

Form **990**  
Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
Open to Public Inspection

**A For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019**

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

**C** Name of organization  
Jewish United Fund of Metropolitan Chicago

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
30 South Wells No 4049

City or town, state or province, country, and ZIP or foreign postal code  
Chicago, IL 60606

**D** Employer identification number  
36-2167034

**E** Telephone number  
(312) 357-4790

**G** Gross receipts \$ 102,883,153

**F** Name and address of principal officer:  
Lonnie Nasatir  
30 South Wells No 4049  
Chicago, IL 60606

**H(a)** Is this a group return for subordinates?  Yes  No

**H(b)** Are all subordinates included?  Yes  No  
If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶

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

**J** Website: ▶ www.JUF.org

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: 1949

**M** State of legal domicile: IL

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities:  
JUF is the Chicago Jewish community's central philanthropy, funding wide-ranging services.

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	82
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	79
<b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a)	<b>5</b>	588
<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	9,696
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	590,087
<b>b</b> Net unrelated business taxable income from Form 990-T, line 39	<b>7b</b>	0

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	97,348,743	88,164,933
<b>9</b> Program service revenue (Part VIII, line 2g)	7,576,309	6,114,628
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,614,137	4,571,702
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-1,027,552	-833,308
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	115,511,637	98,017,955
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	78,946,254	78,709,939
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	13,787,716	14,474,541
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	27,143	29,643
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 6,716,323		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	13,497,332	10,772,859
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	106,258,445	103,986,982
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	9,253,192	-5,969,027
	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	226,925,534	237,716,660
<b>21</b> Total liabilities (Part X, line 26)	102,162,300	112,892,640
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	124,763,234	124,824,020

**Part II Signature Block**

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

**Sign Here**  
Signature of officer: \*\*\*\*\*  
Date: 2020-10-26  
James A Pinkston VP of Accounting  
Type or print name and title

**Paid Preparer Use Only**  
Print/Type preparer's name: Preparer's signature: Date: 2020-10-24  
Check  if self-employed PTIN: P01247672  
Firm's name ▶ RSM US LLP Firm's EIN ▶ 42-0714325  
Firm's address ▶ 1 S Wacker Drive Ste 800 Chicago, IL 60606 Phone no. (312) 634-3400

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

JUF provides critical resources that bring food, refuge, health care, education and emergency assistance to over 500,000 Chicagoans of all faiths and millions of Jews in Israel and around the world, funding a network of nearly 70 agencies and programs.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

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

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

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

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

**4a** (Code: ) (Expenses \$ 42,674,602 including grants of \$ 42,674,602 ) (Revenue \$ 817,289 )  
See Additional Data

**4b** (Code: ) (Expenses \$ 37,968,494 including grants of \$ 36,035,337 ) (Revenue \$ 1,499,935 )  
See Additional Data

**4c** (Code: ) (Expenses \$ 1,060,173 including grants of \$ ) (Revenue \$ 590,087 )  
See Additional Data

See Additional Data Table

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ 5,674,991 including grants of \$ ) (Revenue \$ 3,207,317 )

**4e Total program service expenses** ▶ 87,378,260

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response. Rows include questions 1 through 21, with sub-questions a-f for items 11 and 14. Each row has a corresponding 'Yes' or 'No' in the rightmost column.

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with 16 main rows and multiple sub-rows. Columns include question text, a numeric column (e.g., 2a, 588), and two columns for Yes/No responses. Rows cover topics like employee reporting, federal employment tax returns, foreign country interests, prohibited tax shelter transactions, deductible contributions, and charitable trusts.

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (82), 1b (79), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed IL
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: James A Pinkston 30 South Wells Ste 4049 Chicago, IL 60606 (312) 357-4790







Part VIII Statement of Revenue

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

Table with 5 main columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include 1a-1g for Federated campaigns, membership dues, fundraising events, related organizations, government grants, and other contributions, totaling 88,164,933.

Table for Program Service Revenue with columns for Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, and (D) Revenue excluded from tax. Rows include 2a-2f for Program Fees, Service Fees, JUF News Advertising, and other program service revenue, totaling 6,114,628.

Table for Other Revenue with columns for (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, and (D) Revenue excluded from tax. Rows include 3-12 for investment income, royalties, rental income, gain from sales of assets, fundraising events, gaming activities, and sales of inventory, totaling 98,017,955.

**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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	78,709,939	78,709,939		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. . . . .				
<b>4</b> Benefits paid to or for members . . . . .				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	2,899,567	816,029	1,222,403	861,135
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	69,948		69,948	
<b>7</b> Other salaries and wages . . . . .	8,343,556	2,348,138	3,517,485	2,477,933
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .	2,806,793	792,875	1,323,770	690,148
<b>9</b> Other employee benefits . . . . .	212,806	47,018	115,194	50,594
<b>10</b> Payroll taxes . . . . .	141,871	31,346	76,796	33,729
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management . . . . .	536,216	530,799	5,417	
<b>b</b> Legal . . . . .	77,923		77,923	
<b>c</b> Accounting . . . . .	124,661		124,661	
<b>d</b> Lobbying . . . . .				
<b>e</b> Professional fundraising services. See Part IV, line 17	29,643			29,643
<b>f</b> Investment management fees . . . . .				
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	321,105	158,318	120,870	41,917
<b>12</b> Advertising and promotion . . . . .	25,740	10,120		15,620
<b>13</b> Office expenses . . . . .	1,267,939	928,714	92,374	246,851
<b>14</b> Information technology . . . . .	1,366,375	108,106	1,117,747	140,522
<b>15</b> Royalties . . . . .				
<b>16</b> Occupancy . . . . .	1,773,359	328,983	1,010,500	433,876
<b>17</b> Travel . . . . .	192,900	91,194	45,746	55,960
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	17,820	17,820		
<b>19</b> Conferences, conventions, and meetings . . . . .	334,006	88,238	200,926	44,842
<b>20</b> Interest . . . . .	359,604	221,389	138,215	
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	587,520	36,047	505,665	45,808
<b>23</b> Insurance . . . . .	78,857		78,857	
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> Missions-Before Income	1,915,337	1,915,337		
<b>b</b> Events-Before Income	1,542,621	71,287		1,471,334
<b>c</b> Temporary Help	86,221	31,869	12,676	41,676
<b>d</b> Photo/Illustration	43,361	25,640		17,721
<b>e</b> All other expenses	121,294	69,054	35,226	17,014
<b>25</b> Total functional expenses. Add lines 1 through 24e	103,986,982	87,378,260	9,892,399	6,716,323
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	8,519,823	<b>1</b>	13,588,041
	<b>2</b> Savings and temporary cash investments . . . . .		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net . . . . .	51,429,320	<b>3</b>	44,792,958
	<b>4</b> Accounts receivable, net . . . . .	441,883	<b>4</b>	601,506
	<b>5</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	2,765,961	<b>9</b>	1,904,244
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 4,706,096		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 3,173,252	1,112,002	<b>10c</b> 1,532,844
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	133,700,183	<b>12</b>	142,133,458
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	28,956,362	<b>15</b>	33,163,609
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	226,925,534	<b>16</b>	237,716,660	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	2,553,911	<b>17</b>	3,090,192
	<b>18</b> Grants payable . . . . .	47,593,625	<b>18</b>	47,921,253
	<b>19</b> Deferred revenue . . . . .	959,162	<b>19</b>	1,010,367
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	51,055,602	<b>25</b>	60,870,828
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	102,162,300	<b>26</b>	112,892,640
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	71,158,396	<b>27</b>	74,280,622
	<b>28</b> Net assets with donor restrictions . . . . .	53,604,838	<b>28</b>	50,543,398
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
<b>32</b> Total net assets or fund balances . . . . .	124,763,234	<b>32</b>	124,824,020	
<b>33</b> Total liabilities and net assets/fund balances . . . . .	226,925,534	<b>33</b>	237,716,660	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	98,017,955
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	103,986,982
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-5,969,027
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	124,763,234
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	10,982,810
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-4,952,997
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	124,824,020

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		No
<b>2b</b>	Yes	
<b>2c</b>	Yes	
<b>3a</b>		No
<b>3b</b>		

# Additional Data

**Software ID:**

**Software Version:**

**EIN:** 36-2167034

**Name:** Jewish United Fund of Metropolitan Chicago

Form 990 (2019)

## Form 990, Part III, Line 4a:

Allocations (Local) - The Jewish United Fund of Metropolitan Chicago (JUF) conducts fundraising activities by means of annual calendar year campaigns and makes allocations to Jewish Federation of Metropolitan Chicago (JF) and Jewish Federations of North America (JFNA). Through its allocation to JF, JUF supports various nonprofit organizations in the Chicago area that provide assistance to people of all faiths, including hot meals and groceries, utility and rent assistance, prescriptions and medical care for impoverished families; job training and placement for people who are out of work; multi-faceted, specialized support services for people with disabilities; support services for Holocaust survivors; assisted living, specialized Alzheimer's care and transportation for seniors; respite services for caregivers of frail seniors and people with disabilities; counseling, prevention and intervention services for troubled teens; and an entire continuum of prevention and therapeutic services for individuals and families in crisis. Because the Jewish United Fund of Metropolitan Chicago and the Jewish Federation of Metropolitan Chicago are so closely linked in numerous ways (combined Board of Directors, shared professional staff, shared office space, etc.), and because JUF provides an annual, multi-million dollar allocation to the Jewish Federation, we measure and report our program and service results jointly for the combined JUF/Federation enterprise, which are summarized below: 1. While battling antisemitism and hate, JUF is committed to ensuring that every community member can safely participate in Jewish life. - Since 2017, JUF has awarded \$1.6M in matching grants and leveraged an additional \$2.3 million, yielding a total of nearly \$4M in new or enhanced security at 88 Jewish sites in the Chicago area, helping to protect 37,000+ community members. - Grant recipients include: - 54 Synagogues - 48% of Chicago area synagogues (every synagogue that applied) - 19 preschools & day schools, 12 agencies, 3 camps and 2 colleges. - JUF also helps make additional financial resources available to local Jewish institutions by assisting them in applying for grants through the U.S. Department of Homeland Security - helping to garner 250 grants for 99 local Jewish schools, synagogues and agencies totaling \$20.45 million to date. - JUF regularly provides individual security assessments and consultations for local synagogues, Jewish schools, preschools and agencies, and cooperates seamlessly with federal, state and local law enforcement to help keep Jewish Chicago safe. - Working with these partners, JUF convenes regular security summits to further enhance local security for Chicago area Jewish institutions, providing training to many hundreds of staff and lay leaders at scores of Jewish institutions. 2. JUF is on the cutting edge of service delivery to the most vulnerable, evolving to address community needs as they emerge. As 1 in 5 people will experience mental illness this year and mental health issues are accelerating among young people, JUF is at the forefront of providing effective treatment, education and support in the community. - 30,000 people - individuals with mental health challenges, family members, caregivers, and professionals alike - benefited from mental health services provided by JUF agencies in 2019. - 2,400 individuals and families received direct mental health care from JUF agencies. - 3,500 individuals received counseling and participated in support groups and other JUF agency programs to enhance their mental health. - 5,800+ professionals participated in mental health training and other capacity-building. - 13,400 community members increased their awareness and knowledge of mental health topics through JUF agencies' outreach and education events. JUF serves Holocaust survivors more intensively than ever before. - JUF agencies served 2,000+ Holocaust survivors in the Chicago area in 2019. - Nearly 1,800 local survivors received ongoing financial assistance and 330+ received one-time emergency financial aid, totaling \$8.1 million - an 88% increase over 2018. - Nearly 1,200 survivor households received financial assistance for personal care. - Some 1,700 survivors participated in socialization and wellness progress. JUF fights Jewish poverty across Chicago and around the globe. - 28,000 local individuals received one or more services to meet their fundamental needs, including food, housing, transportation and basic healthcare. - Nearly 4,900 local households received \$10.4 million in emergency financial assistance from JUF agencies in 2019 - a 62% increase in dollars over 2018. - Food is the most common need for financial assistance. - Nearly 21,000 local Jews are sustained through JUF-funded food programs; 3 in 5 are over 55. - For 1 in 4 clients, dinner at the JUF Uptown Cafe is their first meal of the day - and for 1 in 3, it's their first interaction with another person during the day. - 38,000 individuals in need received direct healthcare through JUF-supported agencies. - Last year, 5,900 local households got help obtaining or maintaining public benefits (SNAP, Medicaid, Medicare, Social Security) and 400 individuals received legal services. - 3,200+ individuals received transportation assistance, 94% of whom are older adults. - 500+ individuals lived in JUF agency-operated affordable housing, while 400+ people participated in services to secure affordable housing. - Israel suffers from the highest child poverty rate in the Western World, tens of thousands of whom rely on JUF programs to help break the cycle of poverty. - Nearly 90,000 impoverished seniors throughout the former Soviet Union, half of whom are Holocaust survivors, depend on JUF agencies for food and other necessities. 3. JUF engages more members of the next generation in Jewish life more effectively than ever. JUF connects young families to Jewish life, community and one another. - 8,500 local children get free, monthly Jewish books through PJ Library & PJ Our Way. - 8,400 young families participated in programs and events through JUF and its agencies in 2019 - 30% of them for the first time. JUF brings young Jews to Israel, connecting them to the land, the people & their own identities. - Some 2,700 Chicago youth and young adults participated in JUF-funded Israel trips in 2019. - 800 young people received \$1.2 million in scholarships and subsidies through JUF to help make their Israel experiences possible. - 1,500 young adults went on free JUF Birthright Israel trips. JUF creates dynamic hubs of Jewish life to engage teens, college students & young adults. - 7,000 teens engaged Jewishly through programs run by JUF and JUF-supported agencies. - 60% of all Jewish college students in Illinois participated in Hillel in some way in 2019. - All told, 4,000 college students participated in Hillel. - Nearly 13,000 local young adults participated in engagement programs provided by JUF and its agencies in 2019 - one-third of them for the first time. - 1,100 young adults held leadership roles within local Jewish organizations. JUF makes both formal and informal Jewish education more affordable. - 4,500 individuals received \$38.4 million in scholarships & tuition assistance in 2019 to help them attend Jewish preschool, day school, graduate and undergraduate programs. - 3,300 local Jewish Day School students - 73% of those enrolled - received scholarships and/or tuition assistance from JUF-supported day schools, which totaled \$36 million in 2019. - 900+ preschoolers - 1 in 4 of those enrolled - received \$1.4 million in scholarships and subsidies from JUF and JCC to help make their early childhood education possible. - 5,100 children attended JCC & Keshet summer camps - 1,700 of them for the first time. - 1,300 children received scholarships and subsidies to attend Jewish summer camp.

**Form 990, Part III, Line 4b:**

Allocations (Overseas) - Through its allocation to JFNA, JUF supports services to millions of individuals in Israel and 70 other countries. These range from basic social service programs addressing needs of all age groups to formal and informal Jewish education/identity development. The major beneficiary organizations which engage in overseas work through support from JFNA are the American Jewish Joint Distribution Committee, the Jewish Agency for Israel and the World ORT.

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**Form 990, Part III, Line 4c:**

JUF News: JUF News is Chicago's largest circulation Jewish community publication. It is published monthly and offers features, profiles, news and commentaries about key facets of Jewish life locally, in Israel and around the world.

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**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code: ) (Expenses \$ 951,508 including grants of \$ ) (Revenue \$ 11,191 )

Communications: Fifty percent of the Communications Department expenses are allocated to program services. The JUF Communications Department works to ensure that JUF/Federation maintains a strong media profile and serves effectively as the public voice for Chicago's Jewish community.

(Code: ) (Expenses \$ 821,568 including grants of \$ ) (Revenue \$ 99,921 )

Community Relations - Through its support of the Jewish Community Relations Council (JCRC), JUF coordinates the collective policies and programs among 43 constituent Jewish organizations active in public affairs/community relations work. JCRC educates and mobilizes the Jewish community for action through JUF and those constituent groups on internal and domestic issues ranging from Israel advocacy to combatting anti-Semitism, and works to strengthen our community's intergroup relations (interfaith, interethnic, etc.). JCRC activities and engagement take place with the media, campuses, government, foreign diplomats and religious and civic leaders.



**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code: ) (Expenses \$ 654,520 including grants of \$ ) (Revenue \$ 305,816 )

Budget and Planning - Review/evaluate programs and budgets of grantee organizations, all of which are tax-exempt organizations under Section 501(c)(3). Allocations are made based on need and funds available.

(Code: ) (Expenses \$ 3,247,395 including grants of \$ ) (Revenue \$ 2,790,389 )

Israel office and other programs: The organization maintains a small office in Israel with four employees. The Israel office expense and employee salaries are paid to Jewish Federations of North America, which is based in New York, and is the umbrella organization for all Jewish Federations in North America. The Israel office coordinates educational missions and monitors Israeli programs that are funded by JUF. JUF coordinates missions to Israel, Russia, Poland and various other countries in order to give donors the opportunity to travel with other Chicagoans to Jewish communities all over the world and see JUF dollars at work. The missions also allow individuals to visit with people who live in Israel and other countries, explore family roots and learn about worldwide Jewish culture. Missions give participants the opportunity to see first-hand what can be accomplished by the Jewish people when our energy and resources are operating at full capacity. JUF pays for certain mission travel expenses and then participants reimburse JUF for the costs. The revenue and expenses of missions are reported on the 990 on a gross basis.

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dr Steven B Nasatir PhD ..... Executive Vice Chairman	30.00 ..... 10.00			X				409,519	346,051	23,787
David S Rosen ..... Senior Vice President - Endowments	10.00 ..... 40.00			X				0	393,648	87,611
Jay Tcath ..... Executive Vice President	25.00 ..... 25.00			X				166,485	153,678	106,638
Rabbi Louis A Lazovsky ..... Vice President - Human Resources	40.00 ..... 10.00				X			205,698	51,424	162,141
Lonnie Nasatir ..... President	25.00 ..... 25.00			X				155,861	155,861	18,720
David S Rubovits PhD ..... Senior VP - Planning & Allocations	39.00 ..... 11.00			X				193,739	66,663	69,427
Boaz Blumovitz ..... Chief Financial Officer	22.50 ..... 27.50			X				152,634	152,633	23,144
James Rosenberg ..... Chief of Staff	40.00 ..... 10.00			X				260,094	0	49,643
James A Pinkston ..... Vice President - Accounting	20.00 ..... 30.00			X				202,149	67,383	25,907
Peter Chiswick ..... Controller	25.00 ..... 25.00			X				202,831	0	91,856

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Joy Schwartz ..... Vice President - Communications	50.00 ..... 0.00					X		265,505	0	27,424
Robert Schuckman ..... Vice President - General Counsel	10.00 ..... 0.00			X				41,560	166,241	51,305
David Prystowsky ..... Vice President - Campaign	40.00 ..... 0.00			X				223,459	0	32,603
Deborah Covington ..... VP, Planning & Allocations	40.00 ..... 10.00			X				141,136	21,839	84,368
Stuart Spector ..... Vice President - Campaign Operations	50.00 ..... 0.00					X		190,365	0	41,232
Jeffrey L Cohen ..... Sr. Develop. Advisor, Former Officer	6.00 ..... 14.00						X	55,932	167,796	0
Adina Torchman ..... Assoc. VP-Fin. Resource Development	40.00 ..... 0.00					X		185,669	0	35,311
Kedar Potdar ..... Vice President - Technology	50.00 ..... 0.00					X		199,315	0	15,363
Daniel Goldwin ..... Exec. Director, Public Affairs	25.00 ..... 25.00					X		103,193	102,371	5,645
Audra P Berg ..... VP, Leadership Eng. & Board Rel.	8.50 ..... 41.50			X				47,295	110,354	23,560

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael Tarnoff ..... Counselor to Pres., Former Officer	10.00 .....						X	0	172,101	4,229
Andrew S Hochberg ..... Chairman	10.00 .....	X		X				0	0	0
Wendy Berger ..... Vice Chairman	5.00 .....	X		X				0	0	0
Mark Chudacoff ..... Vice Chairman	5.00 .....	X		X				0	0	0
Bruce I Ettelson ..... Vice Chairman	5.00 .....	X		X				0	0	0
Marc Roth ..... Vice Chairman	5.00 .....	X		X				0	0	0
Kim Shwachman ..... Vice Chairman	5.00 .....	X		X				0	0	0
Morris Silverman ..... Vice Chairman	5.00 .....	X		X				0	0	0
Marc Spellman ..... Vice Chairman	5.00 .....	X		X				0	0	0
Pam F Szokol ..... Vice Chairman	5.00 .....	X		X				0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Linda B Ginsburg ..... Vice Chairman	5.00 .....	X		X				0	0	0
Gita Berk ..... Vice Chairman	5.00 .....	X		X				0	0	0
Joshua B Herz ..... Vice Chairman	5.00 .....	X		X				0	0	0
Scott Heyman ..... Vice Chairman	5.00 .....	X		X				0	0	0
Cindy Kaplan ..... Treasurer	5.00 .....	X		X				0	0	0
Jason Peltz ..... Assistant Treasurer	5.00 .....	X		X				0	0	0
Jane Cadden Lederman ..... Secretary	5.00 .....	X		X				0	0	0
Julie Dann Schneider ..... Assistant Secretary	5.00 .....	X		X				0	0	0
Wendy C Abrams ..... Director	0.50 .....	X						0	0	0
Jeremy Amster ..... Director	0.50 .....	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dr Edward M Atkins ..... Director	0.50 .....	X						0	0	0
Peter B Bensinger Jr ..... Director	0.50 .....	X						0	0	0
Katie Berger ..... Director	0.50 .....	X						0	0	0
Debbie L Berman ..... Director	0.50 .....	X						0	0	0
Robert J Bond ..... Director	0.50 .....	X						0	0	0
David T Brown ..... Director	0.50 .....	X						0	0	0
Caroline Davidson ..... Director	0.50 .....	X						0	0	0
Rabbi Alex Felch ..... Director	0.50 .....	X						0	0	0
Robert Ferencz ..... Director	0.50 .....	X						0	0	0
Maury Fertig ..... Director	0.50 .....	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael T Fishman ..... Director	0.50 .....	X						0	0	0
Jason Friedman ..... Director	0.50 .....	X						0	0	0
Andrew Glick ..... Director	0.50 .....	X						0	0	0
Craig Goldsmith ..... Director	0.50 .....	X						0	0	0
Jordan T Goodman ..... Director	0.50 .....	X						0	0	0
Steven M Greenbaum ..... Director	0.50 .....	X						0	0	0
Hilary Greenberg ..... Director	0.50 .....	X						0	0	0
King W Harris ..... Director	0.50 .....	X						0	0	0
Rabbi Sidney M Helbraun ..... Director	0.50 .....	X						0	0	0
Dana Westreich Hirt ..... Director	0.50 .....	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sheri Hokin ..... Director	0.50 .....	X						0	0	0
Lisa Jericho ..... Director	0.50 .....	X						0	0	0
Cathy Kahn ..... Director	0.50 .....	X						0	0	0
Deborah Schrayer Karmin ..... Director	0.50 .....	X						0	0	0
Linda Kellough ..... Director	0.50 .....	X						0	0	0
Ari Klein ..... Director	0.50 .....	X						0	0	0
Ann-Louise Kleper ..... Director	0.50 .....	X						0	0	0
Steven H Lavin ..... Director	0.50 .....	X						0	0	0
Jennifer Leemis ..... Director	0.50 .....	X						0	0	0
Laurie Lustbader ..... Director	0.50 .....	X						0	0	0



**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Lindsey P Markus ..... Director	0.50 .....	X						0	0	0
Yosef Meystel ..... Director	0.50 .....	X						0	0	0
Lee I Miller ..... Director	0.50 .....	X						0	0	0
Steven N Miller ..... Director	0.50 .....	X						0	0	0
Ross S Pearlstein ..... Director	0.50 .....	X						0	0	0
Sanford E Perl ..... Director	0.50 .....	X						0	0	0
Theodore F Perlman ..... Director	0.50 .....	X						0	0	0
David Porush ..... Director	0.50 .....	X						0	0	0
Neal H Price ..... Director	0.50 .....	X						0	0	0
Brandon C Prosansky ..... Director	0.50 .....	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Joshua Rinkov ..... Director	0.50 .....	X						0	0	0
Elliot Robinson ..... Director	0.50 .....	X						0	0	0
David Rosenbaum ..... Director	0.50 .....	X						0	0	0
Lisa Rosenkranz ..... Director	0.50 .....	X						0	0	0
Avi Rothner ..... Director	0.50 .....	X						0	0	0
Eric A Rothner ..... Director	0.50 .....	X						0	0	0
Gail L Rudo ..... Director	0.50 .....	X						0	0	0
Susan Sacks ..... Director	0.50 .....	X						0	0	0
Charlene K Sales ..... Director	0.50 .....	X						0	0	0
Max Schrayner ..... Director	0.50 .....	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Harry J Seigle ..... Director	0.50 .....	X						0	0	0
Midge Perlman Shafton ..... Director	0.50 .....	X						0	0	0
Devra Resnick Shutan ..... Director	0.50 .....	X						0	0	0
Susan B Silver ..... Director	0.50 .....	X						0	0	0
Bill Silverstein ..... Director	0.50 .....	X						0	0	0
Alan P Solow ..... Director	0.50 .....	X						0	0	0
Sara Crown Star ..... Director	0.50 .....	X						0	0	0
Phyllis Tabachnick ..... Director	0.50 .....	X						0	0	0
Bruce Taylor ..... Director	0.50 .....	X						0	0	0
Alex Turik ..... Director	0.50 .....	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kalman Wenig ..... Director	0.50 .....	X						0	0	0
Deborah Winick ..... Director	0.50 .....	X						0	0	0
Michael H Zaransky ..... Director	0.50 .....	X						0	0	0
Adrienne J Krizelman ..... Ex-Officio	0.50 .....	X						0	0	0
Susan Spier Chapman ..... Ex-Officio	0.50 .....	X						0	0	0
Amy Yeager E Hausman ..... Ex-Officio	0.50 .....	X						0	0	0
Joanna Greenberg ..... Ex-Officio	0.50 .....	X						0	0	0
Elizabeth L Kramer ..... Ex-Officio	0.50 .....	X						0	0	0

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

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
Jewish United Fund of Metropolitan Chicago

**Employer identification number**  
36-2167034

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10  An organization that normally receives: (1) more than 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.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . . \_\_\_\_\_
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**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 failed to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	85,263,286	102,074,049	127,924,342	97,348,743	88,164,933	500,775,353
<b>2</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>3</b>	The value of services or facilities furnished by a governmental unit to the organization without charge..						
<b>4</b>	<b>Total.</b> Add lines 1 through 3	85,263,286	102,074,049	127,924,342	97,348,743	88,164,933	500,775,353
<b>5</b>	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). . .						57,640,193
<b>6</b>	<b>Public support.</b> Subtract line 5 from line 4.						443,135,160

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>7</b>	Amounts from line 4. . . .	85,263,286	102,074,049	127,924,342	97,348,743	88,164,933	500,775,353
<b>8</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .	68,078	26,888	25,863	381,777	589,370	1,091,976
<b>9</b>	Net income from unrelated business activities, whether or not the business is regularly carried on . . . .						
<b>10</b>	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . . .						
<b>11</b>	<b>Total support.</b> Add lines 7 through 10						501,867,329
<b>12</b>	Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	32,911,794

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

**Section C. Computation of Public Support Percentage**

<b>14</b>	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	88.300 %
<b>15</b>	Public support percentage for 2018 Schedule A, Part II, line 14 . . . . .	<b>15</b>	88.370 %

- 16a 33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .
- b 33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .
- 17a 10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .
- b 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
<b>2</b>	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						
<b>3</b>	Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
<b>5</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b>	<b>Total.</b> Add lines 1 through 5						
<b>7a</b>	Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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.						
<b>c</b>	Add lines 7a and 7b. . . . .						
<b>8</b>	<b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

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

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

**Section C. Computation of Public Support Percentage**

<b>15</b>	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	
<b>16</b>	Public support percentage from 2018 Schedule A, Part III, line 15 . . . . .	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

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

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

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

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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



**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	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)? <i>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).</i>		

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ):		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions)		
<b>2</b>	Activities Test. <b>Answer (a) and (b) below.</b>		
<b>a</b>	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? <i>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.</i>	Yes	No
<b>b</b>	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
<b>3</b>	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>		
<b>a</b>	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? <i>Provide details in Part VI.</i>		
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
<b>9</b> Distributable amount for 2019 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i)</b> <b>Excess Distributions</b>	<b>(ii)</b> <b>Underdistributions</b> <b>Pre-2019</b>	<b>(iii)</b> <b>Distributable</b> <b>Amount for 2019</b>
<b>1</b> Distributable amount for 2019 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2019:			
<b>a</b> From 2014. . . . .			
<b>b</b> From 2015. . . . .			
<b>c</b> From 2016. . . . .			
<b>d</b> From 2017. . . . .			
<b>e</b> From 2018. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2019 distributable amount			
<b>i</b> Carryover from 2014 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2019 from Section D, line 7:			
\$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2019 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2015. . . . .			
<b>b</b> Excess from 2016. . . . .			
<b>c</b> Excess from 2017. . . . .			
<b>d</b> Excess from 2018. . . . .			
<b>e</b> Excess from 2019. . . . .			

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 36-2167034

**Name:** Jewish United Fund of Metropolitan  
Chicago

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

**Facts And Circumstances Test**

**SCHEDULE C**  
(Form 990 or 990-EZ)  
  
Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
  
**2019**  
**Open to Public Inspection**

**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.

Name of the organization Jewish United Fund of Metropolitan Chicago	Employer identification number 36-2167034
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

**1** Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

**2** Political campaign activity expenditures (see instructions) ..... ▶ \$ \_\_\_\_\_

**3** Volunteer hours for political campaign activities (see instructions) .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

**1** Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_

**2** Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_

**3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No

**4a** Was a correction made? .....  Yes  No

**b** If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

**1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

**2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

**3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ \_\_\_\_\_

**4** Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No

**5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				



**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)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
<b>1</b>	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b>	Volunteers? .....	Yes		
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....	Yes		
<b>c</b>	Media advertisements? .....		No	
<b>d</b>	Mailings to members, legislators, or the public? .....	Yes		20
<b>e</b>	Publications, or published or broadcast statements? .....		No	
<b>f</b>	Grants to other organizations for lobbying purposes? .....		No	
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body? .....	Yes		14,000
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		No	
<b>i</b>	Other activities? .....		No	
<b>j</b>	Total. Add lines 1c through 1i .....			14,020
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		No	
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
<b>1</b>	Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b>	Did the organization agree to carry over lobbying and political expenditures from the prior year? .....	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b>	Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b>	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b>	Current year .....	<b>2a</b>	
<b>b</b>	Carryover from last year .....	<b>2b</b>	
<b>c</b>	Total .....	<b>2c</b>	
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	<b>3</b>	
<b>4</b>	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? .....	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**Part IV Supplemental Information**

Provide 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); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
Part II-B, Line 1:	The Jewish Community Relations Council (JCRC) participated in the following legislative activities in calendar year 2019: Israel/International: JCRC communicated with the Illinois Congressional delegation, city, county and state legislators and federal, state, city and county executive branch officials on a variety of issues. Domestic Issues: JCRC staff and volunteers communicated with Illinois legislators and executive branch officials on various items.

**SCHEDULE D**  
(Form 990)  
  
Department of the Treasury  
Internal Revenue Service

# Supplemental Financial Statements

OMB No. 1545-0047  
**2019**  
**Open to Public Inspection**

▶ **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](http://www.irs.gov/Form990) for instructions and the latest information.**

**Name of the organization**  
Jewish United Fund of Metropolitan Chicago

**Employer identification number**  
36-2167034

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

	(a) Donor advised funds	(b) Funds and other accounts
<b>1</b> Total number at end of year . . . . .		
<b>2</b> Aggregate value of contributions to (during year)		
<b>3</b> Aggregate value of grants from (during year)		
<b>4</b> Aggregate value at end of year . . . . .		

**5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .  Yes  No

**6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .  Yes  No

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

**1** Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

**2** Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
<b>a</b> Total number of conservation easements . . . . .	<b>2a</b>
<b>b</b> Total acreage restricted by conservation easements . . . . .	<b>2b</b>
<b>c</b> Number of conservation easements on a certified historic structure included in (a) . . . . .	<b>2c</b>
<b>d</b> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . . .	<b>2d</b>

**3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

**4** Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

**5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

**6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

**7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

**8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . .  Yes  No

**9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

**1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

**b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

**(i)** Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

**(ii)** Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

**2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

**a** Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

**b** Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_



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

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

**Part IV Escrow and Custodial Arrangements.**

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

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

**Part V Endowment Funds.**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	128,666,527	125,853,578	70,657,506	68,421,562	72,218,106
<b>b</b> Contributions . . . . .	133,716	14,502,889	50,484,460	5,284,437	3,314,418
<b>c</b> Net investment earnings, gains, and losses	15,416,091	-2,811,081	11,600,319	2,414,774	-2,116,626
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	7,283,619	8,878,859	6,888,707	5,463,267	4,994,336
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .	136,932,715	128,666,527	125,853,578	70,657,506	68,421,562

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 89.310 %
  - b** Permanent endowment ▶ 8.160 %
  - c** Temporarily restricted endowment ▶ 2.530 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes | No |
|--|-----|----|
| <b>(i)</b> unrelated organizations . . . . .   | No  |    |
| <b>(ii)</b> related organizations . . . . .  | Yes |    |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | Yes |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements				
<b>d</b> Equipment . . . . .		4,656,275	3,159,993	1,496,282
<b>e</b> Other . . . . .		49,821	13,259	36,562
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,532,844

**Part VII Investments—Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A) State of Israel Bonds	86,306	F
(B) Investment in Life Insurance Policies	3,968,734	F
(C) Other Investments	122,211	F
(D) JFMC Pooled Endowment Portfolio, LLC	137,956,207	F
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	142,133,458	

**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)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1) Due from Participating Employers for Pension Benefits	33,163,609
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 15.)	33,163,609

**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	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	60,870,828

**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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .		<b>5</b>	

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

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

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

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 36-2167034

**Name:** Jewish United Fund of Metropolitan  
Chicago

## Supplemental Information

Return Reference	Explanation
Part V, Line 4:	The endowment funds (which include both board designated and donor restricted funds) were established over a period of several years via bequests received from certain donors' estates. Distributions are made from these endowment funds on an annual basis and transferred to the organization's undesignated fund to support the annual campaign or certain programs . The endowment fund distributions are computed using a formal spending policy.

**Supplemental Information**

Return Reference	Explanation
Part X, Line 2:	<p>Jewish United Fund, an Illinois not-for-profit corporation, is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and applicable state law, except for taxes pertaining to unrelated business income, if any. Jewish United Fund has adopted the accounting standard on accounting for uncertainty in income taxes, which addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Under this guidance, Jewish United Fund may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authorities, based on the technical merits of the position. Examples of tax positions include the tax-exempt status of Jewish United Fund and various positions related to the potential sources of unrelated business taxable income (UBIT). The tax benefits recognized in the financial statements from such a position are measured based on the largest benefit that has a greater than 50% likelihood of being realized upon ultimate settlement. The guidance on accounting for uncertainty in income taxes also addresses de-recognition, classification, interest and penalties on income taxes, and accounting in interim periods. At December 31, 2019, there were no unrecognized tax benefits identified or recorded as liabilities. Jewish United Fund files Form 990 and Form 990-T in the U.S. federal jurisdiction and the state of Illinois.</p>

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Name of the organization  
Jewish United Fund of Metropolitan  
Chicago

**Employer identification number**  
36-2167034

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
Israel	1	4	Program Services	Oversight and monitoring of overseas allocation.	622,359
<b>3a</b> Sub-total . . . . .	1	4			622,359
<b>b</b> Total from continuation sheets to Part I . . . . .	0	0			0
<b>c Totals</b> (add lines 3a and 3b)	1	4			622,359

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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, FMV, appraisal, other)

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





**Part IV Foreign Forms**

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

**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.

**990 Schedule F, Supplemental Information**

Return Reference	Explanation
Part III Accounting Method:	

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

Name of the organization  
Jewish United Fund of Metropolitan Chicago

**Employer identification number**  
36-2167034

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a**  Mail solicitations
  - b**  Internet and email solicitations
  - c**  Phone solicitations
  - d**  In-person solicitations
  - e**  Solicitation of non-government grants
  - f**  Solicitation of government grants
  - g**  Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Siegel Marketing Group 1845 N Farwell Ave Suite 300 Milwaukee, WI 53202	Phone solicitation		No	97,030	29,643	67,387
<b>Total</b>				97,030	29,643	67,387

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

IL

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		The Vanguard Dinner (event type)	YLD Big Event (event type)	12 (total number)	(add col. (a) through col. (c))	
1	Gross receipts . . . . .	362,500	130,520	207,712	700,732	
2	Less: Contributions . . . . .					
3	Gross income (line 1 minus line 2) . . . . .	362,500	130,520	207,712	700,732	
Direct Expenses	4	Cash prizes . . . . .				
	5	Noncash prizes . . . . .				
	6	Rent/facility costs . . . . .	52,158	65,454	86,847	204,459
	7	Food and beverages . . . . .	197,222	242,158	210,445	649,825
	8	Entertainment . . . . .	154,500	264,702	205,831	625,033
	9	Other direct expenses . . . . .	16,450	26,609	42,574	85,633
10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				1,564,950	
11	Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				-864,218	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1	Gross revenue . . . . .		
Direct Expenses	2	Cash prizes . . . . .			
	3	Noncash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				
8	Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If "No," explain: \_\_\_\_\_

---

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No

b If "Yes," explain: \_\_\_\_\_

---

**11** Does the organization conduct gaming activities with nonmembers?  Yes  No

**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

**13** Indicate the percentage of gaming activity conducted in:

<b>a</b> The organization's facility	<b>13a</b>	%
<b>b</b> An outside facility	<b>13b</b>	%

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ .....

Address ▶ .....

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.

**c** If "Yes," enter name and address of the third party:

Name ▶ .....

Address ▶ .....

**16** Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

Director/officer       Employee       Independent contractor

**17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
Schedule G, Part II Fundraising Events -	The gross receipts presented in line 1 are comprised solely of fees paid by attendees to attend the events and amounts received from corporate sponsors. Attendees of these events were also solicited for gifts to the 2019 Jewish United Fund annual campaign, which raised over \$89 million from the Chicago Jewish community. Contributions to the annual campaign are not included on Schedule G.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

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

Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Jewish United Fund of Metropolitan Chicago

Employer identification number

36-2167034

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 29
3 Enter total number of other organizations listed in the line 1 table 0

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

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

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

Return Reference	Explanation
Part I, Line 2:	Grants made by the Jewish United Fund of Metropolitan Chicago in the United States are monitored through an extensive process involving professionals and nearly 200 volunteers that includes submission of budgetary and programmatic information as well as face to face meetings with many of the grant recipients. The process entails submission and review of fiscal information (including updated budgets and audits) as well as program specific information including outcome measures when appropriate. The review is accompanied by face to face site visits in which programs funded by the Jewish United Fund are reviewed. The Jewish United Fund also takes into account information that the grantees provide to accrediting and other funding bodies. The grants made to The Ark, Jewish Community Centers of Chicago, CJE Senior Life, Ida Crown Jewish Academy, Hebrew Theological College, Associated Talmud Torahs, Jewish Child & Family Services, and Arie Crown Hebrew Day School represent pass-through grants made per the request of certain donor designated gifts. In addition to these allocations, Jewish Federation of Metropolitan Chicago also makes more significant grants to these organizations to support their general operations. Jewish United Fund of Metropolitan Chicago reports grants on Schedule I to The Jewish Federations of North America (JFNA), which is a 501(c)(3) domestic U.S. charity. JFNA sends the vast majority of this grant amount to nonprofit organizations in Israel and other countries. JFNA, and its beneficiary agencies, United Israel Appeal (UIA), a subsidiary of JFNA, and the American Jewish Joint Distribution Committee (JDC) each file separate Form 990s and report each specific grant in detail on their Schedule F.



**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 36-2167034  
**Name:** Jewish United Fund of Metropolitan  
Chicago

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Jewish Federation of Metropolitan Chicago 30 S Wells Street Suite 4049 Chicago, IL 60606	36-2167761	501(c)(3)	41,280,354				To support a range of nonprofit organizations which address humanitarian, health and welfare needs.
Jewish Federations of North America 25 Broadway New York, NY 10004	13-1624240	501(c)(3)	36,035,337				Regular campaign

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
American Committee for the Weizmann Institute of Science 633 Third Avenue New York, NY 10017	13-1623886	501(c)(3)	25,000				General Operations
American Jewish Joint Distribution Committee 220 E 42nd Street New York, NY 10017	13-1656634	501(c)(3)	82,000				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Arie Crown Hebrew Day School 4600 Main Street Skokie, IL 60076	36-2129620	501(c)(3)	101,200				General Operations
Associated Talmud Torahs 3531 Madison Street Skokie, IL 60076	36-2169123	501(c)(3)	19,200				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Birthright Israel Foundation PO Box 21615 New York, NY 10087	13-4092050	501(c)(3)	10,000				General Operations
Chicago Chesed Fund 7045 N Ridgeway Avenue Lincolnwood, IL 60712	36-3641111	501(c)(3)	6,000				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Chicago Festival of Israeli Cinema PO Box 524 Highland Park, IL 60035	80-0913905	501(c)(3)	10,000				General Operations
CJE Senior Life 3003 W Touhy Avenue Chicago, IL 60645	36-2727597	501(c)(3)	94,102				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Hebrew Theological College 7135 Carpenter Road Skokie, IL 60077	36-2167095	501(c)(3)	151,200				General Operations
Ida Crown Jewish Academy 8233 Central Park Avenue Skokie, IL 60076	36-2167009	501(c)(3)	101,450				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Jewish Child & Family Services 216 W Jackson Boulevard Suite 800 Chicago, IL 60606	36-2167757	501(c)(3)	184,712				General Operations
Jewish Community Centers of Chicago 30 S Wells Street Chicago, IL 60606	36-2167758	501(c)(3)	133,872				EZRA and Other Programming

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Jewish Federation of Palm Beach County 1 Harvard Circle Suite 100 West Palm Beach, FL 33409	59-0948696	501(c)(3)	109,000				General Operations
Jewish Federation of SarasotaManatee 580 McIntosh Road Sarasota, FL 34232	59-1227747	501(c)(3)	27,536				General Operations



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Jewish Federation of South Palm Beach County 9901 Donna Klein Boulevard Boca Raton, FL 33428	59-1945109	501(c)(3)	55,555				General Operations
Jewish National Fund 60 Revere Drive Northbrook, IL 60062	13-1659627	501(c)(3)	26,200				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Keshet 600 Academy Drive Suite 130 Northbrook, IL 60062	36-3441392	501(c)(3)	6,250				General Operations
Maot Chitim 3710 Commercial Avenue Suite 7 Northbrook, IL 60062	36-3398501	501(c)(3)	22,500				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Mount Sinai Medical Center 1500 S California Avenue Chicago, IL 60608	36-1509000	501(c)(3)	33,947				General Operations
Northwestern Memorial Foundation 251 E Huron Street Chicago, IL 60611	36-3152959	501(c)(3)	12,485				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ORT America 3701 Commercial Avenue Suite 13 Northbrook, IL 60062	13-5562424	501(c)(3)	7,994				General Operations
Shalva PO Box 46375 Chicago, IL 60646	36-3449507	501(c)(3)	6,200				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Solomon Schechter Day School 3210 Dundee Road Northbrook, IL 60062	36-2493769	501(c)(3)	5,500				General Operations
Temple Beth Israel 801 W Michigan Avenue Jackson, MI 49202	38-1547031	501(c)(3)	6,200				General Operations

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
The Ark 6450 N California Avenue Chicago, IL 60645	23-7164967	501(c)(3)	62,685				General Operations
United Against Nuclear Iran 45 Rockefeller Plaza Suite 2162 New York, NY 10111	26-2387657	501(c)(3)	35,000				General Operations

<b>Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.</b>							
<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
United States Holocaust Memorial Museum 100 Raoul Wallenberg Place SW Washington, DC 20024	52-1309391	501(c)(3)	50,500				General Operations

**Schedule J**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

Name of the organization  
Jewish United Fund of Metropolitan Chicago

Employer identification number  
36-2167034

**Part I Questions Regarding Compensation**

	Yes	No								
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<b>b</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	<b>1b</b> Yes									
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	<b>2</b> Yes									
<p><b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<b>4</b> 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:										
<b>a</b> Receive a severance payment or change-of-control payment?	<b>4a</b>	No								
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?	<b>4b</b> Yes									
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?	<b>4c</b>	No								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>										
<b>5</b> 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:										
<b>a</b> The organization?	<b>5a</b>	No								
<b>b</b> Any related organization?	<b>5b</b>	No								
If "Yes," on line 5a or 5b, describe in Part III.										
<b>6</b> 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:										
<b>a</b> The organization?	<b>6a</b>	No								
<b>b</b> Any related organization?	<b>6b</b>	No								
If "Yes," on line 6a or 6b, describe in Part III.										
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	<b>7</b>	No								
<b>8</b> 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.	<b>8</b>	No								
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	<b>9</b>									





**Part III Supplemental Information**

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

Return Reference	Explanation
Part I, Line 1a	During 2019, JUF paid travel costs for the Executive Vice Chairman's wife, who accompanied him on business trips. The cost of travel was \$9,620. This amount was included in the Executive Vice Chairman's W-2 as reportable compensation. Social club dues are paid on behalf of appropriate employees conducting business at a private city club. The social club dues are a non-taxable benefit. No country club dues are paid by the organization.
Part I, Line 4b	<p>Michael Tarnoff: The Jewish Federation has an agreement with Michael Tarnoff which provides for annual payments of \$30,000 per year that began in 2009 and ended in 2019. In 2019, Michael Tarnoff received payments totaling \$12,500, representing the final remaining payments under the agreement. Steven B. Nasatir: In 1999 the Jewish Federation entered into an agreement with Steven Nasatir that was contingent upon 5 more years of service as president and CEO and would result in annual payments of \$50,000 per year (net of tax) beginning at age 64 and lasting throughout his lifetime. Dr. Nasatir began receiving payments under this agreement in 2009. During 2012, the Jewish Federation entered into a second agreement with Steven Nasatir which provides for annual payments of \$5,000 beginning April 1, 2015 and lasting throughout his lifetime. Dr. Nasatir completed another year of continuous employment at JUF in 2019 and as a result he vested in the following benefits: Benefit payments from the aforementioned agreements will continue for the longer of 1) 10 years through December 2028 or 2) his lifetime. In the event of his death prior to 2029, payments will be made to Dr. Nasatir's beneficiary. In connection with the vesting of this benefit, the present value of these future benefit payments, which was \$153,417, is included in his 2019 reportable compensation. This amount was not paid out in cash to Steven Nasatir in 2019. It represents a one-time actuarially determined figure that is taxable in accordance with the Internal Revenue Code. The \$50,000 and \$5,000 annual payment amounts are to be adjusted annually in accordance with the CPI index. In 2017, the Jewish Federation entered into a third agreement with Steven Nasatir which provides for annual payments of \$21,000 per year, beginning in 2018, for the longer of his lifetime or ten years (through December 2027). In 2019, Steven Nasatir received payments totaling \$105,120 from the three supplemental non-qualified retirement plans. In 2018, Steven Nasatir announced that he would be stepping down as President of JUF/Jewish Federation effective July 1, 2019 and will take on a new role as Executive Vice Chairman. Jeffrey Cohen: The Jewish Federation has an agreement with Jeffrey Cohen which provides for annual payments of \$21,000 per year that began in 2013 and will end in 2023. David Rosen: The Jewish Federation has an agreement with David Rosen which provides for annual payments of \$25,000 per year that began in 2018 and will end in 2028. In 2017, the Jewish Federation entered into a second agreement with David Rosen which provides for annual payments of \$25,000 beginning in 2022 and ending in 2032. This benefit is contingent on David Rosen maintaining his employment at JUF through January 1, 2022. Jay Tcath: JUF has an agreement with Jay Tcath that provides for annual payments of \$25,000 for 10 years commencing upon his retirement from JUF or if he is no longer employed by JUF, upon reaching age 64. In July 2018, JUF entered a split dollar life insurance agreement with Jay Tcath that will provide a death benefit of \$625,000 if he maintains his employment at JUF through June 2023. In addition, JUF and Mr. Tcath entered into another agreement that may provide 15 annual payments of approximately \$33,000 per year if Mr. Tcath maintains his employment at JUF.</p>

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 36-2167034  
**Name:** Jewish United Fund of Metropolitan Chicago

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1Dr Steven B Nasatir PhD Executive Vice Chairman	(i)	273,531	0	135,988	2,976	10,193	422,688	0
	(ii)	231,138	0	114,913	2,515	8,613	357,179	0
1David S Rosen Senior Vice President - Endowments	(i)	0	0	0	0	0	0	0
	(ii)	362,351	0	31,297	76,973	11,415	482,036	25,000
2Jay Tcath Executive Vice President	(i)	164,941	0	1,544	51,373	4,483	222,341	0
	(ii)	152,253	0	1,425	47,421	4,138	205,237	0
3Rabbi Louis A Lazovsky Vice President - Human Resources	(i)	203,354	0	2,344	122,012	8,322	336,032	0
	(ii)	50,838	0	586	30,503	2,081	84,008	0
4Lonnie Nasatir President	(i)	144,102	0	11,759	0	9,613	165,474	0
	(ii)	144,102	0	11,759	0	9,613	165,474	0
5David S Rubovits PhD Senior VP - Planning & Allocations	(i)	192,503	0	1,236	45,175	7,056	245,970	0
	(ii)	66,238	0	425	15,544	2,428	84,635	0
6Boaz Blumovitz Chief Financial Officer	(i)	152,356	0	278	9,232	2,728	164,594	0
	(ii)	152,355	0	278	9,232	2,728	164,593	0
7James Rosenberg Chief of Staff	(i)	259,537	0	557	49,232	1,187	310,513	0
	(ii)	0	0	0	0	0	0	0
8James A Pinkston Vice President - Accounting	(i)	202,149	0	0	11,736	8,276	222,161	0
	(ii)	67,383	0	0	3,912	2,759	74,054	0
9Peter Chiswick Controller	(i)	200,442	0	2,389	85,179	7,330	295,340	0
	(ii)	0	0	0	0	0	0	0
10Joy Schwartz Vice President - Communications	(i)	264,948	0	557	18,388	9,812	293,705	0
	(ii)	0	0	0	0	0	0	0
11Robert Schuckman Vice President - General Counsel	(i)	40,521	0	1,039	6,956	3,437	51,953	0
	(ii)	162,084	0	4,157	27,824	13,747	207,812	0
12David Prystowsky Vice President - Campaign	(i)	223,459	0	0	24,115	8,508	256,082	0
	(ii)	0	0	0	0	0	0	0
13Deborah Covington VP, Planning & Allocations	(i)	141,136	0	0	66,259	6,820	214,215	0
	(ii)	21,839	0	0	10,253	1,055	33,147	0
14Stuart Spector Vice President - Campaign Operations	(i)	190,284	0	81	34,820	7,018	232,203	0
	(ii)	0	0	0	0	0	0	0
15Jeffrey L Cohen Sr. Develop. Advisor, Former Officer	(i)	48,939	0	6,993	0	58	55,990	0
	(ii)	146,817	0	20,979	0	175	167,971	0
16Adina Torchman Assoc. VP-Fin. Resource Development	(i)	181,162	0	4,507	28,629	7,267	221,565	0
	(ii)	0	0	0	0	0	0	0
17Kedar Potdar Vice President - Technology	(i)	199,315	0	0	7,235	8,799	215,349	0
	(ii)	0	0	0	0	0	0	0
18Daniel Goldwin Exec. Director, Public Affairs	(i)	103,193	0	0	1,584	1,260	106,037	0
	(ii)	102,371	0	0	1,571	1,250	105,192	0
19Audra P Berg VP, Leadership Eng. & Board Rel.	(i)	47,277	0	18	4,704	2,522	54,521	0
	(ii)	110,313	0	41	10,976	5,885	127,215	0

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21 Michael Tarnoff Counselor to Pres., Former Officer	(i)	0	0	0	0	0	0	
	(ii)	----- 160,000	----- 0	----- 12,101	----- 4,229	----- 0	----- 176,330	

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047  
**2019**  
**Open to Public Inspection**

▶ **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](http://www.irs.gov/Form990) for the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Jewish United Fund of Metropolitan  
Chicago

**Employer identification number**  
36-2167034

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 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	842	6,517,979	Fair Market Value
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( _____ )				
26 Other ▶ ( _____ )				
27 Other ▶ ( _____ )				
28 Other ▶ ( _____ )				

**29** Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

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

**Part II** **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.

Return Reference	Explanation
Part I, Column (b):	Is the number of items contributed.

**SCHEDULE O**  
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019****Open to Public Inspection**

Department of the Treasury

Name of the organization

Jewish United Fund of Metropolitan Chicago

Employer identification number

36-2167034

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Section A, line 2	Lonnie Nasatir, President, and Steven B. Nasatir, Executive Vice Chairman, have a family relationship. Deborah Schrayner Karmin, Director, and Max Schrayner, Director, have a family relationship. Eric Rothner, Director, and Avi Rothner, Director, have a family relationship.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	Jewish Federation of Metropolitan Chicago (Federation) is the sole member of Jewish United Fund of Metropolitan Chicago (JUF).



## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, line 7a	The election of directors shall be held at the regular annual meeting of JUF/Federation. The Board of directors shall be identical with the Board of Directors of the Federation.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, line 11b	A copy of the Form 990 is provided to the Board Chairman and all Audit Committee members. The Audit Committee Chairman then informs the full Board of Directors that Committee members reviewed the Form 990 and a copy is made available to all board members.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Section B, line 12c	<p>A conflict of interest questionnaire is circulated to all board members (directors), officers and key employees on an annual basis. This process is managed by JUF's Vice President of Leadership Engagement and Board Relations. The completed questionnaires are reviewed by management and any conflicts are disclosed to the Board of Directors. If a director does have a conflict or business relationship with JUF, he or she is required to abstain from any votes related to that matter. The conflict of interest policy is monitored throughout the year. Additionally, we require board members, officers, and key employees to complete a Form 990 questionnaire each year.</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Section B, line 15	<p>JUF has a compensation committee comprised of the Board Chairman, Immediate Past Board Chairman, Audit Committee Chairman, and Overall Planning and Allocations (Budget) Committee Chairman. This committee uses comparable data from other large nonprofit organizations to ensure compensation for JUF executives is consistent with the market, including but not limited to a Total Compensation Survey of large city Jewish Federations that is coordinated through the national Jewish Federations of North America organization and conducted by the Hay Group, a nationally recognized expert in the field of compensation consulting. The compensation committee approves compensation for the President of JUF and other officers and key employees. The process for determining the compensation for officers and key employees is documented by the compensation committee's minutes.</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section C, line 18	The organization is a platinum-level Guidestar participant, demonstrating its commitment to transparency, and as such provides a link to GuideStar on its website for an electronic copy of the Form 990.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section C, line 19	The organization's governing documents, conflict of interest policy and audited financial statements are made available to all volunteer members of the Board of Directors and are posted on its website. With regards to the Form 990 and 990-T, the organization provides these documents upon request for the same period of disclosure as set forth in IRC Section 6104(d).

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part XI, line 9:	Pension-related changes other than pension expense -3,745,754. Other Non-Operating Activity -1,207,243.

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Jewish United Fund of Metropolitan  
Chicago

**Employer identification number**

36-2167034

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**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.

See Additional Data Table

(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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No



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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
<b>(1)</b> JFMC Pooled Endowment Portfolio LLC 30 S Wells Suite 4049 Chicago, IL 60606 45-1610644	See Sch. R, Part VII	IL	N/A	N/A				No			No	

**Part IV 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	(c) Legal domicile (state or foreign country)	(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	(i) Section 512(b)(13) controlled entity?	
								Yes	No
<b>(1)</b> Charitable Remainder Unitrusts (20)	Charitable Trust	IL	Jewish Federation of Metropolitan Chicago	T				Yes	
<b>(2)</b> Charitable Remainder Annuity Trusts (3)	Charitable Trust	IL	Jewish Federation of Metropolitan Chicago	T				Yes	

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part 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
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	Yes	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		No
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .	Yes	
<b>f</b> Dividends from related organization(s) . . . . .		No
<b>g</b> Sale of assets to related organization(s) . . . . .		No
<b>h</b> Purchase of assets from related organization(s) . . . . .		No
<b>i</b> Exchange of assets with related organization(s) . . . . .		No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .	Yes	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	Yes	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	Yes	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	Yes	
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	Yes	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .		No

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)Karl Perl Charitable Trust	C	300,000	Cash
(2)Crown Family Foundation	C	5,630,000	Cash
(3)JFMC Facilities Corporation	K	1,740,782	Cash
(4)Albert and Lucille Delighter & Marcella Winston Foundation	C	4,175,000	Cash



**Part VII**    **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

<b>Return Reference</b>	<b>Explanation</b>

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 36-2167034  
**Name:** Jewish United Fund of Metropolitan Chicago

**Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations**

(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 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
30 South Wells Suite 4049 Chicago, IL 60606 36-4018186	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 20-5488529	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-3864415	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4420871	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4341914	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4067510	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4018189	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 20-0120266	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 84-3411904	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
1270 Avenue of the Americas Suite 3 New York, NY 10020 36-3722029	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-3330462	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4380168	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-3857009	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4018187	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 90-0187252	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4157242	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4310755	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-3864416	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-2167761	Human Services	IL	501(c)(3)	Line 7	N/A		No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations							
(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 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
30 South Wells Suite 4049 Chicago, IL 60606 36-3368912	Property Management of Related Non-Profit Organizations	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 26-2053862	Supporting Organization	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 46-6113637	Support the Jewish United Fund	IL	501(c)(3)	Line 12a, I	Jewish United Fund of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-3662985	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4345181	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 31-1529058	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4244346	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
150 North Wacker Drive Suite 2320 Chicago, IL 60606 36-2170910	Private Foundation	IL	501(c)(3)	PF	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 32-0062771	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 20-1642012	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 30-0149729	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 20-3921714	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 20-5389086	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-3988995	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-7681597	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 20-5944850	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 30-0149723	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 20-0894628	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 81-1309979	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
71 S Wacker Drive Ste 4600 Chicago, IL 60606 36-3623264	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	

**Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations**

(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 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
30 South Wells Suite 4049 Chicago, IL 60606 36-4389423	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 20-4004517	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-4413031	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	
30 South Wells Suite 4049 Chicago, IL 60606 36-3833108	Supporting Foundation	IL	501(c)(3)	Line 12a, I	Jewish Federation of Metropolitan Chicago	Yes	