Summary of Part III Gains. Complete property c	olumns	A through D through line 291	b before goi	ina to	line 30.	
						T
30 Total gains for all properties. Add property columns	A throu	igh D, line 24			30	
31 Add property columns A through D, lines 25b, 26g,	,	•			31	
32 Subtract line 31 from line 30. Enter the portion from		ry or theft on Form 4684, line	33. Enter th	he por		
from other than casualty or theft on Form 4797, line Part IV Recapture Amounts Under Sectio	6	9 and 280F(h)(2) When	Rusines	e He	32 • Drops to 50%	orless
(see instructions)	113 17	o and 2001 (b)(2) When	Dusines	3 03	e Drops to 50%	OI LC33
(See instructions)					(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allo	wahla ir	nrior vears	٦	33		
24 D		i prior years		34		
35 Recapture amount. Subtract line 34 from line 33. Se				35		

FORM 4797	PRO	PERTY HELD	MORE THAN	ONE YEAR	ST	ATEMENT 7
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
TOWNSEND REAL ESTATE FUND LP TOWNSEND REAL						17,671.
ESTATE ALPHA FUND III LP THE INN OF						21,095.
CHAGRIN FALLS LMTD. PTNR						-601.
TOTAL TO 4797, PA	RT I, LINE	2				38,165.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

➤ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
☐ Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2021

Name Employer identification number

JEWISH FEDERATION OF CLEVELAND 34-0714445 Yes X No Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts (h) Gain or (loss) (g) Adjustments to gain (d) (e) to enter on the lines below. Subtract column (e) from or loss from Form(s) 8949, Proceeds Cost column (d) and combine the This form may be easier to complete if you round off cents to whole dollars. (or other basis) Part I, line 2, column (g) (sales price) result with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 2 Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on 50,290. Form(s) 8949 with Box C checked 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 6 Unused capital loss carryover (attach computation) 6 50 290. 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h 7 Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II See instructions for how to figure the amounts (h) Gain or (loss) (g) Adjustments to gain to enter on the lines below. Subtract column (e) from Proceeds Cost or loss from Form(s) 8949, column (d) and combine the This form may be easier to complete if you (sales price) (or other basis) Part II, line 2, column (g) result with column (a) round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on 1,001,084. Form(s) 8949 with Box F checked 38,165. 11 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 14 Capital gain distributions 14 1,039,249. 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 15 Part III Summary of Parts I and II 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 50,290. 16 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 1,039,249. 1,089,539, 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Note: If losses exceed gains, see Capital Losses in the instructions.

Schedule D (Form 1120) 2021

LHA

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information. ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. OMB No. 1545-0074

Name(s) shown on return

Social security number or taxpayer identification no.

34 - 0714445

JEWISH FEDERATION OF CLEVELAND

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box.

you h	have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box che	cked as you need.
	(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see	Note above)
	(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS	
X	(C) Short-term transactions not reported to you on Form 1099-B	

(B) Short-term transactions re X (C) Short-term transactions n				eported to the IRS			
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	loss. If you	nt, if any, to gain or ou enter an amount (g), enter a code in . See instructions. (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
VARDE INVESTMENT PARTNERS						•	
LP							50,290.
-							
				+			
				+			
				+			
				+			
				+			
				+			
				+			
				+			
				1			
2 Totals. Add the amounts in colu	ımns (d), (e), (g), a	nd (h) (subtract					
negative amounts). Enter each to	otal here and inclu	ude on your					
Schedule D, line 1b (if Box A ab	ove is checked),	line 2 (if Box B					
above is checked), or line 3 (if I	Box C above is ch	necked)					50,290.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2021)

Form 8949 (2021) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

						taxpayer ide	ntification no.
JEWISH FEDERATION OF	CLEVELAND					34-0	714445
Before you check Box D, E, or F bek statement will have the same inform broker and may even tell you which i	ow, see whether ation as Form 105	you received any 99-B. Either will s	Form(s) 1099-B c show whether you	or substitute statem r basis (usually you	ent(s) from ye r cost) was re	our broker. A sui eported to the IF	bstitute S by your
Part II Long-Term. Transacti		al assets you held r	nore than 1 year are	generally long-term (s	ee instructions	s). For short-term to	ansactions,
see page 1. Note: You may aggregate all codes are required. Enter the							
You must check Box D, E, or F below. (If you have more long-term transactions than will							each applicable box.
(D) Long-term transactions re	• =		· · ·				
(E) Long-term transactions rep	•	•	•	•	note above	٥,	
X (F) Long-term transactions no	,	,	9				
1 (a)	(b)	(c)	(d)	(e)	Adjustment,	if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other	loss. If you	enter an amount	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the), enter a code in See instructions.	Subtract column (e)
		(Mo., day, yr.)		Note below and see Column (e) in	/f\	(g)	from column (d) & combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
TOWNSEND REAL ESTATE ALPHA						adjustificiti	,-,
FUND III LP							<5.>
VARDE INVESTMENT PARTNERS							-
 LP							<14,585.>
DARLINGTON PARTNERS LP							1,015,674.
2 Totals. Add the amounts in colu	mne (d) (a) (a) a	nd (h) (subtrast					
negative amounts). Enter each to		. , .					
Schedule D, line 8b (if Box D ab		•					
above is checked), or line 10 (if I	**	•					1,001,084.
above is directioned), or line 10 (II I	A I ADUVE 13 U	ioonouj		1			=, = , •

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2021)

Form **4797**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

► Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Attachment -

Identifying number

JEWISH FEDERATION OF CLEVELAND 34-0714445 1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (a) Description (b) Date acquired (C) Date sold (d) Gross sales basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) SEE STATEMENT 8 acquisition expense of sale Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 38 165. 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions 38,165. Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 14 14 Net gain or (loss) from Form 4684, lines 31 and 38a Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 17 Combine lines 10 through 16 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines 18 a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2021)

Part III Gain From Disposition of Propert	ty Unde	er Sections 1245,	1250, 1252	, 125	5 4, and 1255 (s	ee instruction	ıs)
19 (a) Description of section 1245, 1250, 1252, 1254, o	or 1255 p	property:			(b) Date acquired (mo., day, yr.)		ate sold day, yr.)
Α							
В							
С							
D							
These columns relate to the properties on lines 19A through 19D.	•	Property A	Property I	В	Property C	Prop	perty D
20 Gross sales price (Note: See line 1a before completing.)	20						
Cost or other basis plus expense of sale	21						
Depreciation (or depletion) allowed or allowable	22						
Adjusted basis. Subtract line 22 from line 21	23						
24 Total gain. Subtract line 23 from line 20	24						
25 If section 1245 property:							
a Depreciation allowed or allowable from line 22	25a						
b Enter the smaller of line 24 or 25a	25b						
If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
a Additional depreciation after 1975. See instructions	26a						
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d Additional depreciation after 1969 and before 1976	26d						
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f	+					
g Add lines 26b, 26e, and 26f If section 1252 property: Skip this section if you didn't	26g						
dispose of farmland or if this form is being completed for a partnership.							
a Soil, water, and land clearing expenses	27a						
b Line 27a multiplied by applicable percentage	27b						
c Enter the smaller of line 24 or 27b	27c						
28 If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b Enter the smaller of line 24 or 28a	28b						
 If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instructions 	29a						
b Enter the smaller of line 24 or 29a. See instructions	29b						
Summary of Part III Gains. Complete property of	ممسام	A through D through lin	as OOb bafara a	a o i o o	to line 20		
Sammary of Fart III Gamer Complete property C	Joidining	A through b through in	ie 29b belole (Julig	to line 30.		
Total gains for all properties. Add property columns	A throu	gh D, line 24			30	0	
Add property columns A through D, lines 25b, 26g,					3	1	
Subtract line 31 from line 30. Enter the portion from	•	y or theft on Form 4684	1, line 33. Ente	r the	·		
from other than casualty or theft on Form 4797, line Part IV Recapture Amounts Under Section	e 6 ons 179	and 280F(b)(2) W	/hen Busine	ess l	Use Drops to 50	2)% or Less	
(see instructions)					ı		
					(a) Section 179		ection (b)(2)
33 Section 179 expense deduction or depreciation allo	wable in	prior years		33			
Recomputed depreciation. See instructions				34			
35 Recapture amount. Subtract line 34 from line 33. Se	ee the ins	structions for where to	report	35			

FORM 4797	PRO	PERTY HELI	MORE THAN	ONE YEAR	ST.	ATEMENT 8
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
TOWNSEND REAL ESTATE FUND LP TOWNSEND REAL						17,671.
ESTATE ALPHA FUND III LP THE INN OF)					21,095.
CHAGRIN FALLS LMTD. PTNR						-601.
TOTAL TO 4797, PA	RT I, LINE	2				38,165.

Return by a U.S. Transferor of Property to a Foreign Corporation ► Go to www.irs.gov/Form926 for instructions and the latest information.

-	<u> </u>
_	Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Part	U.S. Transferor Information (see instructions)			
Name	of transferor	Ide	entifying numbe	r (see instructions
JEW:	ISH FEDERATION OF CLEVELAND			
		3	4-0714445	
1	s the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?		Yes	X No
2	If the transferor was a corporation, complete questions 2a through 2d.			
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by			
1	five or fewer domestic corporations?		Yes	X No
b	Did the transferor remain in existence after the transfer?		X Yes	No
-	If not, list the controlling shareholder(s) and their identifying number(s).			
	Controlling shareholder	Identify	ying number	
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation	 1?	X Yes	☐ No
-	If not, list the name and employer identification number (EIN) of the parent corporation.			
	Name of parent corporation	EIN of par	ent corporation	on
d	Have basis adjustments under section 367(a)(4) been made?		Yes	X No
	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under	section 3	67),	
	complete questions 3a through 3d.			
а	List the name and EIN of the transferor's partnership.			
	Name of partnership	EIN of	partnership	
h	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		Yes	X No
			Yes	X No
	Is the partner disposing of its entire interest in the partnership? Is the partner disposing of an interest in a limited partnership that is regularly traded on an established		162	INU
			Yes	X No
Part	securities market? II Transferee Foreign Corporation Information (see instructions)		res	X No
		50 Ide	ntifying numbe	or if one
4	Name of transferee (foreign corporation)	oa ider	iurying numbe	ar, ⊪any
	RE OPPORTUNITIES OFFSHORE FUND, LTD	 		
	Address (including country) CONYERS TRUST COMPANY (CAYMAN) LTD., CRICKET SQUARE, HUTC	5b Refe	erence ID numi	ber
RAND	CAYMAN KY1-1111 CAYMAN ISLANDS	COOF1		
7	Country code of country of incorporation or organization			
CJ				
8	Foreign law characterization (see instructions)			
9	Is the transferee foreign corporation a controlled foreign corporation?		Yes	X No

Form 926 (Rev. 11-2018)			1 12 .	1	34-0/1	.4445 Page 2
	Regarding Tran	sfer of Property (see i	nstructio	ons)		
Section A - Cash Type of property	(a) Date of transfer	(b) Description of property		(c) arket value on of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	09/24/2021			6,000,000.		
10 Was cash the only pro	ainder of Part III and (X Yes No
Type of property	(a) Date of	n intangible property s (b) Description of	Fair ma	(c) arket value on	(d) Cost or other	(e) Gain recognized on
Stock and securities	transfer	property	date	of transfer	basis	transfer
Inventory						
Other property (not listed under another category)						
Property with built-in loss						
Totals						
recognition agreement 12 a Were any assets of a reforeign corporation? If "Yes," go to line 12th b Was the transferor a confine (including a branch the property of the continue to limple to the confine the property of the confine to limple the property of the continue to limple the property of the confine the transferee foreign confine the confine t	t was filed? foreign branch (included) co. domestic corporation at is a foreign disregation at 12c. If "No," skip transfer, was the doreoration? ne 12d. If "No," skip oss amount included asfer property describ	es subject to section 367(a) was ding a branch that is a foreign that transferred substantially arded entity) to a specified 10 lines 12c and 12d, and go to nestic corporation a U.S. shall in gross income as required the ped in section 367(d)(4)?	all of the a %-owned f line 13. reholder w	ed entity) transferred assets of a foreign be foreign corporation?	d to a	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	Property Subje	ect to Section 367(d)				
Type of property	(a) Date of transfer	(b) Description of property		(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
ισιαισ						

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		No.
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) ▶\$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
Sup	pplemental Part III Information Required To Be Reported (see instructions)		
	, , ,		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions)	_	
16 17	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) Indicate whether any transfer reported in Part III is subject to any of the following.	Yes	X No
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3)		X No
16 17 18 a b	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	=
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
16 17 18 a b c d 19 20 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

•	· ·	
Attach to your in	come tax return for the year of the transfer or distribution	n

OMB No. 1545-0026

Attachment Sequence No. **128**

Name of transferor		Identifying number (s	ee instructions
JEWISH FEDERATION OF CLEVELAND			
		34-0714445	
1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled	foreign corporation?	Yes	X No
2 If the transferor was a corporation, complete questions 2a through 2d.			
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (und	der section 368(c)) by		
five or fewer domestic corporations?		<u></u>	X No
b Did the transferor remain in existence after the transfer?		X Yes	No
If not, list the controlling shareholder(s) and their identifying number(s).			
Controlling shareholder	Ide	entifying number	
c If the transferor was a member of an affiliated group filing a consolidated return, wa If not, list the name and employer identification number (EIN) of the parent corporate		X Yes	No
Name of parent corporation	EIN of	parent corporation	
d Have basis adjustments under section 367(a)(4) been made?		Yes	X No
Trave basis adjustments under section our (a)(4) been made:		[163	
If the transferor was a partner in a partnership that was the actual transferor (but is	not treated as such under section	on 367).	
complete guestions 3a through 3d.		,	
a List the name and EIN of the transferor's partnership.			
· · · · · · · · · · · · · · · · · · ·			
Name of partnership	EII	N of partnership	
b Did the partner pick up its pro rata share of gain on the transfer of partnership asse	ets?	= :•• :	X No
		Yes	X No
d Is the partner disposing of an interest in a limited partnership that is regularly trade	d on an established		
securities market?		Yes	X No
Part II Transferee Foreign Corporation Information (see instructions)			
4 Name of transferee (foreign corporation)	5a	Identifying number,	if any
ELLIOTT INTERNATIONAL, LTD.			
6 Address (including country) /O MAPLES CORPORATE SERVICES LIMITED, PO BOX 309, UGLAND HOU	5b	Reference ID number	•
RAND CAYMAN KY1-1104 CAYMAN ISLANDS	EI	1	
7 Country code of country of incorporation or organization CJ			
8 Foreign law characterization (see instructions)			
9 Is the transferee foreign corporation a controlled foreign corporation?		Yes	X No
24531 04-01-21 LHA For Paperwork Reduction Act Notice, see separate instruction	ıs.	Form 926 (Rev	. 11-2018

2021.05080 JEWISH FEDERATION OF CLEV 34-07143

Part III Information		sfer of Property (see	instructions)	34 07.	14443 Page 2
Section A - Cash		(000	mon donorro,		
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	04/01/2022		1,500,000.		
	ainder of Part III and g	o to Part IV.	subject to section 36		X Yes No
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					
foreign corporation? If "Yes," go to line 12 b Was the transferor a continue to least of the transfered foreign corporation of the transferee foreign corporation of the transferred transferred transferred transferred transferred transferred transferrer tra	foreign branch (includ b. domestic corporation t nat is a foreign disregal line 12c. If "No," skip li transfer, was the dom rporation? line 12d. If "No," skip li loss amount included	that transferred substantiall rded entity) to a specified 1 nes 12c and 12d, and go to estic corporation a U.S. shall result and go to line 13. In gross income as required at in section 367(d)(4)?	areholder with respect to the	n branch	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	e Property Subje	ct to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length pric on date of transf		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					

та	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
h	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section	[103	140
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable	103	140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii)		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
	time thereafter, a platform contribution as defined in riegulations section 1.402 7 (5)(1):	103	140
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa:	rt IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) Indicate whether any transfer reported in Part III is subject to any of the following.		X No
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions)		X No X No
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	=
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
116 117 118 a b c d 119 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

Return by a U.S. Transferor of Property

to a Foreign Corporation

• Go to www.irs.gov/Form926 for instructions and the latest information.

► Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

Name of transferor		Identifying numbe	! (see instructions)
JEWISH FEDERATION OF CLEVELAND		lucining number	(See manuchons)
		34-0714445	
1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporat	ion?	Yes	X No
2 If the transferor was a corporation, complete questions 2a through 2d.			
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c	e)) by		
five or fewer domestic corporations?		Yes	X No
b Did the transferor remain in existence after the transfer?		X Yes	☐ No
If not, list the controlling shareholder(s) and their identifying number(s).			
Controlling shareholder	lde	ntifying number	
c If the transferor was a member of an affiliated group filing a consolidated return, was it the parent or If not, list the name and employer identification number (EIN) of the parent corporation.	orporation?	X Yes	□ No
Name of parent corporation	EIN of	parent corporati	on
d Have basis adjustments under section 367(a)(4) been made?		Yes	X No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as so	uch under sectio	on 367),	
complete questions 3a through 3d.			
a List the name and EIN of the transferor's partnership.			
Name of partnership	EII	N of partnership	
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		Yes	X No
In the continue of the continue of the continue to the continue of the continu		Yes	X No
c Is the partner disposing of its entire interest in the partnership?d Is the partner disposing of an interest in a limited partnership that is regularly traded on an establish		1es	NO
securities market?	ieu	Yes	X No
Part II Transferee Foreign Corporation Information (see instructions)		103	
4 Name of transferee (foreign corporation)	5а	Identifying numb	er, if any
ARROWSTREET ACWI ALPHA EXTENSION FUND III (CAYMAN) LTD.	98-	-1372053	
6 Address (including country) PO BOX 309, CAYMAN ISLANDS, UGLAND HOUSE	5b	Reference ID num	ber
GEORGE TOWN KY1-1104 CAYMAN ISLANDS			
7 Country code of country of incorporation or organization CJ			
8 Foreign law characterization (see instructions)			
9 Is the transferee foreign corporation a controlled foreign corporation?		Yes	X No

124531 04-01-21 LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 926 (Rev. 11-2018)				,	34-0/1	.4445 Page 2
	Regarding Tran	sfer of Property (see i	nstructio	ns)		
Section A - Cash Type of property	(a) Date of transfer	(b) Description of property		(c) rket value on of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	04/29/2022	property		14,000,000.	5.5.0	T GITO O
10 Was cash the only pro	ainder of Part III and (go to Part IV.				X Yes No
Type of property	(a) Date of	(b) Description of	Fair ma	(c) rket value on	(d) Cost or other	(e) Gain recognized on transfer
Stock and securities	transfer	property	date	of transfer	basis	transier
Inventory						
Other property (not listed under another category)						
Property with built-in loss						
Totals						
foreign corporation? If "Yes," go to line 12l b Was the transferor a c (including a branch th If "Yes," continue to li c Immediately after the transferee foreign corp If "Yes," continue to li d Enter the transferred	foreign branch (included) o. domestic corporation at is a foreign disregatine 12c. If "No," skip transfer, was the dorporation? ine 12d. If "No," skip loss amount included asfer property describ	that transferred substantially arded entity) to a specified 10 lines 12c and 12d, and go to nestic corporation a U.S. shalline 12d, and go to line 13. I in gross income as required the din section 367(d)(4)?	all of the a l%-owned fo line 13. reholder wit	ed entity) transferred ssets of a foreign broreign corporation? th respect to the	d to a	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	e Property Subje	ect to Section 367(d)				
Type of property	(a) Date of transfer	(b) Description of property		(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
TOTALS				<u> </u>		

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		No.
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) ▶\$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
Sup	pplemental Part III Information Required To Be Reported (see instructions)		
	, , ,		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions)	_	
16 17	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) Indicate whether any transfer reported in Part III is subject to any of the following.	Yes	X No
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3)		X No
16 17 18 a b	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	=
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
16 17 18 a b c d 19 20 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

Return by a U.S. Transferor of Property

to a Foreign Corporation

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► Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

Pa	rt I U.S. Transferor Information (see instructions)			
Nam	e of transferor	Ider	ntifying numbe	r (see instructions)
JΕ	WISH FEDERATION OF CLEVELAND			,
		34	-0714445	
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?		Yes	X No
2	If the transferor was a corporation, complete questions 2a through 2d.			
ŭ	five or fewer domestic corporations?		Yes	X No
b			X Yes	□ No
b	If not, list the controlling shareholder(s) and their identifying number(s).		162	NO
	in not, list the controlling shareholder(s) and their identifying humber(s).			
	Controlling shareholder	Identifyi	ng number	
			V V	
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation?	′	X Yes	No
	If not, list the name and employer identification number (EIN) of the parent corporation.			
	Name of parent corporation E	IN of pare	nt corporation	on
		-		
—				V
d	Have basis adjustments under section 367(a)(4) been made?		Yes	X No
_			→ \	
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under	section 36	7),	
	complete questions 3a through 3d.			
а	List the name and EIN of the transferor's partnership.			
	Name of partnership	EIN of p	artnership	
			-	
GT.	THE AND DEPENDANTON OF TAKES	7020		
	EVELAND FEDERATION PE II LLC 83-345			
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		Yes	X No
	Is the partner disposing of its entire interest in the partnership?		Yes	ĽX No
d	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established			₩
Da	securities market? rt II Transferee Foreign Corporation Information (see instructions)		Yes	X No
Pa				
4	Name of transferee (foreign corporation)	5a Ident	ifying numbe	er, if any
ъ.	COUNTRY MODGO I INTERD			
-BT	GCHANGE TOPCO LIMITED			
6	Address (including country)	5b Refer	ence ID numl	oer
	TE 1, 3RD FLOOR 11-12 ST. JAMES SQUARE	l		
	OON SW1Y 4LB UNITED KINGDOM	BCTL1		
7	Country code of country of incorporation or organization			
UK				
8	Foreign law characterization (see instructions)			
9	Is the transferee foreign corporation a controlled foreign corporation?		Yes	X No

Part III Information			instructions)	34 07.	Page 2
Section A - Cash		(000			
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash		, , ,	128,676.		
10 Was cash the only pro If "Yes," skip the rema	ainder of Part III and g	o to Part IV.	subject to section 36		X Yes No
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities		р.оролу		34010	1.01.10.01
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					
foreign corporation? If "Yes," go to line 12th b Was the transferor a complete (including a branch the lif "Yes," continue to little transferee foreign corporation of the lift "Yes," continue to little transferred lift "Yes," continue to lift "Y	foreign branch (includ	that transferred substantiall rded entity) to a specified 1 nes 12c and 12d, and go to estic corporation a U.S. should be specified 1. and go to line 13. in gross income as required in section 367(d)(4)?	areholder with respect to the	n branch	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	e Property Subje	ct to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length pric on date of transf		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					

та	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
h	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section	[103	140
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable	103	140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii)		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
	time thereafter, a platform contribution as defined in riegulations section 1.402 7 (5)(1):	103	140
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa:	rt IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) Indicate whether any transfer reported in Part III is subject to any of the following.		X No
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions)		X No X No
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	=
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
116 117 118 a b c d 119 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

Return by a U.S. Transferor of Property

to a Foreign Corporation

• Go to www.irs.gov/Form926 for instructions and the latest information.

Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

IME of transferor	Ide	entifying numbe	er (see instruction
VEWISH FEDERATION OF CLEVELAND	3	4-0714445	
Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation		Yes	X No
If the transferor was a corporation, complete questions 2a through 2d.			
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) b	ογ		
five or fewer domestic corporations?		Yes	X No
b Did the transferor remain in existence after the transfer?		X Yes	☐ No
If not, list the controlling shareholder(s) and their identifying number(s).			
Controlling shareholder	Identify	ring number	
If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corp	oration?	X Yes	N
If not, list the name and employer identification number (EIN) of the parent corporation.			
Name of parent corporation	EIN of por	ent corporati	ion
	EIN OI Par	ent corporati	loli
	EIN OI PAI	Yes	
	EIN OI PAI		
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such		Yes	
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d.		Yes	
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d.		Yes	
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such	n under section 36	Yes	
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. List the name and EIN of the transferor's partnership.	n under section 36	Yes 67),	
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. List the name and EIN of the transferor's partnership. Name of partnership	n under section 36	Yes 67),	
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC	EIN of	Yes 67),	X No
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC D Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	EIN of	Yes 67), partnership	X No
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? c Is the partner disposing of its entire interest in the partnership?	EIN of	Yes 67), partnership	X No
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? c Is the partner disposing of its entire interest in the partnership? d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market?	EIN of	Yes 67), partnership	X No
If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC Did the partner pick up its pro rata share of gain on the transfer of partnership assets? Is the partner disposing of its entire interest in the partnership? Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market?	EIN of	Yes 67), partnership Yes Yes	X No
Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC Did the partner pick up its pro rata share of gain on the transfer of partnership assets? Is the partner disposing of its entire interest in the partnership? Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market?	EIN of	Yes 67), partnership Yes Yes	X No X No X No
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC D Did the partner pick up its pro rata share of gain on the transfer of partnership assets? C Is the partner disposing of its entire interest in the partnership? d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? art II Transferee Foreign Corporation Information (see instructions) Name of transferee (foreign corporation)	EIN of	Yes 67), partnership Yes Yes Yes	X No
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? c Is the partner disposing of its entire interest in the partnership? d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? art II Transferee Foreign Corporation Information (see instructions) Name of transferee (foreign corporation) PMINSTER TOPCO LIMITED Address (including country)	EIN of 33-3457838	Yes 67), partnership Yes Yes Yes	X No X No X No x No
d Have basis adjustments under section 367(a)(4) been made? If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? c Is the partner disposing of its entire interest in the partnership? d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? art II Transferee Foreign Corporation Information (see instructions) Name of transferee (foreign corporation) PMINSTER TOPCO LIMITED Address (including country) RST FLOOR, TEMPLEBACK, 10 TEMPLEBACK	EIN of 33-3457838 5a Iden 5b Refe	Yes 67), partnership Yes Yes Yes tifying numb	X No X No X No x No
If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? c Is the partner disposing of its entire interest in the partnership? d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? art II Transferee Foreign Corporation Information (see instructions) Name of transferee (foreign corporation) PMINSTER TOPCO LIMITED Address (including country) RET FLOOR, TEMPLEBACK, 10 TEMPLEBACK ESTOL BS1 6FL UNITED KINGDOM	EIN of 33-3457838	Yes 67), partnership Yes Yes Yes tifying numb	X No X No X No x No
If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? c Is the partner disposing of its entire interest in the partnership? d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? art II Transferee Foreign Corporation Information (see instructions) Name of transferee (foreign corporation) PMINSTER TOPCO LIMITED Address (including country) RST FLOOR, TEMPLEBACK, 10 TEMPLEBACK	EIN of 33-3457838 5a Iden 5b Refe	Yes 67), partnership Yes Yes Yes tifying numb	X No X No X No x No
If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. Name of partnership LEVELAND FEDERATION PE II LLC Did the partner pick up its pro rata share of gain on the transfer of partnership assets? Is the partner disposing of its entire interest in the partnership? Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? Part II Transferee Foreign Corporation Information (see instructions) Name of transferee (foreign corporation) PMINSTER TOPCO LIMITED Address (including country) EST FLOOR, TEMPLEBACK, 10 TEMPLEBACK ESTOL BS1 6FL UNITED KINGDOM Country code of country of incorporation or organization	EIN of 33-3457838 5a Iden 5b Refe	Yes 67), partnership Yes Yes Yes tifying numb	X No X No X No x No

Part III Information		sfer of Property (see in	nstructio	nns)	34 071	Page Z
Section A - Cash		(000 11	noti dotic	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Type of property	(a) Date of transfer	(b) Description of property		(c) arket value on of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash				163,630.		
10 Was cash the only pro If "Yes," skip the rema	ainder of Part III and (go to Part IV. n intangible property s				Yes No
Type of	(a)	(b) Description of		(c)	(d)	(e)
property	Date of transfer	property		arket value on of transfer	Cost or other basis	Gain recognized on transfer
Stock and securities						
Inventory						
Other property (not listed under another category)						
Property with built-in loss						
Totals						
recognition agreement 12 a Were any assets of a f foreign corporation? If "Yes," go to line 12b b Was the transferor a d (including a branch tha If "Yes," continue to lin c Immediately after the t transferee foreign corp If "Yes," continue to lin d Enter the transferred lo	t was filed? foreign branch (included) foreign branch (included) foreign disregation at is a foreign disregation at 12c. If "No," skip transfer, was the donocration? foreign 12d. If "No," skip oss amount included sfer property describ	es subject to section 367(a) was subject to section 367(a) was ding a branch that is a foreign that transferred substantially arded entity) to a specified 100 lines 12c and 12d, and go to linestic corporation a U.S. shart line 12d, and go to line 13. In gross income as required used in section 367(d)(4)?	all of the a %-owned the 13.	ed entity) transferre assets of a foreign b foreign corporation? ith respect to the	d to a	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	Property Subje	ect to Section 367(d)				
Type of property	(a) Date of transfer	(b) Description of property		(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
Totals						

та	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
h	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section	[103	140
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable	103	140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii)		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
	time thereafter, a platform contribution as defined in riegulations section 1.402 7 (5)(1):	103	140
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa:	rt IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) Indicate whether any transfer reported in Part III is subject to any of the following.		X No
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions)		X No X No
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	=
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
116 117 118 a b c d 119 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation

Go to www.irs.gov/Form926 for instructions and the latest information.	Attachment _
► Attach to your income tax return for the year of the transfer or distribution.	Sequence No.

OMB No. 1545-0026

Sequence No. 128

Part I U.	S. Transferor Information (see instructions)			
Name of transfe	eror		Identifying nu	mber (see instructio
JEWISH FEI	DERATION OF CLEVELAND			
			34-07144	
	nsferee a specified 10%-owned foreign corporation that is not a controlled foreign corp	oration?	Ye	s 🗓 No
2 If the tran	nsferor was a corporation, complete questions 2a through 2d.			
a If the trar	nsfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 3	868(c)) by		
	wer domestic corporations?			s X No
b Did the tr	ransferor remain in existence after the transfer?		X Ye	s L No
If not, list	t the controlling shareholder(s) and their identifying number(s).			
	Controlling shareholder		Identifying numb	er
	nsferor was a member of an affiliated group filing a consolidated return, was it the pare t the name and employer identification number (EIN) of the parent corporation.	nt corporation?	Х Үе	s No
	Name of parent corporation	EII	N of parent corpo	ration
d Have bas	sis adjustments under section 367(a)(4) been made?		Ye	s X No
	nsferor was a partner in a partnership that was the actual transferor (but is not treated	as such under s	section 367),	
complete	e questions 3a through 3d.			
a List the n	name and EIN of the transferor's partnership.			
	Name of partnership		EIN of partnersh	nip
CLEVELAND	FEDERATION PE II LLC	83-3457	7838	
b Did the p	partner pick up its pro rata share of gain on the transfer of partnership assets?	•	Ye	s X No
	rtner disposing of its entire interest in the partnership?			s X No
•	rtner disposing of an interest in a limited partnership that is regularly traded on an esta			
-	s market?		Ye	s X No
Part II Tr	ansferee Foreign Corporation Information (see instructions)			
4 Name of	transferee (foreign corporation)		5a Identifying nu	mber, if any
AUVIK TOPO	CO HOLDINGS, INC			
	(including country) - 595 BURRARD STREET, PO BOX 49314		5b Reference ID r	number
VANCOUVER,	BC V7X 1L3 CANADA		ATH1	
7 Country of CA	code of country of incorporation or organization			
8 Foreign la	aw characterization (see instructions)			
9 Is the tra	nsferee foreign corporation a controlled foreign corporation?		Х Үе	
124531 04-01-21	LHA For Paperwork Reduction Act Notice, see separate instructions.		Form 92	26 (Rev. 11-20 ⁻

Part III Information			instructions)	34 07.	14443 Page 2
Section A - Cash		, , , , , , , ,	,		
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash			256,389.		
10 Was cash the only pro If "Yes," skip the rema	ainder of Part III and g	o to Part IV.	subject to section 36		X Yes No
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities		р.оролу			1.01.10.01
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					
foreign corporation? If "Yes," go to line 12th b Was the transferor a complete (including a branch the lif "Yes," continue to little transferee foreign corporation of the lift "Yes," continue to little transferred lift "Yes," continue to lift "Y	foreign branch (includi	that transferred substantially reded entity) to a specified 1 nes 12c and 12d, and go to estic corporation a U.S. should not be a specified 1 nes 12d, and go to line 13. In gross income as required at in section 367(d)(4)?	areholder with respect to the	n branch	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	e Property Subje	ct to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length pric on date of transf		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
17 4	reasonably anticipated to exceed 20 years?	Yes	No
h	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		140
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) \$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
	time thereafter, a platform contribution as defined in regulations section 1.402 7(0)(1):		110
Sup	pplemental Part III Information Required To Be Reported (see instructions)		
	, , , , , , , , , , , , , , , , ,		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After %		
17	Type of nonrecognition transaction (see instructions) ▶ IRC SEC 351A		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987		X No
19	Did this transfer result from a change in entity classification?		X No
20 a	51	Yes	X No
	If "Yes," complete lines 20b and 20c.		
b			
c	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	▶\$	
•	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) Did the domestic corporation not recognize gain or loss on the distribution of property because the	> \$	
	Did the domestic corporation not recognize gain or loss on the distribution of property because the		
21	Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?		☐ No
21	Did the domestic corporation not recognize gain or loss on the distribution of property because the		☐ No

Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB	No.	1545-0026

	rt U.S. Transferor Information (see instructions)	1				
	e of transferor WISH FEDERATION OF CLEVELAND	Ide	Identifying number (see instructions)			
01	WISH PERMITTON OF CHEVERAND	34	L-0714445			
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?		Yes	Х	No	
2	If the transferor was a corporation, complete questions 2a through 2d.		163		NO	
	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by					
u	five or fewer domestic corporations?		Yes	Х	No	
h	Did the transferor remain in existence after the transfer?		X Yes		No	
	If not, list the controlling shareholder(s) and their identifying number(s).		100	ш	110	
	Controlling shareholder	Identify	ing number			
			TT			
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation	?	X Yes	Ш	No	
	If not, list the name and employer identification number (EIN) of the parent corporation.					
	Name of parent corporation E	IN of pare	ent corporation	n		
d	Have basis adjustments under section 367(a)(4) been made?		Yes	Х	No	
	, , , , , , , , , , , , , , , , , , , ,					
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under	section 36	7),			
	complete questions 3a through 3d.					
а	List the name and EIN of the transferor's partnership.					
	Name of partnership	FIN of	partnership			
	Name of partiership	LING	oai tilei silip			
	WNSEND REAL ESTATE ALPHA FUND III, LP 81-313			77		
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		└── Yes	X	No	
C	Is the partner disposing of its entire interest in the partnership?		Yes	Х	No	
d	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established			Х	A1 -	
Pa	securities market? rt II Transferee Foreign Corporation Information (see instructions)		Yes	Λ	No	
4	Name of transferee (foreign corporation)	5a Idoni	ifying numbe	r if o	2)/	
-	Name of transferee (foreign corporation)	Ja luelli	inying numbe	i , 11 a1	ıy	
GR	AMERCY PROPERTY EUROPE IV TOWNSEND FEEDER LIMITED	98-147	4663			
6	Address (including country)		ence ID numb	oer		
	FLOOR, LIBERATION HOUSE, CASTLE STREET					
	HELIER JERSEY					
7	Country code of country of incorporation or organization					
JE						
8	Foreign law characterization (see instructions)					
9	Is the transferee foreign corporation a controlled foreign corporation?		Yes	X	No	

	Regarding Tran	sfer of Property (see	instructions)		r age z
Section A - Cash Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	transier	property	192,770.	Dasis	transici
10 Was cash the only pro	ainder of Part III and g				X Yes No
Section B - Other Pro	perty (other tha	n intangible property : (b)	subject to section 36	(d)	(e)
Type of property	Date of transfer	Description of property	Fair market value on date of transfer	Cost or other basis	Gain recognized on transfer
Stock and	transfer	property	date of trainerer	Sucio	transion
securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
(including a branch the If "Yes," continue to lie continue to lie transferee foreign corplif "Yes," continue to lie do Enter the transferred le Did the transferor tran If "No," skip Section Continue to Continue to Iii do Enter the transferred le III do I	foreign branch (included). domestic corporation at is a foreign disregane 12c. If "No," skip I transfer, was the domeoration? ne 12d. If "No," skip I oss amount included asfer property described and questions 14a to	that transferred substantially rded entity) to a specified 10 ines 12c and 12d, and go to nestic corporation a U.S. shamine 12d, and go to line 13. in gross income as required ed in section 367(d)(4)?	n disregarded entity) transferment of the assets of a foreign corporation of the line 13. The reholder with respect to the second of the line 14.	n branch on?	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	Property Subje	ct to Section 367(d)		1	
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length pri on date of trans		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		No.
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) >\$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa:	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ %		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions) > IRC SEC 351A		
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions) IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following.	Yes	X No
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions) \[\bullet \text{IRC SEC 351A} \] Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3)		=
16 17 18 a b	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions) \bigstar{\text{IRC}} SEC_351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F)	Yes	X No
16 17 18 a b	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions) ▶ IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d)	Yes Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions) \bigstar IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987	Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230% (b) After24.230% Type of nonrecognition transaction (see instructions) \[\bigstar{\text{IRC SEC 351A}} \] Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification?	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions) \bigstar IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification? Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 24.230 % (b) After 24.230 % Type of nonrecognition transaction (see instructions) ► IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification? Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c.	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions) ▶ IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification? Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions)	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
16 17 18 a b c d 19 20 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230% (b) After24.230% Type of nonrecognition transaction (see instructions) \(\bigcup \) IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987 Did this transfer result from a change in entity classification? Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before24.230_ % (b) After24.230_ % Type of nonrecognition transaction (see instructions)	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Part I U.S. Transferor In	formation (see instructions)							
Name of transferor						Identifying number (see instructions)		
JEWISH FEDERATION OF CLEV	ELAND		34-	-0714445				
1 Is the transferee a specified 1	0%-owned foreign corporation that is not a controlled foreign corpo	ration?	. [Yes	Х	No		
•	ation, complete questions 2a through 2d.							
•	61(a) or (b) transfer, was the transferor controlled (under section 36	8(c)) by						
five or fewer domestic corpora		,	[Yes	Х	No		
·	xistence after the transfer?			X Yes	一	No		
	eholder(s) and their identifying number(s).							
	Controlling shareholder		Identifyir	ng number				
a If the transferor was a member	ay of an affiliated group filing a consolidated rature, was it the payon	t corporation?	[X Yes		No		
	er of an affiliated group filing a consolidated return, was it the parent oyer identification number (EIN) of the parent corporation.	corporation?	l	_^_ res		NO		
	Name of parent corporation	Ell	N of parer	nt corporatio	on			
d Haya basis adiyatmanta unda	v costion 267(a)(4) been made?		-	Yes	х	No		
d Have basis adjustments unde	s Section 307(a)(4) been made?		l	res		NO		
3 If the transferor was a partner	in a partnership that was the actual transferor (but is not treated as	s such under s	ection 367	"),				
complete questions 3a throug	gh 3d.							
a List the name and EIN of the t	transferor's partnership.							
	Name of partnership		EIN of pa	artnership				
CLEVELAND FEDERATION PE I	I LLC	83-3457	838					
	o rata share of gain on the transfer of partnership assets?			Yes	Х	No		
			1	Yes	Х	No		
	entire interest in the partnership?			100	ш	110		
securities market?	microst in a infinited partitioning trial to regularly traded on air octable	ionod	[Yes	Х	No		
	n Corporation Information (see instructions)							
4 Name of transferee (foreign co			5a Identi	fying numbe	er, if a	ny		
ALTIUS HOLDCO PTY LTD (AL	TIUS)							
6 Address (including country) LEVEL 4, 507 KENT STREET,			5b Refere	ence ID numb	oer			
SYDNEY NSW 2000 AUSTRALIA			AHPL1					
7 Country code of country of inc	corporation or organization	L						
8 Foreign law characterization (s	see instructions)							
9 Is the transferee foreign corpo	oration a controlled foreign corporation?			X Yes		No		
124531 04-01-21 LHA For Paperw	ork Reduction Act Notice, see separate instructions.	<u></u>		Form 926 (F	Rev. 11	-2018)		

	Regarding Trans	sfer of Property (see i	nstructions)		М
Section A - Cash					
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash			345,558.		
10 Was cash the only pro If "Yes," skip the rema	inder of Part III and g				X Yes No
Section B - Other Pro Type of property	(a) Date of	(b) Description of	(c) Fair market value on	(d) Cost or other	(e) Gain recognized on
Stock and	transfer	property	date of transfer	basis	transfer
securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					
(including a branch that If "Yes," continue to linct Immediately after the transferee foreign corp. If "Yes," continue to linct Immediately after the transferred left.	oreign branch (includ on one or or or or or or or or or or or or or	that transferred substantially rded entity) to a specified 10 nes 12c and 12d, and go to estic corporation a U.S. shanne 12d, and go to line 13. in gross income as required ed in section 367(d)(4)?	al disregarded entity) transferments all of the assets of a foreign corporation line 13. reholder with respect to the disregarders.	erred to a [in branch on? [in branch]	YesNoYesNoYesNoYesNo
Section C - Intangible	Property Subje	ct to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life Arm's length pri on date of trans		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
17 4	reasonably anticipated to exceed 20 years?	Yes	No
h	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		140
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) \$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
	time thereafter, a platform contribution as defined in regulations section 1.402 7(0)(1):		110
Sup	pplemental Part III Information Required To Be Reported (see instructions)		
	, , , , , , , , , , , , , , , , ,		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After %		
17	Type of nonrecognition transaction (see instructions) ▶ IRC SEC 351A		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987		X No
19	Did this transfer result from a change in entity classification?		X No
20 a	51	Yes	X No
	If "Yes," complete lines 20b and 20c.		
b			
c	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	▶\$	
•	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) Did the domestic corporation not recognize gain or loss on the distribution of property because the	> \$	
	Did the domestic corporation not recognize gain or loss on the distribution of property because the		
21	Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?		☐ No
21	Did the domestic corporation not recognize gain or loss on the distribution of property because the		☐ No

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Name of transferor		Identify	ying numbe	r (see ins	structions
JEWISH FEDERATION OF CLEVELAND		34-0	714445		
Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation.	noration?	34-0	Yes	Х	No
2 If the transferor was a corporation, complete questions 2a through 2d.	poration:		103		110
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 361).	368(c)) by				
five or fewer domestic corporations?			Yes	X	No
b Did the transferor remain in existence after the transfer?		_	Yes	一	No
If not, list the controlling shareholder(s) and their identifying number(s).			_		
Controlling shareholder		Identifying	number		
c If the transferor was a member of an affiliated group filing a consolidated return, was it the par	ent corporation?	Гх	Yes		No
If not, list the name and employer identification number (EIN) of the parent corporation.	ent corporation?		1es		NO
Name of parent corporation	EI	N of parent	corporati	on	
d Have basis adjustments under section 367(a)(4) been made?		[Yes	X	No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not treated	as such under s	ection 367)			
complete questions 3a through 3d.	as such under s	ection 307),			
a List the name and EIN of the transferor's partnership.					
	<u> </u>				
Name of partnership		EIN of par	tnership		
CLEVELAND FEDERATION PE II LLC	83-3457	838			
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?			Yes	Х	No
c Is the partner disposing of its entire interest in the partnership?		_	Yes	X	No
d Is the partner disposing of an interest in a limited partnership that is regularly traded on an esta					
securities market?			Yes	X	No
Part II Transferee Foreign Corporation Information (see instructions)					
4 Name of transferee (foreign corporation)		5a Identify	ing numb	er, if a	.ny
AVANCE CLINICAL HOLDCO PTY LTD (AVANCE CLINICAL)					
6 Address (including country) EVEL 1, 2 ANN NELSON DRIVE		5b Referen	ce ID num	ber	
HEBARTON, SOUTH AUSTRALIA 5031 AUSTRALIA		ACHPL1			
7 Country code of country of incorporation or organization AS	1				
8 Foreign law characterization (see instructions)					
9 Is the transferee foreign corporation a controlled foreign corporation?		X	Yes		No
24531 04-01-21 LHA For Paperwork Reduction Act Notice, see separate instructions.	·		orm 926 (F		4 0046

Part III Information Regarding Transfer of Property (see instructions)							
Section A - Cash							
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer		
Cash			316,882.				
10 Was cash the only pro	ainder of Part III and g	o to Part IV.			X Yes No		
Section B - Other Pro	(a) Date of	n intangible property s (b) Description of	(c) Fair market value on	(d) Cost or other	(e) Gain recognized on		
property Stock and	transfer	property	date of transfer	basis	transfer		
securities							
Inventory							
Other property (not listed under another category)							
Property with built-in loss							
Totals							
12 a Were any assets of a f foreign corporation? If "Yes," go to line 12b b Was the transferor a d (including a branch the If "Yes," continue to line c Immediately after the transferee foreign corput If "Yes," continue to line d Enter the transferred let 13 Did the transferor trans If "No," skip Section Company of the Immediately after the Imme	foreign branch (included). John Strick of the street of t	_	all of the assets of a foreign %-owned foreign corporation line 13.	erred to a	Yes No Yes No Yes No Yes No Yes No		
Section C - Intangible	Property Subje	ct to Section 367(d)					
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length pri life on date of trans		(f) Income inclusion for year of transfer		
Property described in sec. 367(d)(4)							
Totals							

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
17 4	reasonably anticipated to exceed 20 years?	Yes	No
h	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		140
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) \$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
	time thereafter, a platform contribution as defined in regulations section 1.402 7(0)(1):		110
Sup	pplemental Part III Information Required To Be Reported (see instructions)		
	, , , , , , , , , , , , , , , , ,		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After %		
17	Type of nonrecognition transaction (see instructions) ▶ IRC SEC 351A		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987		X No
19	Did this transfer result from a change in entity classification?		X No
20 a	51	Yes	X No
	If "Yes," complete lines 20b and 20c.		
b			
c	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	▶\$	
•	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) Did the domestic corporation not recognize gain or loss on the distribution of property because the	> \$	
	Did the domestic corporation not recognize gain or loss on the distribution of property because the		
21	Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?		☐ No
21	Did the domestic corporation not recognize gain or loss on the distribution of property because the		☐ No

Return by a U.S. Transferor of Property

to a Foreign Corporation

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► Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

Name of transferor		Identifying number (see instructions
JEWISH FEDERATION OF CLEVELAND		
		34-0714445
1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation	poration?	Yes X No
2 If the transferor was a corporation, complete questions 2a through 2d.		
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section	368(c)) by	
five or fewer domestic corporations?		Yes X No
b Did the transferor remain in existence after the transfer?		X Yes No
If not, list the controlling shareholder(s) and their identifying number(s).		
Controlling shareholder		Identifying number
c If the transferor was a member of an affiliated group filing a consolidated return, was it the par If not, list the name and employer identification number (EIN) of the parent corporation.	ent corporation?	Yes No
Name of parent corporation	E	IN of parent corporation
d Have basis adjustments under section 367(a)(4) been made?		Yes X No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not treated	l as such under s	section 367),
complete questions 3a through 3d.		
a List the name and EIN of the transferor's partnership.		
Name of partnership		EIN of partnership
CLEVELAND FEDERATION PE II LLC	83-345	7939
		Yes X No
1 1 1		tes A NO
d Is the partner disposing of an interest in a limited partnership that is regularly traded on an est	ablished	Yes X No
Part II Transferee Foreign Corporation Information (see instructions)		Yes X No
Name of transferee (foreign corporation)		5a Identifying number, if any
4 Name of transferee (foreign corporation)		ou lucitarying number, it arry
SIMULATION SOFTWARE HOLDING GO PTY LTD (ENERGY EXEMPLAR)		
6 Address (including country) 17 BAGOT ST NORTH ADELAIDE,		5b Reference ID number
SOUTH AUSTRALIA 5006 AUSTRALIA		SSHGPL1
7 Country code of country of incorporation or organization AS		
8 Foreign law characterization (see instructions)		
9 Is the transferee foreign corporation a controlled foreign corporation?		X Yes No

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Part III Information			instructions)	34 07.	Page 2
Section A - Cash		(000	men denome,		
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash		, , ,	247,184.		
10 Was cash the only pro If "Yes," skip the rema	ainder of Part III and g	o to Part IV.	subject to section 36		X Yes No
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities		p. specify			
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					
foreign corporation? If "Yes," go to line 12th b Was the transferor a complete (including a branch the lif "Yes," continue to little transferee foreign corporation of the lift "Yes," continue to little transferred lift "Yes," continue to lift "Y	foreign branch (includi	that transferred substantially reded entity) to a specified 1 nes 12c and 12d, and go to estic corporation a U.S. should not be a specified 1 nes 12d, and go to line 13. In gross income as required at in section 367(d)(4)?	areholder with respect to the	n branch	YesNoYesNoYesNoYesNo
Section C - Intangible	e Property Subje	ct to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length prid on date of transf		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		No.
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable	····	
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) ▶\$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	☐ No
	•		
Sup	plemental Part III Information Required To Be Reported (see instructions)		
	•		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa 16	rt IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
16 17	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) > IRC SEC 351A		X No
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3)		X No X No
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	=
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

3

Part	U.S. Transferor Information (see instructions)						
Name	of transferor		Iden	tifyin	g numbe	r (see in	structions)
JEW:	ISH FEDERATION OF CLEVELAND						
			34	-071	L4445		1
	s the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corpor	ation?			Yes	Х	No
	If the transferor was a corporation, complete questions 2a through 2d.						
a l	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368	8(c)) by				_	,
	five or fewer domestic corporations?			Щ	Yes	X	No
b I	Did the transferor remain in existence after the transfer?			Х	Yes		No
- 1	If not, list the controlling shareholder(s) and their identifying number(s).						
	Controlling shareholder		Identifyii	ng n	umber		
				T T			1
	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent fort, list the name and employer identification number (EIN) of the parent corporation.	corporation?		X	Yes		No
	Name of parent corporation	EII	N of pare	nt co	rporati	on	
d	Have basis adjustments under section 367(a)(4) been made?				Yes	Х	No
	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as	such under se	ection 367	7),			
	complete questions 3a through 3d.						
a I	List the name and EIN of the transferor's partnership.						
	Name of partnership		EIN of p	artn	ership		
CLE	VELAND FEDERATION PE II LLC	83-3457	838				
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?				Yes	X	No
	Is the partner disposing of its entire interest in the partnership?			\Box	Yes	Х	No
	Is the partner disposing of an interest in a limited partnership that is regularly traded on an establi						
	securities market?				Yes	Х	No
Part				<u> </u>			, 110
4	Name of transferee (foreign corporation)		5a Identi	fying	g numb	er, if a	ny
HEA	LTHCARE OPERATIONS SOLUTIONS HOLDCO PTY LTD (SMARTWAYS)						
6 /	Address (including country)	;	5b Refere	ence	ID num	ber	
LEVEL	21, 101 COLLINS STREET						
MELBO	URNE VIC 3000 AUSTRALIA		HOSHPL1	L			
7 (Country code of country of incorporation or organization						
	Foreign law characterization (see instructions)						
9	Is the transferee foreign corporation a controlled foreign corporation?			X	Yes		No
	04-01-21 LHA For Paperwork Reduction Act Notice, see separate instructions.				n 926 (F	Rev. 1	_

	Regarding Tran	sfer of Property (see	instructions)		
Section A - Cash					
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	transion	рторотту	336,341.	Buolo	transfer
10 Was cash the only pro	•			[X Yes No
Section B - Other Pro	perty (other tha	n intangible property			
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					
(including a branch the If "Yes," continue to lice Immediately after the transferee foreign corplif "Yes," continue to lice Immediately after the transferred Immediately after	domestic corporation at is a foreign disregane 12c. If "No," skip I transfer, was the donporation? ne 12d. If "No," skip I oss amount included insfer property describ	that transferred substantially urded entity) to a specified 10 ines 12c and 12d, and go to nestic corporation a U.S. shamine 12d, and go to line 13. in gross income as required ed in section 367(d)(4)?	/ all of the assets of a foreig 0%-owned foreign corporati- line 13. areholder with respect to the	n branch on? [Yes No Yes No Yes No Yes No
Section C - Intangible	e Property Subje	ct to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length prion date of transi		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		No.
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable	····	
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) ▶\$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	☐ No
	•		
Sup	plemental Part III Information Required To Be Reported (see instructions)		
	•		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
Pa 16	rt IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
16 17	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) > IRC SEC 351A		X No
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3)		X No X No
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	=
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Part I U.S. Transferor Information	(see instructions)					
Name of transferor JEWISH FEDERATION OF CLEVELAND			Iden	tifying numbe	r (see ins	structions)
JEWISH FEDERALION OF CHEVELAND			34	-0714445		
1 Is the transferee a specified 10%-owned fore	eign corporation that is not a controlled foreign corpor	ation?		Yes	Х	No
2 If the transferor was a corporation, complete	e questions 2a through 2d.					
	nsfer, was the transferor controlled (under section 368	3(c)) by				
	,	,		Yes	Х	No
	he transfer?			X Yes		No
If not, list the controlling shareholder(s) and					ш	
	g shareholder		Identifyir	ng number		
c If the transferor was a member of an affiliate If not, list the name and employer identificat	d group filing a consolidated return, was it the parent ion number (EIN) of the parent corporation.	corporation?		X Yes		No
Name of par	ent corporation	EI	N of parer	nt corporatio	on	
d Have basis adjustments under section 367(a	ı)(4) been made?			Yes	X	No
	ip that was the actual transferor (but is not treated as	such under s	ection 367	7),		
complete questions 3a through 3d.						
a List the name and EIN of the transferor's par	tnership.					
Name of	partnership		EIN of p	artnership		
CLEVELAND FEDERATION PE II LLC		83-3457	838			
b Did the partner pick up its pro rata share of	gain on the transfer of partnership assets?			Yes	X	No
c Is the partner disposing of its entire interest	t in the partnership?			Yes	Х	No
d Is the partner disposing of an interest in a lin	nited partnership that is regularly traded on an establi	shed				
securities market?				Yes	X	No
Part II Transferee Foreign Corporat	ion Information (see instructions)					
4 Name of transferee (foreign corporation)			5a Identi	fying numbe	er, if a	ny
REV VI QUANTUM SARL						
6 Address (including country) 13-15 AVENUE DE LA LIBERTE, L-931 LUX	EMBOURG		5b Refere	ence ID numb	oer	
GRAND DUCHE DE LUXEMBOURG			RVQS1			
7 Country code of country of incorporation or LU	organization	'				
8 Foreign law characterization (see instruction	s)					
9 Is the transferee foreign corporation a control	olled foreign corporation?	<u></u>		X Yes		No
124531 04-01-21 LHA For Paperwork Reduction				Form 926 (F	Rev. 11	1-2018)

Form 926 (Rev. 11-2018)					34-0/1	.4445 Page 2
	Regarding Tran	sfer of Property (see	instructi	ons)		
Section A - Cash						
Type of	(a) Date of	(b) Description of	Fair m	(c) narket value on	(d) Cost or other	(e) Gain recognized on
property	transfer	property	date	e of transfer	basis	transfer
Cash				341,014.		
10 Was cash the only pro	perty transferred?					X Yes No
If "Yes," skip the rema	• •					_
		9				
Section B - Other Pro	perty (other tha	n intangible property	subject	to section 3676	d))	_
Type of	(a)	(b)		(c)	(d)	(e)
property	Date of	Description of	Fair m	narket value on	Cost or other	Gain recognized on
	transfer	property	date	e of transfer	basis	transfer
Stock and						
securities						
Inventory						
Other property						
(not listed under						
another category)						
3 ,,						
-						
Property with						
built-in loss						
Totals						
foreign corporation? If "Yes," go to line 12b b Was the transferor a d (including a branch the If "Yes," continue to lin c Immediately after the transferee foreign corp If "Yes," continue to lin d Enter the transferred le	lomestic corporation at is a foreign disregane 12c. If "No," skip transfer, was the dorporation? ne 12d. If "No," skip oss amount included sfer property describe.	that transferred substantially arded entity) to a specified 10 lines 12c and 12d, and go to mestic corporation a U.S. shalline 12d, and go to line 13. I in gross income as required the din section 367(d)(4)?	/ all of the 0%-owned line 13. areholder v	assets of a foreign be foreign corporation?	oranch	Yes No Yes No Yes No Yes No
Section C - Intangible	Property Subje	ect to Section 367(d)				
Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described						
in sec. 367(d)(4)			+			
Totals						
·	·	·		·	·	

14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	☐ No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		☐ No
С	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	☐ No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) > \$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	☐ No
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pa	t IV Additional Information Regarding Transfer of Property (see instructions)		
Pa	Additional Information Regarding Transfer of Property (see instructions)		
Pa	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After %		
	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) \[\bigsim \text{IRC SEC 351A}		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following.		
16 17	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before		X No
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After % Type of nonrecognition transaction (see instructions) IRC SEC 351A Indicate whether any transfer reported in Part III is subject to any of the following.		X No
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes	=
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes	X No X No X No
16 17 18 a b c d	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No