# **Return of Organization Exempt From Income Tax**

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

DLN: 93493135103068 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>

For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017 C Name of organization GREATER MIAMI JEWISH FEDERATION INC D Employer identification number B Check if applicable  $\square$  Address change 59-0624404  $\square$  Name change Doing business as ☐ Initial return Final ☐eturn/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return (305) 576-4000 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code Miami, FL 331373210 **G** Gross receipts \$ 71,723,134 Name and address of principal officer H(a) Is this a group return for JACOB SOLOMON ☐Yes ☑No subordinates? 4200 Biscayne BLvd H(b) Are all subordinates Miami, FL 33137 ☐ Yes ☐No ıncluded? I Tax-exempt status 4947(a)(1) or **✓** 501(c)(3) 501(c) ( ) ◀ (insert no ) □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ J Website: ► www jewishmiami org 4 | 4 | 9 | 4 | 0 | 0 | | 10 | 0 | 16 | 14 | 10 | 18 | 0 | 18 | 15 | | 16 | 7 | 3 |

| <b>K</b> Forr               | n of o | organization 🖸  | Z Corporation Trust Asso  | ociation  Other   | <b>L</b> Year of | formation 1938           | M State | of legal domicile FL   |  |  |
|-----------------------------|--------|-----------------|---|---|------------------|--------------------------|---------|------------------------|--|--|
| Pa                          | rt I   | Summa           | arv   |   |                  |                          |         |                        |  |  |
|                             |        | Briefly descri  |   | ed, strengthen<br>orld  |                  |                          |         |                        |  |  |
| EE .                        |        |                 |   |   |                  |                          |         |                        |  |  |
| Activities & Governance     |        |                 |   | scontinued its operations or disposed of<br>ng body (Part VI, line 1a)            |                  |                          | ssets 3 | 154                    |  |  |
| ~<br>~                      | 4      | Number of ı     | ndependent voting members of  | the governing body (Part VI, line 1b)   |                  |                          | 4       | 154                    |  |  |
| Ě                           | 5      | Total numbe     | 5   | 109   |                  |                          |         |                        |  |  |
| Ę                           | 6      | Total numbe     | 6   | 2,224   |                  |                          |         |                        |  |  |
| ⋖                           | 7a     | Total unrela    | 7a  | 0   |                  |                          |         |                        |  |  |
|                             | Ь      | Net unrelate    | ed business taxable income from   | m Form 990-T, line 34   |                  |                          | 7b      | 0                      |  |  |
|                             |        |                 |   |   |                  | Prior Year               | 1       | Current Year           |  |  |
| ٥.                          | 8      | Contribution    | ns and grants (Part VIII, line 1h   | )   |                  | 55,096,                  | 255     | 65,013,600             |  |  |
| Š                           | 9      | Program ser     | vice revenue (Part VIII, line 2g  | )   |                  |                          | 0       | 0                      |  |  |
| Ravenue                     | 10     | Investment      | income (Part VIII, column (A),  | lines 3, 4, and 7d )  |                  | 5,145,                   | 676     | 3,796,946              |  |  |
| α                           | 11     | Other reven     | ue (Part VIII, column (A), lines  | 5, 6d, 8c, 9c, 10c, and 11e)  |                  | 757,                     | 747     | 401,604                |  |  |
|                             | l      | Total revenu    | 678   | 69,212,150  |                  |                          |         |                        |  |  |
|                             | 13     | Grants and      | 248   | 41,282,648  |                  |                          |         |                        |  |  |
|                             | 14     | Benefits pai    | 0   | 0   |                  |                          |         |                        |  |  |
| S                           | l      |                 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 7,781,810 |   |                  |                          |         |                        |  |  |
| Se                          | l      |                 | a Professional fundraising fees (Part IX, column (A), line 11e)                             |   |                  |                          |         |                        |  |  |
| Expenses                    | Ι.     |                 | otal fundraising expenses (Part IX, column (D), line 25) ▶3,354,280                         |   |                  |                          |         |                        |  |  |
| ጃ                           | l      | Other exper     | 715   | 3,252,096   |                  |                          |         |                        |  |  |
|                             | l      | •               |   | ual Part IX, column (A), line 25)   |                  | 43,178,                  | _       | 52,072,577             |  |  |
|                             | l      | •               | s expenses Subtract line 18 fr  | 17,820,   |                  | 17,139,573               |         |                        |  |  |
| Net Assets or Fund Balances |        |                 | <u> </u>  |   | Begin            | ning of Current \        |         | End of Year            |  |  |
| age<br>age                  | 20     | Total assets    | (Part X, line 16)   |   |                  | 263,961,                 | 575     | 305,233,989            |  |  |
| ¥ ₩                         | ı      |                 |   |   |                  | 58,275,                  | 112     | 65,514,366             |  |  |
| ξĒ                          | I      |                 | or fund balances Subtract line  |   |                  | 205,686,                 |         | 239,719,623            |  |  |
| Pai                         |        |                 |   |   |                  |                          |         | , ,                    |  |  |
|                             | edge   | e and belief, i |   | ined this return, including accompanyir<br>Declaration of preparer (other than of |                  |                          |         |                        |  |  |
|                             |        | T <b>k</b>      |   |   |                  | 2018-05-15               |         |                        |  |  |
| Sign                        |        | Signature       | of officer  |   |                  | Date                     |         |                        |  |  |
| Here                        |        |                 | ardını CFO<br>rınt name and title   |   |                  |                          |         |                        |  |  |
|                             |        |                 | :/Type preparer's name  | Preparer's signature  | Date             |                          | PTIN    |                        |  |  |
| Paid                        | 4      |                 |   |   |                  | Check L If self-employed |         |                        |  |  |
| Pre <sub>l</sub>            |        | er Firm         | 's name 🕨   | -   | I                | Firm's EIN ►             |         |                        |  |  |
| Use                         |        | I Euron         | 's address ▶  |   |                  | Phone no                 |         |                        |  |  |
| ——<br>May t                 | he II  | RS discuss thi  | is return with the preparer show  | wn above? (see instructions)  |                  |                          |         | ′es 🗆 No               |  |  |
| For P                       | ape    | rwork Redu      | ction Act Notice, see the sep   | parate instructions.  | Cat I            | No 11282Y                |         | Form <b>990</b> (2016) |  |  |

|          | 1 990 (2016)   |  |  |   |   | Page <b>2</b> |
|----------|--|--|--|---|---|---------------|
| Pai      | t IIII Statement   | of Program Ser   | vice Accomplis   | hments  |   |               |
|          | Check if Sche  | edule O contains a re  | sponse or note to a  | any line in this Part III   |   | 🗆             |
| 1        | Briefly describe the   | organization's missio  | on   | •   |   |               |
| STRI     |  |  |  |   | AND FINANCIAL RESOURCES TO C<br>: OF THE JEWISH PEOPLE IN MIAN                      |               |
| 2        | _  | , -  |  | vices during the year   | which were not listed on  | ☐ Yes ☑ No    |
| 3        | If "Yes," describe the Did the organization services?  | □Yes ☑No   |  |   |   |               |
|          | If "Yes," describe the   | ese changes on Sche  | edule O  |   |   |               |
|          |  |  |  |   |   |               |
| 4        |  | nd 501(c)(4) organız   | ations are required  | to report the amount  | e largest program services, as me<br>of grants and allocations to other             |               |
| 4<br>4a  | Section 501(c)(3) ar   | nd 501(c)(4) organiz<br>nue, if any, for each  | ations are required<br>program service re                            | to report the amount<br>ported  | of grants and allocations to other  |               |
|          | Section 501(c)(3) are expenses, and rever  | nd 501(c)(4) organız   | ations are required  | to report the amount<br>ported  |   | rs, the total |
|          | Section 501(c)(3) are expenses, and rever  | nd 501(c)(4) organiz<br>nue, if any, for each  | ations are required<br>program service re                            | to report the amount<br>ported  | of grants and allocations to other  | rs, the total |
| 4a       | Section 501(c)(3) are expenses, and rever  (Code See Additional Data  (Code  | nd 501(c)(4) organiz<br>nue, if any, for each<br>) (Expenses \$  | ations are required<br>program service re<br>26,642,082              | to report the amount<br>ported<br>including grants of \$  | of grants and allocations to other 23,946,843 ) (Revenue \$                         | 0 )           |
| 4a<br>4b | Section 501(c)(3) are expenses, and rever  (Code See Additional Data  (Code See Additional Data                                  | nd 501(c)(4) organiz<br>nue, if any, for each<br>) (Expenses \$<br>) (Expenses \$  | ations are required<br>program service re<br>26,642,082<br>9,213,531 | to report the amount<br>ported  Including grants of \$  Including grants of \$                      | of grants and allocations to other 23,946,843 ) (Revenue \$ 9,213,531 ) (Revenue \$ | 0 ) 0 )       |
| 4a<br>4b | Section 501(c)(3) are expenses, and rever  (Code See Additional Data  (Code See Additional Data  (Code (Code See Additional Data | nd 501(c)(4) organization of the control of the con | 9,531,239  | to report the amount<br>ported  Including grants of \$  Including grants of \$                      | of grants and allocations to other 23,946,843 ) (Revenue \$ 9,213,531 ) (Revenue \$ | 0 ) 0 )       |
| 4a<br>4b | Section 501(c)(3) are expenses, and rever  (Code See Additional Data  (Code See Additional Data  (Code See Additional Data       | ) (Expenses \$  ) (Expenses \$  ) (Expenses \$  ) (Expenses \$  ces (Describe in Sch   | 9,531,239  | to report the amount ported  Including grants of \$  Including grants of \$  Including grants of \$ | of grants and allocations to other 23,946,843 ) (Revenue \$ 9,213,531 ) (Revenue \$ | 0 ) 0 )       |

or X as applicable

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞 . . . . . . . . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . . . . . .

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II . . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, Yes

Page 3

5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right 6 7

8

9

10

11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

4

Yes

Nο

Nο

Nο No Nο

Nο

Nο

No

Nο

Form 990 (2016)

29

No

Page 4

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Part IV Checklist of Required Schedules (continued)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees, If "Yes,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . . . . . . .

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . .

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

20a 20b 21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Yes

Yes

Form 990 (2016)

Yes

Yes

Yes

Yes

Yes

Nο

Νo

Nο

No

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Νo

Nο

| orm | 990 (2016)   |            |        | Page <b>5</b>   |
|-----|--|------------|--------|-----------------|
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance  |            |        |                 |
|     | Check if Schedule O contains a response or note to any line in this Part V   |            |        |                 |
|     |  |            | Yes    | No              |
|     | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 129  |            |        |                 |
| b   | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0  |            |        |                 |
| С   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   | <b>1</b> c | Yes    |                 |
|     | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by  |            |        |                 |
|     | this return  | 2b         | Yes    |                 |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)                   | 20         | 165    |                 |
| За  | Did the organization have unrelated business gross income of \$1,000 or more during the year?  | 3a         |        | No              |
| b   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O  | 3b         |        |                 |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a         | Yes    |                 |
|     | If "Yes," enter the name of the foreign country ►UK  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  |            | 165    |                 |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5a         |        | No              |
|     | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5b         |        | No              |
|     | If "Yes," to line 5a or 5b, did the organization file Form 8886-T?   | 30         |        |                 |
| C   | If res, to line 3a or 3b, did the organization line rollin 8686-17   | 5c         |        |                 |
|     | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?                                    | <b>6</b> a |        | No              |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  | <b>6</b> b |        |                 |
| 7   | Organizations that may receive deductible contributions under section 170(c).  |            |        |                 |
| а   | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  | 7a         | Yes    |                 |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7b         | Yes    |                 |
| С   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   | 7c         |        | No              |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year  |            |        |                 |
| e   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7e         |        | No              |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | 7f         |        | No              |
|     | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as   |            |        |                 |
| _   | required?  | 7g         |        |                 |
|     | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | 7h         |        |                 |
|     | Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?   | 8          |        |                 |
| 9a  | Did the sponsoring organization make any taxable distributions under section 4966?   | 9a         |        | No              |
| b   | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  | <b>9</b> b |        | No              |
| 10  | Section 501(c)(7) organizations. Enter   |            |        |                 |
| а   | Initiation fees and capital contributions included on Part VIII, line 12   10a   |            |        |                 |
| b   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b  |            |        |                 |
| L1  | Section 501(c)(12) organizations. Enter  |            |        |                 |
| а   | Gross income from members or shareholders  |            |        |                 |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )   |            |        |                 |
| 122 | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   | 12a        |        |                 |
|     | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  | a          |        |                 |
|     | Section 501(c)(29) qualified nonprofit health insurance issuers.   |            |        |                 |
| а   | Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O   |            |        |                 |
| b   | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  | 13a        |        |                 |
| С   | Enter the amount of reserves on hand   |            |        |                 |
|     | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a        |        | No              |
|     | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  | 14b        |        | <u> </u>        |
|     | 1. 100, had to med a form 720 to report these payments 11. 110, provide an explanation in schedule of 1. 1.  |            | orm 00 | <b>0</b> (2016) |

| orm 9      | 990 (2016)   |               |          | Page |
|------------|--|---------------|----------|------|
| Part       | <b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions                            | " respo       | nse to l |      |
|            | Check if Schedule O contains a response or note to any line in this Part VI  | <u> </u>      |          | ✓    |
| Sec        | tion A. Governing Body and Management  |               |          |      |
|            |  | $\overline{}$ | Yes      | No   |
|            | Enter the number of voting members of the governing body at the end of the tax year  134   |               |          |      |
|            | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O                                   |               |          |      |
| b I        | Enter the number of voting members included in line 1a, above, who are independent  1b 154   |               |          |      |
|            | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?  | 2             | Yes      |      |
|            | Did the organization delegate control over management duties customarily performed by or under the direct supervisior<br>of officers, directors or trustees, or key employees to a management company or other person?                             | 3             |          | No   |
| 4          | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   | 4             |          | No   |
| 5          | Did the organization become aware during the year of a significant diversion of the organization's assets? .   | 5             |          | No   |
| 6          | Did the organization have members or stockholders?   | 6             | Yes      |      |
| 7a         | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?   | 7a            | Yes      |      |
| <b>b</b> , | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  | 7b            |          | No   |
|            | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following   |               |          |      |
| a          | The governing body?  | 8a            | Yes      |      |
| b          | Each committee with authority to act on behalf of the governing body?  | 8b            | Yes      |      |
|            | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>                                | 9             |          | No   |
| Sec        | tion B. Policies (This Section B requests information about policies not required by the Internal Revenu   | e Code        | ∍.)      |      |
|            |  |               | Yes      | No   |
| 0a         | Did the organization have local chapters, branches, or affiliates?   | 10a           | Yes      |      |
|            | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?                         | 10b           | Yes      |      |
|            | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11a           | Yes      |      |
| b I        | Describe in Schedule O the process, if any, used by the organization to review this Form 990   |               |          |      |
|            | Did the organization have a written conflict of interest policy? If "No," go to line 13  | 12a           | Yes      |      |
|            | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b           | Yes      |      |
|            | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done   | 12c           | Yes      |      |
| 3          | Did the organization have a written whistleblower policy?  | 13            | Yes      |      |
| 4          | Did the organization have a written document retention and destruction policy?   | 14            | Yes      |      |
|            | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?                               |               |          |      |
| a ·        | The organization's CEO, Executive Director, or top management official   | 15a           | Yes      |      |
| b (        | Other officers or key employees of the organization  | 15b           | Yes      |      |
| :          | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)   |               |          |      |
|            | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  | 16a           |          | No   |
|            | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt |               |          |      |
|            | status with respect to such arrangements?  | 16b           |          |      |
|            | tion C. Disclosure   |               |          |      |
| 7          | List the States with which a copy of this Form 990 is required to be filed►<br>FL  |               |          |      |
|            | Section 6104 requires an organization to make its Form 1023 (or 1024 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                                 |               |          |      |
|            | Own website  |               |          |      |

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

| Form 990 (2016) |  |     |  |  |  |  |  |  |  |  |
|-----------------|--|-----|--|--|--|--|--|--|--|--|
| Part VII        | ompensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees,<br>nd Independent Contractors               |     |  |  |  |  |  |  |  |  |
|                 | Check if Schedule O contains a response or note to any line in this Part VII   |     |  |  |  |  |  |  |  |  |
| Section         | A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees   |     |  |  |  |  |  |  |  |  |
| La Complete     | e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's | tax |  |  |  |  |  |  |  |  |

year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

(B)

(A)

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(C)

(D)

Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensated employee Individual trustee or director Former organizations MISC) related Institutional Trustee below dotted employee organizations line) See Additional Data Table

(F)

(E)

| Part VII Section A. Officers, Dire  | ctors, Trustees  | , Key                             | Empl                  | loye                      | es,                        | and                             | High          | nest Compensat   | ed Employees (   | contir  | nued)                               |                                  |
|---|--|-----------------------------------|-----------------------|---------------------------|----------------------------|---------------------------------|---------------|--|--|---------|-------------------------------------|----------------------------------|
| <b>(A)</b><br>Name and Title  | (B) Average hours per week (list any hours for related | than o                            | one b                 | ox, u<br>in off<br>tor/tr | che<br>nles<br>icer<br>ust | and a                           | son           | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (V 2/1099-MISC) | v-      | (F) Estima amount o compens from to | ited<br>f other<br>sation<br>the |
|   | organizations<br>below dotted<br>line)                 | Individual trustee<br>or director | Institutional Trustee | Officer                   | Key employee               | Highest compensated<br>employee | Former        | 2/1099-113C)   | 2/1099-MI3C)   |         | relati<br>organiza                  | ed                               |
| See Additional Data Table   |  |                                   |                       |                           |                            |                                 |               |  |  |         |                                     |                                  |
|   |  |                                   |                       |                           |                            |                                 |               |  |  |         |                                     |                                  |
|   |  |                                   |                       |                           |                            |                                 |               |  |  | _       |                                     |                                  |
|   |  |                                   |                       | Н                         |                            |                                 |               |  | 1  | +       |                                     |                                  |
|   |  |                                   |                       |                           |                            |                                 |               |  |  | +       |                                     |                                  |
|   |  |                                   |                       |                           |                            |                                 |               |  |  |         |                                     |                                  |
|   |  |                                   |                       |                           |                            |                                 |               |  |  |         |                                     |                                  |
|   |  |                                   |                       |                           |                            |                                 |               |  |  |         |                                     |                                  |
|   |  |                                   |                       |                           |                            |                                 |               |  |  |         |                                     |                                  |
| c Total from continuation sheets to   | Part VII, Sectio                                       |                                   | · ·                   |                           |                            | <b>*</b>                        |               | 1,971,200  | (  | )       |                                     | 524,746                          |
| Total number of individuals (includir of reportable compensation from the compensat | ng but not limited                                     | to thos                           |                       |                           | oove                       | e) who                          | rece          | eived more than \$   | 100,000  |         |                                     |                                  |
|   |  |                                   |                       |                           |                            |                                 |               |  |  |         | Yes                                 | No                               |
| 3 Did the organization list any <b>forme</b><br>line 1a? <i>If "Yes," complete Schedule</i>   |  |                                   |                       |                           |                            | yee, o                          |               | -  | d employee on  | 3       |                                     | No                               |
| For any individual listed on line 1a, organization and related organization individual  |  |                                   |                       |                           |                            |                                 |               |  | m the  | 4       | Yes                                 |                                  |
| 5 Did any person listed on line 1a reconservices rendered to the organization   |  |                                   |                       |                           |                            |                                 |               |  | dividual for   | 5       | 103                                 | No.                              |
| Section B. Independent Contrac  | ctors  |                                   |                       |                           |                            |                                 |               |  |  |         |                                     |                                  |
| Complete this table for your five hig<br>from the organization Report comp  | hest compensate  | d indep                           | ender<br>vear         | nt cor                    | ntra                       | ctors<br>with o                 | that<br>r wit | received more tha  | n \$100,000 of com   | pensa   | ation                               |                                  |
|   | (A)<br>e and business addre                            |                                   | ,                     |                           |                            |                                 |               |  | (B) cription of services   |         | (C<br>Compen                        |                                  |
| United Health Care Insurance Co   |  |                                   |                       |                           |                            |                                 |               | Health Ins   |  |         |                                     | 541,428                          |
| 22703 Network Place<br>Chicago, IL 60673<br>Mass Mutual Financial Group   |  |                                   |                       |                           |                            |                                 |               | Pension Pla  | anc  |         |                                     | 205,782                          |
| PO Box 219007   |  |                                   |                       |                           |                            |                                 |               | rension Pi   |  |         |                                     | 203,702                          |
| Kansas City, MO 64121 Events By Premier   |  |                                   |                       |                           |                            |                                 |               | Catering fo  | r events   |         |                                     | 320,885                          |
| 20400 NE 30th Avenue<br>Aventura, FL 33180  |  |                                   |                       |                           |                            |                                 |               |  |  |         |                                     |                                  |
| Media Stage Inc   |  |                                   |                       |                           |                            |                                 |               | Audio Visu   | al   |         |                                     | 252,228                          |
| 350 International Parkway Sunrise, FL 33325 Kent Security Services  |  |                                   |                       |                           |                            |                                 |               | Security Se  | ervices  | $\perp$ |                                     | 166,154                          |
| 14600 Biscayne Blvd   |  |                                   |                       |                           |                            |                                 |               | Security 3   |  |         |                                     | 200,137                          |
| North Miami, FL 33181  7 Total number of independent contract.  | ors (includina but                                     | not lim                           | uted t                | o the                     | ose                        | listed                          | abov          | ve) who received n   | nore than \$100.000  | 0 of    |                                     |                                  |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ► 13

Page **8** 

|   |                                    | (2010)   |                  |          |                       |              |            |                    |                     | rage 3                           |
|---|------------------------------------|--|------------------|----------|-----------------------|--------------|------------|--------------------|---------------------|----------------------------------|
| Part  | VΙ                                 | <del></del>  |                  |          |                       |              |            |                    |                     |                                  |
|   |                                    | Check it Schedul                                     | e O contains     | a respo  | onse or note to any   | y line in th |            | (B)                | (c)                 |                                  |
|   |                                    |  |                  |          |                       | Total re     |            | Related or         | Unrelated           | Revenue                          |
|   |                                    |  |                  |          |                       |              |            | exempt<br>function | business<br>revenue | excluded from tax under sections |
|   |                                    |  |                  |          |                       |              |            | revenue            | revende             | 512-514                          |
| s   | 1                                  | a Federated campaigi                                 | ns               | 1a       | 20,362,806            |              |            |                    |                     |                                  |
| at the  | <b>b</b> Membership dues <b>1b</b> |  |                  |          |                       |              |            |                    |                     |                                  |
| Gr2<br>no:  |                                    | c Fundraising events                                 |                  | 1c       | 2,510,984             |              |            |                    |                     |                                  |
|   |                                    | d Related organizatio                                | ns               | 1d       | 0                     |              |            |                    |                     |                                  |
| ons, Gifts, Grants<br>Similar Amounts                     |                                    | e Government grants (co                              |                  |          |                       |              |            |                    |                     |                                  |
| S.E   |                                    |  |                  | 1e       | 314,853               |              |            |                    |                     |                                  |
| S   |                                    | f All other contributions,<br>and similar amounts no |                  | 1f       | 41,824,957            |              |            |                    |                     |                                  |
| Contributions, Gifts, Grants<br>and Other Similar Amounts |                                    | above  |                  |          | 11/02 1/307           |              |            |                    |                     |                                  |
| Ę ŏ   |                                    | g Noncash contribution in lines 1a-1f \$             |                  | 3 78     | 4,967                 |              |            |                    |                     |                                  |
| Contand   |                                    |  |                  |          |                       |              |            |                    |                     |                                  |
| <u> </u>  | ╀                                  | h Total.Add lines 1a-1                               | .f               |          | <del></del> -         |              | 013,600    |                    |                     |                                  |
| E e   | _                                  |  |                  |          | Busines               | s Code       |            |                    |                     |                                  |
| ۲÷۷   | 2a                                 |  |                  | _        |                       |              |            |                    |                     |                                  |
| Service Revenue   | Ŀ                                  | <b>.</b>   |                  |          |                       |              |            |                    |                     |                                  |
| <u>c</u>  | ۱,                                 | a ————   |                  |          |                       |              |            |                    |                     |                                  |
| <u>\$</u>   | ۱,                                 | d  |                  | _        |                       |              |            |                    |                     |                                  |
| 5   |                                    | e  |                  |          |                       |              |            |                    |                     |                                  |
| Program   | f                                  | f All other program se                               | rvice revenue    | •        |                       |              |            |                    |                     |                                  |
| Æ   | a                                  | J <b>Total.</b> Add lines 2a-2f                      | f                | _        | •                     | 0            |            |                    |                     |                                  |
|   | _                                  | Investment income (in                                |                  |          | ntarast and other     | . 1          |            |                    | T                   |                                  |
|   |                                    | similar amounts) .                                   |                  |          |                       | <b>▶</b>     | 3,796,946  | 3,796,94           | 6 0                 | 0                                |
|   | 4                                  | Income from investme                                 | ent of tax-exe   | empt bo  | ond proceeds          | •            | (          | D                  | 0 0                 | 0                                |
|   | 5                                  | Royalties  |                  |          |                       | •            | (          |                    | 0 0                 | 0                                |
|   |                                    |  | (ı) Rea          | I        | (II) Personal         |              |            |                    |                     |                                  |
|   | 6                                  | a Gross rents  |                  |          |                       |              |            |                    |                     |                                  |
|   | Ι.                                 | <b>b</b> Less rental expenses                        |                  | 52,003   |                       | 0            |            |                    |                     |                                  |
|   | '                                  | <b>D</b> Less Tental expenses                        |                  | ١        |                       | ١            |            |                    |                     |                                  |
|   | ١,                                 | c Rental income or                                   |                  | 52,003   |                       | 0            |            |                    |                     |                                  |
|   |                                    | (loss)   | Income or (loss) |          |                       |              |            |                    |                     |                                  |
|   | ۱ '                                | d Net rental income of                               |                  |          |                       |              | 52,000     | 52,00              | 3 0                 | 0                                |
|   | _                                  |  | (ı) Securi       | ties     | (II) Other            | _            |            |                    |                     |                                  |
|   | 7a                                 | a Gross amount<br>from sales of                      |                  |          |                       |              |            |                    |                     |                                  |
|   |                                    | assets other<br>than inventory                       |                  |          |                       |              |            |                    |                     |                                  |
|   | ١.                                 | <b>b</b> Less cost or                                | cost or          |          |                       | _            |            |                    |                     |                                  |
|   | '                                  | other basis and                                      |                  |          |                       |              |            |                    |                     |                                  |
|   | ١,                                 | sales expenses<br>C Gain or (loss)                   |                  | 0        |                       | 0            |            |                    |                     |                                  |
|   | l                                  | <b>d</b> Net gain or (loss)                          |                  |          | •                     | $\dashv$     |            |                    |                     |                                  |
|   |                                    | Gross income from fu                                 |                  | ents     |                       |              |            |                    |                     |                                  |
| <u>ə</u>  |                                    | (not including \$                                    | 0                |          |                       |              |            |                    |                     |                                  |
| 듄   |                                    | contributions reporte<br>See Part IV, line 18        |                  | . al     | 2,510,98 <sup>4</sup> | ,            |            |                    |                     |                                  |
| ě   | ١.                                 | <b>b</b> Less direct expenses                        |                  | b        | 2,510,984             | _            |            |                    |                     |                                  |
| Other Revenue   | l                                  | c Net income or (loss)                               |                  |          |                       |              | (          |                    |                     | 0                                |
| Нe  |                                    | Gross income from g                                  |                  |          | ents 🕨                | 1            |            |                    |                     |                                  |
| ō   |                                    | See Part IV, line 19                                 |                  |          |                       |              |            |                    |                     |                                  |
|   |                                    |  |                  | a        |                       |              |            |                    |                     |                                  |
|   |                                    | <b>b</b> Less direct expenses                        | s                | ь        |                       |              |            |                    |                     |                                  |
|   | ١ ١                                | c Net income or (loss)                               | from gaming      | activiti | es <b>&gt;</b>        |              |            |                    |                     |                                  |
|   | 10                                 | aGross sales of invent<br>returns and allowand       | ory, less        |          |                       |              |            |                    |                     |                                  |
|   |                                    | returns and anoware                                  |                  | a        |                       |              |            |                    |                     |                                  |
|   |                                    | <b>b</b> Less cost of goods s                        | old              | b        |                       | _            |            |                    |                     |                                  |
|   |                                    |  |                  | ,        | on.                   |              |            |                    |                     |                                  |
|   | -                                  | Net income or (loss)  Miscellaneous                  |                  | invent   | Business Code         |              |            |                    | 1                   |                                  |
|   | 1:                                 | 1a <sub>ADMINISTRATIVE</sub> FI                      |                  |          | 90009                 | 99           | 108,245    | 108,24             | 5 0                 | 0                                |
|   |                                    | ADMINISTRATIVE TI                                    | LE INCOME        |          |                       |              |            |                    |                     |                                  |
|   | ١.                                 |  |                  |          |                       | 20           | 10.202     | 10.20              | 2 0                 |                                  |
|   | '                                  | b CHAPLAINCY   |                  |          | 90009                 | 99           | 19,202     | 19,20              | 2                   | ٥                                |
|   |                                    |  |                  |          |                       |              |            |                    |                     |                                  |
|   | ۱ ،                                | с  |                  |          | - <del></del>         |              |            |                    |                     |                                  |
|   |                                    |  |                  |          |                       |              |            |                    |                     |                                  |
|   | ۱,                                 | d All other revenue .                                |                  |          |                       |              | 222,154    | 1 222,15           | 4 0                 | 0                                |
|   | ، ا                                | <b>e Total.</b> Add lines 11a                        | -11d             |          | •                     |              | 240.55     |                    |                     |                                  |
|   | 1:                                 | <b>2 Total revenue.</b> See                          | Instructions     |          |                       |              | 349,60     | <u>'</u>           | 1                   |                                  |
|   |                                    |  |                  |          |                       |              | 69,212,150 | 4,198,55           | 0 0                 | Form <b>990</b> (2016)           |
|   |                                    |  |                  |          |                       |              |            |                    |                     | TOTAL SEC (2010)                 |

| Form 990 (2016)  |                       |                              |                                     | Page <b>10</b>                   |
|--|-----------------------|------------------------------|-------------------------------------|----------------------------------|
| Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co  | Jumps All other ergs  | nizations must comp          | late column (A)                     |                                  |
| Check if Schedule O contains a response or note to any   | -                     | ·                            | • •                                 | 🗆                                |
| Do not include amounts reported on lines 6b,<br>7b, 8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses | (B) Program service expenses | (C) Management and general expenses | ( <b>D</b> ) Fundraisingexpenses |
| Grants and other assistance to domestic organizations and<br>domestic governments See Part IV, line 21   | 40,795,304            | 40,795,304                   |                                     |                                  |
| 2 Grants and other assistance to domestic individuals See Part IV, line 22   | 266,259               | 266,259                      |                                     |                                  |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16   | 221,085               | 221,085                      |                                     |                                  |
| 4 Benefits paid to or for members  |                       |                              |                                     |                                  |
| <b>5</b> Compensation of current officers, directors, trustees, and key employees  | 1,614,405             | 641,203                      | 370,222                             | 602,980                          |
| <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)   | 0                     |                              |                                     |                                  |
| 7 Other salaries and wages   | 4,567,689             | 1,844,692                    | 1,343,371                           | 1,379,626                        |
| <b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)   | 405,556               | 151,253                      | 104,935                             | 149,368                          |
| 9 Other employee benefits  | 516,161               | 192,504                      | 133,553                             | 190,104                          |
| <b>10</b> Payroll taxes  | 388,697               | 157,931                      | 113,480                             | 117,286                          |
| 11 Fees for services (non-employees)   |                       |                              |                                     |                                  |
| a Management   |                       |                              |                                     |                                  |
| <b>b</b> Legal   | 40,994                | 14,348                       | 4,099                               | 22,547                           |
| c Accounting   | 75,956                |                              | 75,956                              |                                  |
| d Lobbying   |                       |                              |                                     |                                  |
| e Professional fundraising services See Part IV, line 17   | 45,325                |                              |                                     | 45,325                           |
| f Investment management fees   | 650,578               |                              | 650,578                             |                                  |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)   |                       |                              |                                     |                                  |
| 12 Advertising and promotion   |                       |                              |                                     |                                  |
| 13 Office expenses   | 396,633               | 139,810                      | 168,822                             | 88,001                           |
| <b>14</b> Information technology   | 150,840               | 708                          | 44,837                              | 105,295                          |
| <b>15</b> Royalties  |                       |                              |                                     |                                  |
| <b>16</b> Occupancy  | 530,566               | 311,318                      | 69,227                              | 150,021                          |
| <b>17</b> Travel   | 68,727                | 46,796                       | 4,568                               | 17,363                           |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials .  |                       |                              |                                     |                                  |
| 19 Conferences, conventions, and meetings  | 120,916               | 58,724                       | 28,191                              | 34,001                           |
| <b>20</b> Interest   | 74,430                |                              | 74,430                              |                                  |
| <b>21</b> Payments to affiliates   | 0                     |                              |                                     |                                  |
| 22 Depreciation, depletion, and amortization   |                       |                              |                                     |                                  |
| 23 Insurance   | 116,708               | 40,848                       | 11,671                              | 64,189                           |
| 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O ) |                       |                              |                                     |                                  |
| a Campaign Community Outreach  | 497,712               | 271,052                      | 68,895                              | 157,765                          |

211,149

17,783

168,416

130,688

52,072,577

**b** Public Relations & Education

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ► ☐ If following SOP 98-2 (ASC 958-720)

d Subscriptions and Dues

e All other expenses

c Missions

36,046

6,046

151,826

39,099

45,386,852

40,882

3,201

8,195

12,332

3,331,445

134,221

8,536

8,395

79,257

3,354,280

Form **990** (2016)

Form 990 (2016)

14

15

16

17

18

19

20

21

23

24

33

34

Net

Liabilities 22 Intangible assets . . .

Grants payable . .

Deferred revenue .

Total net assets or fund balances

Total liabilities and net assets/fund balances

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

|     |        |   | (A)<br>Beginning of year |   | End of year |
|-----|--------|---|--------------------------|---|-------------|
|     | 1      | Cash–non-interest-bearing   |                          | 1 |             |
|     | 2      | Savings and temporary cash investments  | 22,667,256               | 2 | 24,250,174  |
|     | 3      | Pledges and grants receivable, net  | 8,999,905                | 3 | 10,290,653  |
|     | 4      | Accounts receivable, net  | 3,247,177                | 4 | 3,370,190   |
|     | 5      | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L   | 327,741                  | 5 | 268,413     |
| ets | 6<br>7 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L  Notes and loans receivable, net |                          | 6 |             |
| SSE | 8      | Inventories for sale or use   | 38.887                   | 8 | 40.900      |

|        |     | section 4958(f)(1)), persons described in sectio<br>contributing employers and sponsoring organiza-<br>voluntary employees' beneficiary organizations<br>Part II of Schedule L |             | 6          |             |        |           |
|--------|-----|--|-------------|------------|-------------|--------|-----------|
| ete    | 7   | Notes and loans receivable, net  |             | 7          |             |        |           |
| Assets | 8   | Inventories for sale or use  |             | 38,887     | 8           | 40,900 |           |
| ⋖      | 9   | Prepaid expenses and deferred charges  |             |            | 341,899     | 9      | 413,958   |
|        | 10a | a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  |             | 10,690,117 |             |        |           |
|        | b   | Less accumulated depreciation  | 10b         | 6,561,209  | 4,038,439   | 10c    | 4,128,908 |
|        | 11  | Investments—publicly traded securities .   | 141,539,887 | 11         | 136,058,598 |        |           |
|        | 12  | Investments—other securities See Part IV, line   | 72,171,081  | 12         | 114,772,658 |        |           |
|        | 13  | Investments—program-related See Part IV, line  |             |            | 13          |        |           |
|        |     |  |             |            |             |        |           |

14

16

17

18

19

20

21

22 23

24

33

34

11.639.537

305,233,989

1,490,829

19,878,518

1,231,673

3.500.000

239,719,623

305.233.989 Form **990** (2016)

10.589.303

263.961.575

1,927,744

18,247,531

1,602,143

3.500.000

205,686,463

263.961.575

|      | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24)  Complete Part X of Schedule D | 32,997,694  | 25 | 39,413,346  |
|------|----|---|-------------|----|-------------|
|      | 26 | Total liabilities. Add lines 17 through 25  | 58,275,112  | 26 | 65,514,366  |
| ces  |    | Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.   |             |    |             |
| lan  | 27 | Unrestricted net assets   | 154,070,478 | 27 | 183,816,941 |
| Bal  | 28 | Temporarily restricted net assets   | 35,964,583  | 28 | 40,386,807  |
| pun  | 29 | Permanently restricted net assets   | 15,651,402  | 29 | 15,515,875  |
| Ξ    |    | Organizations that do not follow SFAS 117 (ASC 958),  |             |    |             |
| s or | 30 | check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds   |             | 30 |             |
| sets | 31 | Paid-in or capital surplus, or land, building or equipment fund   |             | 31 |             |
| As   | 32 | Retained earnings, endowment, accumulated income, or other funds  |             | 32 |             |
|      |    |   |             |    |             |

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? 2c Yes 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? 3a No 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 3b

## Additional Data

Software ID: 16000425

**Software Version:** v1.00

FTN: 59-0624404

Name: GREATER MIAMI JEWISH FEDERATION INC.

Form 990 (2016)

# Form 990, Part III, Line 4a:

1.1 Education, Culture and Youth Services. The Greater Miami Jewish Federation is working to secure a strong Jewish future. Today 1 in 8 people in Miami's Jewish. community continues to depend on Federation and our local partners for some form of financial assistance. The Federation campaign funds over 100 agencies and programs in Miami, nationally, in Israel and in more than 70 other countries around the world. In fiscal year 16-17, 3,562 children were enrolled in 11 Federation-supported Jewish Day schools in Miami-Dade County, ranging from Kindergarten to 12th grade. The Federation provided \$1.854,710 in day school educational funding. More than half the students received scholarship assistance. For those students whose families still needed more help, Federation provided \$150,000 in additional hardship scholarship assistance to enable 173 students to remain in Day School, almost 1,400 students participated in 11 synagogue supplemental programs, enhancing their understanding and appreciation of our rich Jewish heritage, for which Federation provided \$80,000 in funding 2,000 young adults from Miami participated in Israel Experience Programs, including 1,000 who went on Taglit-Birthright Israel for which Federation provided \$211.526, 141 who received need-based Israel program scholarships for which Federation provided \$97,550, 50 attended Alexander Muss High School in Israel for which Federation provided \$145,645. Since its inception in December 1999, Birthright Israel has sent over 500,000 Jewish young adults to Israel, forever connecting them to our spiritual homeland and deepening their understanding of Israel's centrality to the Jewish people Over 8.000 Miami young adults have participated since the program's inception. Last year Federation awarded 194 need-based scholarships for first-time campers. enabling Miami- Dade children to attend Jewish overnight camps. Overnight summer camp ensures a positive connection for a youngster that lasts well into adulthood Having a strong Jewish presence on the college campus is critical today for students \$429,000 in Federation funding supports Hillel programs on seven university campuses throughout Florida, providing programming for 30,000 Jewish students More than 113,000 people visited the Holocaust Memorial of the Greater Miami Jewish Federation through informal visits and formal educational programs. Through Federation's Jewish Volunteer center's Young Lion of Judah program, 20 pre-Bar/Bat Mitzvah students were paired with 20 Miami area Holocaust survivors to share experiences. The Federation supports three Jewish Community Centers in Miami with an allocation of \$2,033,695, which provides programming and activities for members of all ages. Additionally, by grants from the Foundation of the Greater Miami Jewish Federation through Donor Advised Funds and Other Designated Funds, the Foundation is able to fulfill its charitable objectives, provide funds for emergencies, and develop resources necessary to address future opportunities and needs for the community

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

Overseas Programs and Services For nearly eight decades the Federation has been committed to the welfare of the Jewish people worldwide and ensuring that isolated Jews are not forgotten. In the Former Soviet Union (FSU), throughout Latin America and Europe and in more than 70 countries around the world Federation has supported programs and services that both care for the vulnerable aging populations and foster Jewish renewal among younger generations. Federation works with the Jewish Federations of North America and its overseas partners, the American Jewish Joint Distribution Committee (JDC) and the Jewish Agency for Israel (JAFI) Nearly 60,000 people are participating in JDC-sponsored renewal activities across the former Soviet Union particularly in Jewish Community Centers which have become a cornerstone of this effort. Federation funding supports \$252,000 in welfare relief which reaches 111,000 elderly Jewish clients in the FSU in more than 2800 locations, providing food. medicine and medical care, home care, winter relief and social services from 90 Hesed social welfare centers, operated by the JDC In the Former Soviet Union, JDC furnished critical nutritional and medical assistance to more than 15,000 at-risk Jewish children and their families JDC's volunteer initiative is now in 38 cities, with 2,600 volunteers running programs. In Europe, JDC provided food and essential welfare services for nearly 26,000 elderly Jews. JDC also helped 1,500 economically vulnerable Jewish children, connecting them and their families to Jewish life. In 16 communities across Argentina, JDC's team of 12 social workers works in close cooperation with Jewish communal leaders Through the Baby Care program, 40 families were assisted, through the Mezonot program, 511 individuals were assisted, and through the Byit program, 55 families were assisted. A JAFI operated supplementary Jewish education program for 12-to 17- year old children in Argentina served 2,000 youngsters in 60 centers Over 20,000 impoverished Jews in Argentina received food, medicine, clothing and other essential aid through 17 Social Assistance Centers operated by the JDC JAFI operated summer camps in the FSU with about 8,000 young people attending, about 3,000 FSU children attend JAFI Sunday schools, and more than 1,000 young adults are enrolled in leadership activities. Jewish communities in Morocco, Tunisia, Turkey and India receive support to care for elderly in facilities that provide residential care, full medical services, recreational and therapeutic services, excursions, and holiday events for residents. Federation allocated \$125,000 to help 64 children at risk and their families in our Partnership community of Yerucham, Israel through the Youth Futures Program, helping them achieve greater academic success and maturity. In 36 locations across Israel's socioeconomic and geographic periphery. Youth Futures provides interventions and empowerment to more than 4,000 at-risk children and teens and about 8,000 of their family members, including 95 in Miami's Israeli partnership city of Yerucham, enabling them to take their place as independent, productive members of society. To foster strong connections with the people of Israel, Federation, on behalf of Miami's Jewish community maintains successful partnerships with the city of Yerucham with an allocation of \$270,000 Federation also allocated \$90,000 to the initiative assisting the Ethiopian-Israeli community through mentoring programs of Ethiopian-Israeli university graduates, and a job placement program for Ethiopian-Israeli educators, as well as \$55,000 to a scholastic assistance program operating to provide after school tutoring, workshops, mentoring and enrichment in Pardes Channa/Karkur 4,000 Ethiopian Israeli students in 100 schools received afterschool schools received afterschools received after assistance through the Ethiopian National Project. In addition, 1,600 at-risk Ethiopian Israeli teenagers participated in activities at Ethiopian national project's 14 Youth Outreach Centers Federation's Women's Amutot initiative funds 24 non-profit agencies focusing exclusively on the welfare of marginalized, voiceless and at-risk women and girls in Israel A Federation funded emergency hotline for battered and sexually abused women in southern Israel received nearly 12,500 calls and provided information. counseling and support services to these families in crisis. These organizations focus on economic empowerment, social empowerment, protection against violence. prevention of violence, and leadership development. Federation provided \$256,000 toward this initiative Through JAFI's Mechinot program, providing 6 months of study. volunteerism and leadership training for young Israelis prior young adults are taughy self-reliance and communal responsibility. Mechinot offer programs for at-risk teens as well JAFI's Partnership2Gether, or P2G, connects the Jewish people by facilitating meaningful relationships between Israel and Diaspora Jewish communities. Nearly 550 communities are connected through more than 45 Partnerships, engaging more than 10,000 volunteers and 350,000 Jews each year JAFI's Choosing Tomorrow La'ad. serves isolated Holocaust survivors while cultivating the dedication and leadership skills of young people. Israeli university students who are interested in social activism undergo intensive training in a wide spectrum of subjects, including how to help Holocaust survivors fill out forms for government benefits, how to document their stories, how to ensure their basic needs are met, and more. The students are then paired up with local survivors who need their help, and they receive continued supervision and support while meeting regularly with the survivors. The skills the volunteers receive help develop their potential as lifelong leaders dedicated to addressing Israel's social challenges MASA Israel welcomed more than 10,000 Jewish young adults from around the world to participate in long-term Israel experiences that strengthen their Jewish identity and connection to Israel Through Leket Israel, 17,455 tons of food were rescued for redistribution to 200 nonprofit partners throughout Israel serving 175,000 of Israel's needy Federation also supports Bet Issie Shapiro, an organization that promotes social change though a three-pronged approach development and provision of cutting edge services, changing attitudes in society and advocating for better legislation, and sharing knowledge throughout Israel, as well as internationally, through research, consultation and training. An early intervention center supports 120 children with disabilities, and the family therapy center provides therapy to children with disabilities and their families. They are pioneers in using assistive technology as a tool for children with disabilities

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

humanitarian needs of people of all ages. The Federation helps those in need of food, housing transportation, counseling, socialization and more, all in a Jewish setting. The Jewish community's 24 hour Access and Information hobline operated by Jewish Community Services of South Florida received nearly 14,000 requests for assistance, many of which resulted in direct aid, referrals, counseling and emergency grant from Federation and our partner agencies. Over \$117,000 in emergency assistance grants were provided to 178 individuals or families in need. 13 interest free loans, amounting to \$55,000 for standard living expenses, dire needs, college tuition, home renovations, auto purchase and IVF treatments, were provided by the Hebrew Free Loan Association of South Florida. JWorks Miami, the Federation's community employment program, provided career counseling to 200 jobseekers and helped 197 people find employment. There were over 3,350 visits to the Jewish Community Services (JCS) Kosher Food Bank, serving over 700 adults and children. Through JCS home delivered and congregate meal programs, more than 165,000 kosher meals were provided to homebound seniors and at five sites across Miami-Dade County. These meals provided important nutrition and a community connection for seniors able to live independently in their homes. 600+ Holocaust survivors in Miami-Dade County received personalized and comprehensive case management services through JCS to assist with coordinating care, obtaining benefits and general support. There were 302,588 hours of in-home care provided to this population last year, in order to ensure that our Survivor community is

3 3 Human Services Programs, General/Other The Greater Miami Jewish Federation, through its network of beneficiary agencies and services, provides for the

able to live safely and independently. Last year, 23,000 Senior Rides transported elderly adults to the grocery store, pharmacy or doctor's office when they can no longer drive The purposes of these programs and similar type programs are to provide a mechanism to ensure the future viability of Miami's organized Jewish community. As part of this community outreach, the Federations Jewish Volunteer Center (JVC) promotes greater volunteer participation in the delivery of direct services, to expand the services agencies could provide at a lower cost, and to promote volunteerism as a way of enhancing Jewish identification and involvement. Also, there are programs which enhance volunteer involvement by assessing organizational needs, understanding current trends and issues, creating meaningful opportunities for volunteers, exploring volunteerism by infusing Jewish values, examining high quality models for volunteer recruitment, retention, and enhancement Offering one -time family friendly programs and ongoing individual activities, the JVC enabled almost 5,000 people to engage in acts of kindness and provided more than 16,000 hours of help to the community organizations in 2016-17, saving them about \$400,000 in paid time. With Federation support, JCS provided 60 at-risk and abused women and their children with case management, housing, food and legal and financial assistance, as well as day care for the children, through the Shalom Bayit Domestic Violence Prevention Program Through the Jewish Chaplaincy Program's Refuat Ha'Nefesh Jewish Spiritual Care Visiting Program, 30 chaplains and volunteers provided comfort, solace and joy to over 2,000 people experiencing a variety of personal difficulties. Advocating on behalf of Miami-Dade County's most vulnerable Jewish populations, the JCRC worked tirelessly with governmental leaders to ensure that over \$4 million in direct government funding of social services was provided to Federation partner agencies. Cumulatively, over \$ 6.45 million has been awarded in homeland security grants to Jewish institutions. The JCRC and Women's Philanthropy created the Task Force to Combat Human trafficking in 2015 to increase public awareness and concern about the dangers of this modern form of slavery and its prevalence in Miami-Dade County and Florida. The Federation has programs to increase Community Development and Leadership by reaching out to all constituencies, especially, North Dade, Women's Philanthropy, Agency Lay leaders and new donors to the Federation The purpose of the programs is to build community involvement in the Federation, educate future lay leaders, build a core of future leaders to lead Federation

and Agencies Educating the next generation of leaders has always been a focal point of Federation, as well as the oversight of program delivery systems. The PJ Library of Children through local funding Moishe House Miami, a Federation initiative with special funding from generous donors, based in an apartments in downtown Miami and a house in Aventura, organized by and for Jewish adults in their 20's, hosted 155 Shabbat, holiday, educational, community-service and social programs for more than 3,500 participants. Since March 2011, Federation has sent a weekly Community Post email to 71,000 people, highlighting select news events. Years ago, Federation embarked on a bold initiative through the creation of the Foundation for Jewish Renewal and a variety of programs were developed, including the High Holiday Welcome Project, which provides worship opportunities at no cost to more than 2,500 people annually. Through the Elevate Leadership Department, the Federation offers skills-based, multi-session leadership programs. In general, the programs consist of about six, three-hour sessions and include interactive learning covering general leadership, Jewish values and specifics about our organizational structure, philosophy and methodology, our partner agencies, and local demographics. Last year we awarded \$50,000 in Incubator Grants to help 11 Jewish nonprofits build capacity, spur innovation and serve unmet local needs in the areas of arts and culture, education, food insecurity, leadership development, inclusiveness and more. Additionally, by grants from the Foundation of the Greater Miami Jewish Federation through Donor Advised Funds and Other Designated Funds, the Foundation is able to fulfill its charitable objectives, provide funds for emergencies, and develop resources necessary to address future opportunities and needs for the community.

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099-Highest comper employee organization and Office Former Individual trust or director key employee Institutional organizations MISC) MISC) related below dotted organizations line)

|                    |    | T. | )डीसर |   | nsated |  |   |   |  |
|--------------------|----|----|-------|---|--------|--|---|---|--|
| Amy N Dean         | 25 | ., |       |   |        |  |   |   |  |
| CHAIR OF THE BOARD |    | ^  |       | × |        |  | ٥ | 0 |  |
|                    | 20 |    |       |   |        |  |   |   |  |

| Amy N Dean           | 25 | × | v |  |   |   | l |
|----------------------|----|---|---|--|---|---|---|
| CHAIR OF THE BOARD   |    | ^ | ^ |  |   |   |   |
| Robert G Berrin      | 20 | , | _ |  | 0 | 0 |   |
| IMMEDIATE PAST CHAIR |    | ^ | ^ |  | 0 |   |   |
| Robin Jacobs         | 10 |   |   |  |   |   | ī |

20

10

20

15

10

10

1 00

......

................

......

......

......

......

Х

Х

Х

Х

Х

Χ

Х

Х

Х

Х

Х

Х

Х

0

SECRETARY

TREASURER

VICE CHAIR

Isaac K Fisher

Jeffrey Scheck

Laura P Koffsky

Lily Serviansky

Michelle S Diener

VICE CHAIR

VICE CHAIR

VICE CHAIR

VICE CHAIR

VICE CHAIR

Hedy Whitebook

Elise Scheck Bonwitt

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related director below dotted organizations employee line) 10 Mojdeh Khaghan Danial ...... ......

| VICE CHAIR       |     |     |    |  |  |   |  |
|------------------|-----|-----|----|--|--|---|--|
| Paul Berkowitz   | 10  |     | ¥  |  | 0  | 0 |  |
| VICE CHAIR       |     | _ ^ | ^  |  | 9  | 0 |  |
| Ray Ellen Yarkın | 10  | ×   | X  |  | 0  | 0 |  |
| VICE CHAIR       |     | ^   | ,, |  | ,  |   |  |
| -                | 1.5 |     |    |  | , and the second |   |  |

10

1 00 15

10

10

................

......

................

...............

Х

Х

Х

Х

Χ

Х

Х

Х

Х

0

| Paul Berkowitz   | 10 | v |
|------------------|----|---|
| VICE CHAIR       |    | ^ |
| Ray Ellen Yarkın | 10 | · |
| VICE CHAIR       |    | ^ |
| Richard Yulman   | 15 |   |
|                  |    | × |

VICE CHAIR

VICE CHAIR

VICE CHAIR

Jacob Serfati

Matthew L Adler

BOARD MEMBER Adam Carlın

BOARD MEMBER

Sidney M Pertnoy

Steven Gretenstein

ASSOCIATE SECRETARY

ASSOCIATE TREASURER Aaron Podhurst

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Adam Lustig ...... Χ Х

BOARD MEMBER Alex Blavatnik BOARD MEMBER

Х

Х

Х

Х

Х

Х

Χ

Х

7 00

...............

Alex Halberstein

BOARD MEMBER Alfred Katzın

BOARD MEMBER Amy Chafetz

BOARD MEMBER Andrew Blank

BOARD MEMBER Andrew Hall

BOARD MEMBER

BOARD MEMBER Ariel Bentata

BOARD MEMBER Arnaud Karsenti

BOARD MEMBER

Andrew Wolf

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) 0

Х

Х

Х

Х

Χ

Х

0

......

. . . . . . . . . . . . . . . . . .

................

................

......

1 00

1 00

| Barbara Black Goldfarb | 2    | ×  |  |  |
|------------------------|------|----|--|--|
| BOARD MEMBER           | 3 00 | ,, |  |  |
| Barry Gurland          | 2    | x  |  |  |
| BOARD MEMBER           |      | ^  |  |  |
|                        |      |    |  |  |

Brian Bilzin BOARD MEMBER Bruce Kohrman

BOARD MEMBER Bunny Adler

BOARD MEMBER Clarita Kassin

BOARD MEMBER Daniel Ades

BOARD MEMBER Daniel Halberstein

**BOARD MEMBER** David Scharlin

BOARD MEMBER

Debra Wechsler

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line)

| Diane Lieberman | 2 | × |  |  | _ | 0   |  |
|-----------------|---|---|--|--|---|-----|--|
| BOARD MEMBER    |   | ^ |  |  | 9 | o o |  |
| Diane Schilit   | 5 | × |  |  | 0 | 0   |  |
| BOARD MEMBER    |   |   |  |  | Ů | J   |  |
| Donald Lefton   | 2 | × |  |  | 0 | 0   |  |

Χ

Х

Х

Х

Х

Χ

Х

0

| Diane Schilit   | 5 | ×   |  |  |  |
|-----------------|---|-----|--|--|--|
| BOARD MEMBER    |   |     |  |  |  |
| Donald Lefton   | 2 | ×   |  |  |  |
| BOARD MEMBER    |   | _ ^ |  |  |  |
| Donna Blaustein | 2 |     |  |  |  |

......

...............

................

......

...............

......

BOARD MEMBER Dorothy Podhurst

BOARD MEMBER Edward Beiner

BOARD MEMBER Edwin Farber

BOARD MEMBER Elaine Bloom

**BOARD MEMBER** Elisabeth Frank

BOARD MEMBER Elise Udelson

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional MISC) related organizations MISC) below dotted organizations employee line) Elizabeth Schwartz ...... Х ...... BOARD MEMBER

| Ellen Mandler<br>BOARD MEMBER | 2 | × |   |  |  |   | 0 | 0 |  |
|-------------------------------|---|---|---|--|--|---|---|---|--|
| Ellen Rose                    | 2 | x |   |  |  |   | 0 | 0 |  |
| BOARD MEMBER                  |   |   | l |  |  | l |   |   |  |

Х

Х

Χ

Х

0

|              |   | ΙX  | I |  |  | <br>1 (1 | 1 |
|--------------|---|-----|---|--|--|----------|---|
| BOARD MEMBER |   | .,  |   |  |  |          |   |
| Ellen Rose   | 2 |     |   |  |  |          |   |
| BOARD MEMBER |   | ^   |   |  |  | o o      |   |
| Ellie Ganz   | 2 |     |   |  |  | 0        |   |
| DOADD MEMBER |   | l ^ |   |  |  | l ~      | İ |

1 00

1 00

......

................

................

...............

......

Ezra Katz

BOARD MEMBER

Fanny Hanono

BOARD MEMBER Fran Berrin

**BOARD MEMBER** Gail Mevers

BOARD MEMBER Gary Gerson

| Ellen Rose   | 2 | × |  |  | 0 | 0 |  |
|--------------|---|---|--|--|---|---|--|
| BOARD MEMBER |   | ^ |  |  | , | , |  |
| Ellie Ganz   | 2 | × |  |  | 0 | 0 |  |
| BOARD MEMBER |   |   |  |  | Ţ | Į |  |
| Evelyn Katz  | 2 |   |  |  |   |   |  |

| BOARD MEMBER |      | ,, |  |  | , | , |   |
|--------------|------|----|--|--|---|---|---|
| Ellie Ganz   | 2    | ×  |  |  | 0 | 0 | 0 |
| BOARD MEMBER |      | ,, |  |  | , | Į |   |
| Evelyn Katz  | 2    | ×  |  |  | 0 | 0 |   |
| BOARD MEMBER | 1 00 | l  |  |  | ľ | Ĭ | Ĭ |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line)

Х

Х

Х

Х

Χ

Х

| Gary Yarus         | 2    | x  |
|--------------------|------|----|
| BOARD MEMBER       | 1 00 | ,, |
| George Feldenkreis | 2    | ., |
| BOARD MEMBER       |      | X  |
| Gloria Scharlin    | 2    |    |

BOARD MEMBER Hannah Shear

BOARD MEMBER Harry A Levy

BOARD MEMBER Harry Kroll

BOARD MEMBER Harry Smith

BOARD MEMBER Helen Chaset

**BOARD MEMBER** Helene Berger

BOARD MEMBER Howard Wolofsky

BOARD MEMBER

......

...............

................

................

...............

......

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related director below dotted organizations employee line) Ian Kaplan ...... Χ BOARD MEMBER Isaac Zelcer Х BOARD MEMBER Israel Lapciuc Х BOARD MEMBER Jacob Serfati Х **BOARD MEMBER** Janice Lipton Х

. . . . . . . . . . . . . . . . . .

................

...............

5 00

Х

Х

Х

Χ

Х

0

Jav Abramowitz

BOARD MEMBER

Jerry Sokol

Joel Levy

Joel Sandberg

John Bussel

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional MISC) related organizations MISC) below dotted organizations employee line) John Sumberg ...... Χ BOARD MEMBER 2 Jonathan Awner

| BOARD MEMBER    | ••••• | Х   |  |  | 0 | 0 |  |
|-----------------|-------|-----|--|--|---|---|--|
| Jonathan Berkun | 2     | v   |  |  | 0 | 0 |  |
| BOARD MEMBER    |       | ^   |  |  | 3 |   |  |
| Joseph Singer   | 2     |     |  |  | 0 | 0 |  |
| BOARD MEMBER    |       | _ ^ |  |  | 0 | 0 |  |
| Josh Rader      | 2     | ×   |  |  | 0 | 0 |  |

Х

Х

Χ

Х

0

...............

................

................

...............

BOARD MEMBER

Joy Spill

BOARD MEMBER Julie Bercow

BOARD MEMBER L Jules Arkın

**BOARD MEMBER** Larry Bassuk

BOARD MEMBER Larry Joseph

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Lawrence Schantz ...... Χ BOARD MEMBER Leonard Abess Х

Х

Х

Х

Х

Х

Χ

Х

. . . . . . . . . . . . . . . . . .

...............

1 00

BOARD MEMBER
Linda Schechter

BOARD MEMBER
Lisa Goldstein

BOARD MEMBER
Lourdes Suarez

Marc Levin

BOARD MEMBER
Mark Kravitz

BOARD MEMBER

BOARD MEMBER
Martin Goodman

BOARD MEMBER

Mauricio Sion

BOARD MEMBER

Mark Oren

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensate Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Trustee

|                 |      |      |  | d |   |   |  |
|-----------------|------|------|--|---|---|---|--|
| Maxine Schwartz | 5    | v    |  |   | 0 | 0 |  |
| BOARD MEMBER    |      | _ ^  |  |   | 0 | 0 |  |
| Melissa Buckner | 2    | ×    |  |   | 0 | 0 |  |
| BOARD MEMBER    | 1 00 | l '' |  |   | , | 3 |  |
| Mıchael Adler   | 2    |      |  |   | 0 | 0 |  |
| BOARD MEMBER    |      | ^    |  |   | ١ | U |  |

Х

Х

Х

Χ

Х

0

|                | 1 00 |   |
|----------------|------|---|
| Michael Adler  | 2    | ¥ |
| BOARD MEMBER   |      | ^ |
| Michael Scheck | 2    | ¥ |
| BOARD MEMBER   |      | ^ |

Michael Seidl

BOARD MEMBER Michael Simkins

BOARD MEMBER Michael Tabacinic

BOARD MEMBER Michael Wagner

**BOARD MEMBER** Michelle Ben-Aviv

BOARD MEMBER Mikki Futernick

BOARD MEMBER

...............

................

................

...............

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line)

| Morrie Siegel         |      | l x  |  |  | 0 | 0 |  |
|-----------------------|------|------|--|--|---|---|--|
| BOARD MEMBER          | 5 00 | l '' |  |  |   |   |  |
| Murray Laulicht       | 2    | v    |  |  | 0 | 0 |  |
| BOARD MEMBER          | 1 00 | ^    |  |  |   |   |  |
| Mytyl Sımancas-Bıster | 2    | .,   |  |  |   |   |  |

Х

Х

Х

Х

Χ

Х

0

......

...............

................

................

...............

......

| BOARD MEMBER          | 5 00 |   |
|-----------------------|------|---|
| Murray Laulicht       | 2    | _ |
| BOARD MEMBER          | 1 00 | ^ |
| Mytyl Sımancas-Bıster | 2    | v |
| BOARD MEMBER          |      | ^ |

Nancy Lipoff

BOARD MEMBER Nancy Lipoff

BOARD MEMBER Nedra Oren

BOARD MEMBER Nily Falic

BOARD MEMBER Noah Breakstone

**BOARD MEMBER** Noreen Sablotsky

BOARD MEMBER Norma Wilson

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Norman Braman

|               |      | I X |  | I | 1 0 | l |
|---------------|------|-----|--|---|-----|---|
| BOARD MEMBER  | 1 00 |     |  |   |     |   |
| Norman Lipoff | 2    | ×   |  |   | 0   |   |
| BOARD MEMBER  |      | ^   |  |   | J   |   |
| Paul Kruss    | 2    |     |  |   |     | · |

......

...............

................

................

...............

......

Х

Х

Х

Х

Х

Χ

Х

0

BOARD MEMBER
Raquel Scheck

BOARD MEMBER
Rebeca Delaster

BOARD MEMBER
Regina Zelonker

BOARD MEMBER
Richard Bernstein

BOARD MEMBER
Robert Gilbert

BOARD MEMBER
Robert Hertzberg

BOARD MEMBER
Robert Traurig

BOARD MEMBER

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related director below dotted organizations employee line) Robert Werner ...... Χ BOARD MEMBER Robyn Fisher Х BOARD MEMBER

Х

Х

Х

Х

Х

Χ

Х

......

................

...............

1 00

1 00

Ruben Kloda

BOARD MEMBER
Ryan Bailine

BOARD MEMBER
Saby Behar

BOARD MEMBER

Sara Beiar

BOARD MEMBER

BOARD MEMBER
Scott Wagner

BOARD MEMBER
Shana Russo

BOARD MEMBER

Shelley Groff

BOARD MEMBER

Scott Baena

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensated employee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line)

| Sheree Savar      | 2 | × |  |  | 0 |  |
|-------------------|---|---|--|--|---|--|
| BOARD MEMBER      |   | · |  |  |   |  |
| Stanley Weinstein | 2 | × |  |  | 0 |  |
| BOARD MEMBER      |   | ^ |  |  |   |  |
| Steven Brodie     | 2 | × |  |  | 0 |  |

......

. . . . . . . . . . . . . . . . . .

................

................

...............

Х

Х

Х

Х

Х

Χ

Х

0

BOARD MEMBER

Steven Hurwitz

BOARD MEMBER

Steven Kravitz

BOARD MEMBER

Steven Messina

BOARD MEMBER
Steven Scheck

BOARD MEMBER

Steven Wagner

BOARD MEMBER
Terri Bachow

BOARD MEMBER
Tobi Ash

BOARD MEMBER

Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation amount of other compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Office Highest compensa Former Individual trustee or director Institutional organizations MISC) MISC) related director below dotted organizations employee line) Truste

|                   |   |   | ग |  | ted |   |   |   |
|-------------------|---|---|---|--|-----|---|---|---|
| Tracey Spiegelman | 2 | × |   |  |     | 0 | 0 |   |
| BOARD MEMBER      |   |   |   |  |     |   |   | l |
| Wayne Chaplin     | 2 | × |   |  |     | 0 | 0 |   |
| BOARD MEMBER      |   | ^ |   |  |     |   | Ĭ |   |

| wayne chapiin  |   | ×  |  |  | a | 0 |
|----------------|---|----|--|--|---|---|
| BOARD MEMBER   |   | ., |  |  |   | , |
| William Lehman | 2 | ×  |  |  | 0 | 0 |
| BOARD MEMBER   |   | ,  |  |  | Ĭ | , |
| Yochanan Zweig | 2 |    |  |  |   |   |

40

40

37

3 00 40

40

37

3 00

......

. . . . . . . . . . . . . . . . . .

................

......

...............

Jacob Solomon

Jeffrev Y Levin

Oksana Cardını

Michelle Labgold

FORMER CFO

Stephen M Schwartz

PRESIDENT AND CHIEF EXECUTIVE OFFICER

CHIEF MARKETING AND COMMUNICATIONS OFFICER

CHIEF DEVELOPMENT OFFICER

CHIEF FINANCIAL OFFICER

CHIEF PLANNING OFFICER

Bonnie R Mechoullam

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

| William Lehman | 2 | ×  |  |  | 0 | 0  |  |
|----------------|---|----|--|--|---|--|--|
| BOARD MEMBER   |   |    |  |  |   | , and the second |  |
| Yochanan Zweig | 2 | ×  |  |  | 0 | 0  |  |
| BOARD MEMBER   |   | `` |  |  | Ĭ | Ŭ  |  |

Х

Х

Х

Х

Х

542,517

188,120

89,195

168,957

154,435

111,354

242,071

27,535

10,119

28,428

17,620

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation week (list person is both an officer from the from related and a director/trustee) any hours organization organizations

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

|                   |   | l                                 |                       | = |              |                              |        | 1 44 24 22 1         | (11) 3 (4 6 6 6      |  |
|-------------------|---|-----------------------------------|-----------------------|---|--------------|------------------------------|--------|----------------------|----------------------|--|
|                   | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional Trustee |   | key employee | Highest compensated employee | Former | (W- 2/1099-<br>MISC) | (W- 2/1099-<br>MISC) | organization and<br>related<br>organizations |
| Abbey Feinberg    | 40  |                                   |                       |   |              | x                            |        | 118,074              | 0                    | 120,134                                      |
| CAMPAIGN DIRECTOR |   |                                   |                       |   |              | ^                            |        | 118,074              | 0                    | 120,134                                      |
| Alon Ozer         | 40  |                                   |                       |   |              | х                            |        | 174,969              | 0                    | 17,820                                       |

(F)

Estimated

amount of other

compensation

from the

14,922

16,361

29,736

159,126

| Abbey Feinberg        | 40 |  |  | ,   | 110.074 |   |   |
|-----------------------|----|--|--|-----|---------|---|---|
| CAMPAIGN DIRECTOR     |    |  |  | ^   | 118,074 | U |   |
| Alon Ozer             | 40 |  |  | ×   | 174,969 | 0 |   |
| SR INVESTMENT OFFICER |    |  |  | _ ^ | 174,505 | Ŭ |   |
| Jıll Hagler           | 40 |  |  |     |         |   | · |

| SR INVESTMENT OFFICER   |    |  |  |   | ,       |   |  |
|-------------------------|----|--|--|---|---------|---|--|
| Jıll Hagler             | 40 |  |  | х | 116,744 | 0 |  |
| PRINCIPAL GIFTS OFFICER |    |  |  | ~ | 110,744 |   |  |
| Simon S Kaminetsky      | 40 |  |  |   |         |   |  |

| Jill Hagler             | 40 |  |  | × | 116,744 | 0 |   |
|-------------------------|----|--|--|---|---------|---|---|
| PRINCIPAL GIFTS OFFICER |    |  |  | ^ | 110,744 | 0 | 1 |
| Simon S Kaminetsky      | 40 |  |  |   |         |   |   |

| PRINCIPAL GIFTS OFFICER |    |  |  | Х | 116,744 | 0 |  |
|-------------------------|----|--|--|---|---------|---|--|
| Simon S Kaminetsky      | 40 |  |  | х | 147.709 | 0 |  |

40

PHILANTROPHIC GIFT DIRECTOR

Stephen Lande

FOUNDATION DIRECTOR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493135103068 TY 2016 Reasonable Cause Explanation Name: GREATER MIAMI JEWISH FEDERATION INC **EIN:** 59-0624404 **Software ID:** 16000425 **Software Version:** v1.00 **Explanation:** Information necessary to prepare a complete and accurate return was not available on time.

| efile | GR/      | APHIC prin                 | nt - DO NOT PROCES   | S As Filed Data -  |   |                                    | DLN: 9  | 3493135103068                                   |
|-------|----------|----------------------------|--|--|---|------------------------------------|---|---|
| SCH   | IED      | ULE A                      | Public   | c Charity Statu  | s and Pul                               | olic Supp                          | ort   | OMB No 1545-0047                                |
| (Fori | n 990    |                            |  | e organization is a sect   | ion 501(c)(3) d                         | organization o                     |   | 2016  |
| 990E  | Z)       |                            |  | 4947(a)(1) nonexe  ▶ Attach to Form  |   |                                    |   | 2010  |
| •     |          | the Treasury               | ► Information al   | bout Schedule A (Form  |   |                                    | uctions is at                                 | Open to Public<br>Inspection                    |
| Name  | of th    | ue Service<br>ne organiza  |  | <u>www.ns.g</u>  | <u>00/10/11/990</u> .                   |                                    | Employer identific                            | <u> </u>  |
| SREAT | ER MIA   | .MI JEWISH FE              | DERATION INC   |  |   |                                    | 59-0624404                                    |   |
| Par   |          |                            | for Public Charity St  |  |   |                                    | See instructions.                             |   |
|       | ganız:   |                            | a private foundation beca  | •  | •                                       | ,                                  | (4)(1)  |   |
| 1     |          | ,                          | onvention of churches, or  |  |   |                                    | )(A)(I).                                      |   |
| 2     |          |                            | scribed in <b>section 170(t</b>  |  | ,                                       |                                    |   |   |
| 3     |          | •                          | or a cooperative hospital s  | -  |   |                                    |   |   |
| 4     |          |                            | esearch organization ope<br>and state  | rated in conjunction with  | a hospital descri                       | bed in <b>section</b>              | 170(b)(1)(A)(iii). E                          | nter the hospital's                             |
| 5     |          |                            | ation operated for the ber<br>(iv). (Complete Part II )  | nefit of a college or unive  | rsity owned or op                       | perated by a gov                   | ernmental unit descri                         | bed in <b>section 170</b>                       |
| 6     |          | A federal, s               | tate, or local government  | t or governmental unit de  | escribed in <b>sectio</b>               | on 170(b)(1)(                      | 4)(v).  |   |
| 7     | <b>✓</b> | section 17                 | ation that normally receiv<br>( <b>0(b)(1)(A)(vi).</b> (Compl  | ete Part II )  |   |                                    | unit or from the gener                        | al public described in                          |
| 8     |          | A communi                  | ty trust described in <b>sect</b>  | ion 170(b)(1)(A)(vi)   | (Complete Part I                        | I )                                |   |   |
| 9     |          |                            | ural research organization<br>rant college of agriculture  |  |   |                                    |   | ege or university or a                          |
| LO    |          | from activit               | ation that normally receiv<br>nes related to its exempt<br>income and unrelated bu<br>see section 509(a)(2). | functions—subject to cer<br>isiness taxable income (le                         | tain exceptions, a                      | and (2) no more                    | than 331/3% of its su                         | pport from gross                                |
| 11    | П        | -                          | ation organized and opera  |  | r public safety S                       | ee section 509                     | )(a)(4).                                      |   |
| 12    |          | more public                | ation organized and opera<br>ly supported organization<br>through 12d that describ                           | ns described in <b>section 5</b>   | <b>09(a)(1)</b> or <b>sec</b>           | ction 509(a)(2                     | ). See <b>section 509</b> (a                  |   |
| а     |          | Type I. A so               | supporting organization of<br>n(s) the power to regular<br>Part IV, Sections A and                           | perated, supervised, or c<br>ly appoint or elect a majo                        | ontrolled by its s                      | upported organi                    | zation(s), typically by                       |   |
| b     |          | Type II. A<br>manageme     | supporting organization s<br>nt of the supporting organ<br>plete Part IV, Sections                           | supervised or controlled i<br>nization vested in the sai                       |   |                                    |   |   |
| С     |          | Type III fo                | unctionally integrated. organization(s) (see instru  | A supporting organizatio   |   |                                    |   | ited with, its                                  |
| d     |          | Type III n<br>functionally | on-functionally integrated The organization You must complete I  | ated. A supporting organ<br>ation generally must satis                         | ization operated<br>fy a distribution i | in connection w<br>requirement and | th its supported organ                        |   |
| e     |          | Check this                 | box if the organization re<br>or Type III non-functiona  | ceived a written determii  | nation from the II                      |                                    | ype I, Type II, Type II                       | I functionally                                  |
| f     | Enter    |                            | of supported organization  | ·  |   |                                    |   |   |
| g     |          |                            | ing information about the  | supported organization(  | s)                                      |                                    |   | •   |
| (i)Na | ame of   | f supported o              | organization (ii)EIN   | (iii) Type of organization (described on lines 1- 10 above (see instructions)) | (iv<br>Is the organiz<br>your governir  | ation listed in                    | Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|       |          |                            |  |  | Yes                                     | No                                 | 1   |   |
|       |          |                            |  |  |   |                                    |   |   |
|       |          |                            |  |  |   |                                    |   |   |
| Total |          |                            | tion Act Notice, see the   |  | Cat No 11285                            |                                    | <br>Schedule A (Form 9                        | <u> </u>  |

|             | Calendar year   | (a)2012              | <b>(b)</b> 2013                       | (c)2014              | (d)2015              | (e)2016              | (f)Total         |
|-------------|---|----------------------|---------------------------------------|----------------------|----------------------|----------------------|------------------|
| 1           | (or fiscal year beginning in) ► Gifts, grants, contributions, and         | ,,,,,,,,,            | (-,                                   | (-/                  | (,                   | (-,                  |                  |
| 1           | membership fees received (Do not  | 56,430,918           | 46,848,873                            | 48,171,087           | 55,096,255           | 65,013,600           | 271,560,733      |
|             | include any "unusual grant ")   |                      | , ,                                   |                      |                      |                      | · ·              |
| 2           | Tax revenues levied for the   |                      |                                       |                      |                      |                      |                  |
|             | organization's benefit and either paid to or expended on its behalf       | 0                    |                                       |                      |                      |                      | 0                |
|             | paid to or expended on its benan  |                      |                                       |                      |                      |                      |                  |
| 3           | The value of services or facilities                                       |                      |                                       |                      |                      |                      |                  |
|             | furnished by a governmental unit to                                       | 0                    |                                       |                      |                      |                      | 0                |
| ١.          | the organization without charge   | F6 420 010           | 46 040 073                            | 49 171 007           | FF 006 3FF           | 65.012.600           | 271 560 722      |
|             | <b>Total.</b> Add lines 1 through 3 The portion of total contributions by | 56,430,918           | 46,848,873                            | 48,171,087           | 55,096,255           | 65,013,600           | 271,560,733      |
| 3           | 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)                                       |                      |                                       |                      |                      |                      |                  |
| 6           | Public support. Subtract line 5   |                      |                                       |                      |                      |                      | 271 560 722      |
|             | from line 4   |                      |                                       |                      |                      |                      | 271,560,733      |
| _ <u>S</u>  | ection B. Total Support   |                      | · · · · · · · · · · · · · · · · · · · |                      |                      |                      |                  |
|             | Calendar year<br>(or fiscal year beginning in) ▶                          | (a)2012              | <b>(b)</b> 2013                       | (c)2014              | (d)2015              | <b>(e)</b> 2016      | <b>(f)</b> ⊤otal |
| 7           | Amounts from line 4   | 56,430,918           | 46,848,873                            | 48,171,087           | 55,096,255           | 65,013,600           | 271,560,733      |
| 8           | Gross income from interest,   | 20,130,310           | 10,010,013                            | 10,171,007           | 30,030,233           | 03,013,000           | 2,1,500,755      |
| _           | dividends, payments received on   |                      |                                       |                      |                      |                      |                  |
|             | securities loans, rents, royalties  | 2,440,423            | 1,831,046                             | 2,777,217            | 5,145,675            | 3,796,946            | 15,991,307       |
|             | and income from similar sources   |                      |                                       |                      |                      |                      |                  |
| 9           | Net income from unrelated   |                      |                                       |                      |                      |                      |                  |
| _           | business activities, whether or not                                       | n                    |                                       |                      |                      |                      | 0                |
|             | the business is regularly carried on                                      |                      |                                       |                      |                      |                      | · ·              |
| 10          | Other income Do not include gain  |                      |                                       |                      |                      |                      |                  |
| 10          | or loss from the sale of capital  | 1,659,367            | 1,749,137                             | 441,729              | 757,747              | 401,603              | 5,009,583        |
|             | assets (Explain in Part VI )  |                      |                                       |                      |                      |                      |                  |
| 11          | <b>Total support.</b> Add lines 7 through                                 |                      |                                       |                      |                      |                      | 292,561,623      |
| 12          | 10 Gross receipts from related activities,                                | etc (see instructi   | lI                                    |                      |                      | 12                   |                  |
| 13          |   | •                    | •                                     | 6                    | <b>.</b>             |                      |                  |
| 13          | First five years. If the Form 990 is f                                    | -                    |                                       |                      | •                    | · · · · · · <u>-</u> |                  |
|             | check this box and stop here  | <u> </u>             |                                       |                      |                      | <b>▶</b> ∟           |                  |
|             | ection C. Computation of Publi  |                      |                                       |                      |                      |                      |                  |
| 14          | Public support percentage for 2016 (I                                     | , , ,                | •                                     | column (f))          |                      | 14                   | 92 822 %         |
| 15          | Public support percentage for 2015 Sc                                     |                      |                                       |                      |                      | 15                   | 92 610 %         |
| <b>16</b> a | 33 1/3% support test—2016. If the   | e organization did   | not check the box                     | on line 13, and lin  | e 14 is 33 1/3% or   | more, check this l   |                  |
|             | and <b>stop here.</b> The organization qual                               |                      |                                       |                      |                      |                      | ightharpoons     |
| b           | <b>33</b> 1/3% support test— <b>2015.</b> If the                          | ne organization dic  | l not check a box o                   | on line 13 or 16a, a | and line 15 is 33 1/ | 3% or more, checl    | k this           |
|             | box and <b>stop here.</b> The organization                                | n qualifies as a pul | blicly supported or                   | ganization           |                      |                      | ▶ ☑              |
| 17a         | 10%-facts-and-circumstances tes   |                      |                                       |                      |                      |                      |                  |
|             | is 10% or more, and if the organization                                   |                      |                                       |                      |                      |                      |                  |

|             | the business is regularly carried on  | 0  |   |  |                     |                   | 0               |
|-------------|---|--|---|--|---------------------|-------------------|-----------------|
| 10          | Other income Do not include gain<br>or loss from the sale of capital<br>assets (Explain in Part VI)                             | 1,659,367  | 1,749,137                               | 441,729                                  | 757,747             | 401,603           | 5,009,583       |
| 11          | <b>Total support.</b> Add lines 7 through 10  |  |   |  |                     |                   | 292,561,623     |
| 12          | Gross receipts from related activities,   | etc (see instruction                             | ons)                                    |  |                     | 12                |                 |
| 13          | First five years. If the Form 990 is for  | or the organization                              | 's first, second, th                    | urd, fourth, or fifth                    | n tax year as a sec | tion 501(c)(3) or | ganization,     |
|             | check this box and <b>stop here</b>   |  |   |  |                     |                   |                 |
| S           | ection C. Computation of Publi  |  |   |  |                     |                   |                 |
| 14          | Public support percentage for 2016 (I   | ne 6, column (f) d                               | vided by line 11,                       | column (f))                              |                     | 14                | 92 822 %        |
| 15          | Public support percentage for 2015 Sc   | hedule A, Part II,                               | line 14                                 |  |                     | 15                | 92 610 %        |
| <b>16</b> a | <b>33 1/3% support test—2016.</b> If the  | e organization did i                             | not check the box                       | on line 13, and lir                      | ne 14 is 33 1/3% or | more, check thi   | s box           |
| Ь           | and stop here. The organization qual 33 1/3% support test—2015. If the  |  |   |  | and line 15 is 33 1 | /3% or more, che  | ► □<br>eck this |
| <b>17</b> a | box and <b>stop here.</b> The organization <b>10%-facts-and-circumstances tes</b> is 10% or more, and if the organization neets | t— <b>2016.</b> If the or<br>on meets the "facts | ganization did not<br>s-and-circumstanc | check a box on li<br>es" test, check thi | s box and stop he   | re. Explain       | ▶ ☑             |
| b           | organization  10%-facts-and-circumstances te 15 is 10% or more, and if the organi   |  |   |  |                     |                   | ▶ □             |

▶ 🗆 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 Schedule A (Form 990 or 990-EZ) 2016

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

| Section A. Public Support   |                 |                   |                    |                   |                   |                |
|-----------------------------|-----------------|-------------------|--------------------|-------------------|-------------------|----------------|
| the organization fails to o | qualify under t | he tests listed b | pelow, please co   | mplete Part II.   | )                 |                |
| (Complete only if you ch    | ecked the box   | on line 10 of Pa  | art I or it the or | ganization railed | a to qualify unde | er Part II. If |

| _  | the organization rans to  | <u> </u>   |  |                        | •                  | ,                              |                  |
|--|---|--|--|------------------------|--------------------|--------------------------------|------------------|
| 56   | ection A. Public Support  |  |  |                        |                    | 1                              |                  |
|  | Calendar year<br>(or fiscal year beginning in) ▶  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | (d)2015            | (e)2016                        | <b>(f)</b> Total |
| 1  | Gifts, grants, contributions, and   |  |  |                        |                    |                                |                  |
| -  | membership fees received (Do not  |  |  |                        |                    |                                |                  |
|  | include any "unusual grants")   |  |  |                        |                    |                                |                  |
| 2  | Gross receipts from admissions,   |  |  |                        |                    |                                |                  |
|  | merchandise sold or services  |  |  |                        |                    |                                |                  |
|  | performed, or facilities furnished in   |  |  |                        |                    |                                |                  |
|  | any activity that is related to the   |  |  |                        |                    |                                |                  |
|  | organization's tax-exempt purpose   |  |  |                        |                    |                                |                  |
| 3  | Gross receipts from activities that are   |  |  |                        |                    |                                |                  |
| •  | not an unrelated trade or business  |  |  |                        |                    |                                |                  |
|  | under section 513   |  |  |                        |                    |                                |                  |
| 4  | Tax revenues levied for the   |  |  |                        |                    |                                |                  |
|  | organization's benefit and either paid  |  |  |                        |                    |                                |                  |
| _  | to or expended on its behalf  |  |  |                        |                    |                                |                  |
| 5  | The value of services or facilities furnished by a governmental unit to   |  |  |                        |                    |                                |                  |
|  | the organization without charge   |  |  |                        |                    |                                |                  |
| 6  | Total. Add lines 1 through 5  |  |  |                        |                    |                                |                  |
|  | Amounts included on lines 1, 2, and   |  |  |                        |                    |                                |                  |
|  | 3 received from disqualified persons  |  |  |                        |                    |                                |                  |
|  |   |  |  |                        |                    |                                |                  |
| b  | Amounts included on lines 2 and 3   |  |  |                        |                    |                                |                  |
|  | received from other than disqualified   |  |  |                        |                    |                                |                  |
|  | persons that exceed the greater of<br>\$5,000 or 1% of the amount on line   |  |  |                        |                    |                                |                  |
|  | 13 for the year   |  |  |                        |                    |                                |                  |
| С  | Add lines 7a and 7b   |  |  |                        |                    |                                |                  |
| 8  | Public support. (Subtract line 7c   |  |  |                        |                    |                                |                  |
|  | from line 6 )   |  |  |                        |                    |                                |                  |
| Se   | ection B. Total Support   |  |  |                        |                    |                                |                  |
|  |   |  |  |                        |                    |                                |                  |
|  | Calendar year   | (2)2012  | (h)2012  | (5)2014                | /d\201E            | (0)2016                        | /f\Total         |
|  | (or fiscal year beginning in) ▶   | (a)2012  | <b>(b)</b> 2013  | (c)2014                | <b>(d)</b> 2015    | (e)2016                        | (f)Total         |
|  | (or fiscal year beginning in) ►<br>Amounts from line 6  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | <b>(d)</b> 2015    | (e)2016                        | (f)Total         |
|  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,   | (a)2012  | <b>(b)</b> 2013  | (c)2014                | <b>(d)</b> 2015    | (e)2016                        | (f)Total         |
| 9  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on   | (a)2012  | <b>(b)</b> 2013  | (c)2014                | (d)2015            | (e)2016                        | (f)Total         |
| 9  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | ( <b>d)</b> 2015   | (e)2016                        | (f)Total         |
| 9<br>L0a   | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | ( <b>d)</b> 2015   | (e)2016                        | (f)Total         |
| 9  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | ( <b>d)</b> 2015   | (e)2016                        | (f)Total         |
| 9<br>L0a   | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | ( <b>d)</b> 2015   | (e)2016                        | (f)Total         |
| 9<br>L0a<br>b  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | ( <b>d)</b> 2015   | (e)2016                        | (f)Total         |
| 9<br>LOa<br>b  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | ( <b>d)</b> 2015   | (e)2016                        | (f)Total         |
| 9<br>L0a<br>b  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business   | (a)2012  | <b>(b)</b> 2013  | (c)2014                | ( <b>d</b> )2015   | (e)2016                        | (f)Total         |
| 9<br>LOa<br>b  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | ( <b>d</b> )2015   | (e)2016                        | (f)Total         |
| 9<br>LOa<br>b  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is   | (a)2012  | <b>(b)</b> 2013  | (c)2014                | (d)2015            | (e)2016                        | (f)Total         |
| 9<br>l0a<br>b  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | (d)2015            | (e)2016                        | (f)Total         |
| 9<br>LOa<br>b  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is   | (a)2012  | <b>(b)</b> 2013  | (c)2014                | (d)2015            | (e)2016                        | (f)Total         |
| 9<br>l0a<br>b  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | (d)2015            | (e)2016                        | (f)Total         |
| 9<br>l0a<br>b<br>c<br>11   | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,  | (a)2012  | <b>(b)</b> 2013  | (c)2014                | (d)2015            | (e)2016                        | (f)Total         |
| 9<br>10a<br>b<br>c<br>11   | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12 )  |  |  |                        |                    |                                |                  |
| 9<br>10a<br>b<br>c<br>11   | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for   |  |  |                        |                    |                                | ganization,      |
| 9<br>lOa<br>b<br>c<br>11<br>12<br>13                                     | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here  | r the organization   | 's first, second, tl   |                        |                    |                                |                  |
| 9<br>10a<br>b<br>c<br>11<br>12<br>13<br>14                               | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here  | r the organization   | 's first, second, tl   | nird, fourth, or fiftl |                    | ection 501(c)(3) or            | ganization,      |
| 9<br>10a<br>b<br>c<br>11<br>12<br>13<br>14                               | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public S Public support percentage for 2016 (line)  | r the organization  Support Perce e 8, column (f) di   | 's first, second, tl<br>ntage<br>vided by line 13,   | nird, fourth, or fiftl |                    |                                | ganization,      |
| 9<br>10a<br>b<br>c<br>11<br>12<br>13<br>14<br><u>Se</u>                  | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here  | r the organization  Support Perce e 8, column (f) di   | 's first, second, tl<br>ntage<br>vided by line 13,   | nird, fourth, or fiftl |                    | ection 501(c)(3) or            | ganization,      |
| 9<br>l0a<br>b<br>c<br>11<br>12<br>13<br>14<br>Se<br>15                   | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public Section D. Computation of Investi  | r the organization  Support Perce e 8, column (f) di ichedule A, Part II  ment Income  | 's first, second, the second of the second o | column (f))            | n tax year as a se | ection 501(c)(3) or            | ganization,      |
| 9<br>LOa<br>b<br>c<br>11<br>12<br>13<br>14<br>S6<br>15<br>16<br>S6       | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public S Public support percentage from 2015 S  | r the organization  Support Perce e 8, column (f) di ichedule A, Part II  ment Income  | 's first, second, the second of the second o | column (f))            | n tax year as a se | ection 501(c)(3) or            | ganization,      |
| 9<br>l0a<br>b<br>c<br>11<br>12<br>13<br>14<br>Se<br>15<br>16<br>Se       | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public Section D. Computation of Investi  | r the organization  Support Perce e 8, column (f) di ichedule A, Part II  ment Income 16 (line 10c, colur                                  | 's first, second, the second of the second o | column (f))            | n tax year as a se | 15 16                          | ganization,      |
| 9<br>L0a<br>b<br>c<br>11<br>12<br>13<br>14<br>Se<br>15<br>16<br>Se<br>17 | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public section D. Computation of Investi Investment income percentage for 2016  | r the organization  Support Perce e 8, column (f) di ichedule A, Part II  ment Income 16 (line 10c, colur 015 Schedule A,                  | 's first, second, the second of the second o | column (f))            | n tax year as a se | 15 16 17 18                    | ganization,      |
| 9 l0a b c 11 12 13 14 Se 15 16 Se 17 18 19a                              | (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public section Public support percentage for 2016 (lin Public support percentage from 2015 Section D. Computation of Investi Investment income percentage from 2015 | r the organization  Support Perce e 8, column (f) di chedule A, Part II ment Income 16 (line 10c, colum 015 Schedule A, organization did r | 's first, second, the second of the second o | column (f))            | n tax year as a se | 15 16 17 18 n 33 1/3%, and lin | ganization,      |

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ightharpoons

ightharpoons

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

7

8

10a

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V ) Section A. All Supporting Organizations Yes No

| 1  | Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,                   |       |  |   |
|----|---|-------|--|---|
|    | describe the designation If historic and continuing relationship, explain   | 1     |  |   |
| 2  | Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described |       |  |   |
|    | ın section 509(a)(1) or (2)   | 2     |  |   |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)  |       |  |   |
|    | below   | 1 - ' |  | l |

|   | (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or (2)   | L |
|---|--|---|
|   | W 20010 305 (4)(1) 01 (2)  | L |
|   | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)   | Ĺ |
|   | below  | ſ |
| • | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the |   |

|    | III Section 309(a)(1) or (2)  | 2  | i |
|----|---|----|---|
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)  |    |   |
|    | below   | 3a |   |
| b  | the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the |    |   |
|    | determination   | 3b |   |
| c  | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?    |    |   |
|    | If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use                            | 3с | Ī |

|    | below   | 3a     |  |
|----|---|--------|--|
| b  | Did the organization confirm that each supported organization qualified under section $501(c)(4)$ , $(5)$ , or $(6)$ and satisfied the public support tests under section $509(a)(2)$ ? If "Yes," describe in <b>Part VI</b> when and how the organization made the |        |  |
|    | determination   | 3b     |  |
| С  | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?  |        |  |
|    | If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use  |        |  |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you   |        |  |
|    | checked 12a or 12b in Part I, answer (b) and (c) below  | 4a     |  |
|    | Did the eventualities have obtained and discussion in deciding whather to make make to the fewers commented   | $\Box$ |  |

|   |   | 30 | l |
|---|---|----|---|
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?  |    |   |
|   | If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use  | 3с |   |
| a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you   |    |   |
|   | checked 12a or 12b ın Part I, answer (b) and (c) below  | 4a |   |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported   |    |   |
|   | organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations | 4b |   |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections  |    |   |
|   | 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support  |    |   |
|   |   |    |   |

|    | to the foleigh supported organization was used exclusively for section 170(e)(2)(b) purposes  | 4c |  |
|----|---|----|--|
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by |    |  |
|    | amendment to the organizing document)   | 5a |  |
| b  | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?   | 5b |  |
| С  | Substitutions only. Was the substitution the result of an event beyond the organization's control?  | 5c |  |
| 6  | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its  |    |  |

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

| Par | ** Supporting Organizations (continued)  |              |          |          |  |
|-----|--|--------------|----------|----------|--|
|     |  |              | Yes      | No       |  |
| 11  | Has the organization accepted a gift or contribution from any of the following persons?  |              |          |          |  |
| а   | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the  |              |          |          |  |
|     | governing body of a supported organization?  | 11a          |          |          |  |
| b   | A family member of a person described in (a) above?  | 11b          |          |          |  |
| c   | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI   | 11c          |          |          |  |
| C-  | ection B. Type I Supporting Organizations  |              |          |          |  |
| se  | ection B. Type I Supporting Organizations  |              | Yes      | No       |  |
| 1   | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of   | ır 🗆         | 1.03     | ""       |  |
|     | elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa  |              |          |          |  |
|     | <b>VI</b> 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   | 1            |          |          |  |
| 2   | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that   |              |          |          |  |
|     | operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting             |              |          |          |  |
|     | organization   | 2            |          |          |  |
|     |  |              | •        | •        |  |
| Se  | ection C. Type II Supporting Organizations   |              | Yes      | N.       |  |
| 1   | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees   | of [         | res      | No       |  |
| 1   | were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the      | or           |          |          |  |
|     | supporting organization was vested in the same persons that controlled or managed the supported organization(s)  |              |          |          |  |
|     |  |              |          |          |  |
|     |  | 1            |          |          |  |
|     |  |              |          | •        |  |
| Se  | ection D. All Type III Supporting Organizations  |              | T.       |          |  |
|     | Did the appropriate provide to each of the growth of account to the last the cold of the cold of the   | ,            | Yes      | No       |  |
| 1   | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of      |              |          |          |  |
|     | 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?  | <u> </u>     | -        | <u> </u> |  |
| 2   | Were any of the organization's officers directors or trustoes either (1) appointed or elected by the supported   | n 1          |          |          |  |
| 2   | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization | "            |          |          |  |
|     | maintained a close and continuous working relationship with the supported organization(s)  | <u> </u>     |          |          |  |
| _   | Divinion of the valeting described in (2) did the surround of  | 2            |          |          |  |
| 3   | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t     |              |          |          |  |
|     | year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard   | 3            |          |          |  |
|     |  |              | 1        |          |  |
|     | ection E. Type III Functionally-Integrated Supporting Organizations  |              |          |          |  |
| 1   | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr   | actions)     |          |          |  |
| a   |  |              |          |          |  |
| b   |  |              |          |          |  |
| С   | The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity (  | see instru   | ictions) | )        |  |
|     |  |              |          |          |  |
| 2   | Activities Test Answer (a) and (b) below.  | _            | Yes      | No       |  |
| a   | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the   |              |          |          |  |
|     | supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supporte</b> organizations and explain how these activities directly furthered their exempt purposes, how the organization was               | <b>3</b>     |          |          |  |
|     | responsive to those supported organizations, and how the organization determined that these activities constituted   | <u> </u>     |          |          |  |
|     | substantially all of its activities  | 2a           |          |          |  |
| b   | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the             |              |          |          |  |
|     | organization's position that its supported organization(s) would have engaged in these activities but for the organization   | s            |          |          |  |
| _   | involvement  | 2b           |          |          |  |
| 3   | Parent of Supported Organizations Answer (a) and (b) below.  | _            |          |          |  |
| а   | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each<br>the supported organizations? Provide details in Part VI.   | of <b>3a</b> |          |          |  |
| h   | Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its  | <u> </u>     | 1        |          |  |
| ,   | supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard  | 3b           |          |          |  |
|     |  | ,            | 1        |          |  |

| 4 | Recoveries of prior-year distributions   |    |                |                                |
|---|--|----|----------------|--------------------------------|
| 3 | Other gross income (see instructions)  | 3  |                |                                |
| 4 | Add lines 1 through 3  | 4  |                |                                |
| 5 | Depreciation and depletion   | 5  |                |                                |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6  |                |                                |
| 7 | Other expenses (see instructions)  | 7  |                |                                |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)  | 8  |                |                                |
|   |  |    |                |                                |
|   | Section B - Minimum Asset Amount   |    | (A) Prior Year | (B) Current Year<br>(optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)   | 1  |                |                                |
| a | Average monthly value of securities  | 1a |                |                                |
| b | Average monthly cash balances  | 1b |                |                                |
| c | Fair market value of other non-exempt-use assets   | 1c |                |                                |
| d | Total (add lines 1a, 1b, and 1c)   | 1d |                |                                |
| е | <b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)   |    |                |                                |
| 2 | Acquisition indebtedness applicable to non-exempt use assets   | 2  |                |                                |
| 3 | Subtract line 2 from line 1d   | 3  |                |                                |
| 4 | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)  | 4  |                |                                |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3)   | 5  |                |                                |
| 6 | Multiply line 5 by 035   | 6  |                |                                |
| 7 | Recoveries of prior-year distributions   | 7  |                |                                |
| 8 | Minimum Asset Amount (add line 7 to line 6)  | 8  |                |                                |
|   |  |    |                |                                |
|   | Section C - Distributable Amount   |    |                | Current Year                   |
|   | Adjusted not income for prior year (from Section A. Line 9. Column A.)   |    |                |                                |

Adjusted net income for prior year (from Section A, line 8, Column A) 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency 6 temporary reduction (see instructions) Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) Schedule A (Form 990 or 990-F7) 2016

Schedule A (Form 990 or 990-EZ) (2016)

e Excess from 2016. . . .

| Schedule A (Form 990 or 990-EZ)                                  | 2016 Page <b>8</b>  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| lines 1, 2, 3b, 3c,<br>line 1; Part IV, Se<br>Section B, line 1e | Information. Inations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, ction D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this conal information. (See instructions). |  |  |  |  |  |  |
|  | Facts And Circumstances Test  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| 990 Schedule A, Supplemer  | ntal Information  |  |  |  |  |  |  |
| Return Reference   | Explanation   |  |  |  |  |  |  |
| Schedule A, Part II, Line 10                                     | OTHER INCOME INCLUDES ADMINISTRATIVE FEE INCOME AND CHAPLAINCY INCOME   |  |  |  |  |  |  |

Schedule A (Form 990 or 990-F7) 2016

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

## **Political Campaign and Lobbying Activities**

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 2016

DLN: 93493135103068

Open to Public Inspection

Department of the Treasury

**SCHEDULE C** (Form 990 or 990-

EZ)

Internal Revenue Service

| S S S S S S S S S S S S S S S S S S S | ection 5 Section 5 Section 5 Section 5 Section 5 Section 6 Section 6 Section 7 Section 7 Section 6 Section | io1(c)(3) organizations Con 501(c) (other than section 5 527 organizations Complet ization answered "Yes" or 501(c)(3) organizations that 501(c)(3) organizations that ization answered "Yes" or (see separate instructions 501(c)(4), (5), or (6) organize organization AMI JEWISH FEDERATION INC | n Form 990, Part IV, Line 4, or Form<br>have filed Form 5768 (election under<br>have NOT filed Form 5768 (election under<br>n Form 990, Part IV, Line 5 (Proxy Ta<br>s), then | te Part I-C ts I-A and C below  990-EZ, Part VI, In section 501(h)) Co under section 501(h ax) (see separate i | Do not co<br>ne 47 (Lob<br>omplete Pa<br>n)) Comple<br>instruction | mplete Part bying Activ int II-A Do nete Part II-B is) or Form  Employer 59-062440 | I-B<br>vities),<br>ot com<br>Do no<br>990-E<br>identi | then  plete Part II-let complete Part  Z, Part V, lin                          | 3<br>art II-A<br>e 35c                                      |
|---------------------------------------|--|--|---|--|--|--|---|--|---|
| 1<br>2<br>3                           | Politica   | e a description of the organ<br>al expenditures<br>seer hours  | ızatıon's dırect and ındırect political ca  | ampaign activities ii  | n Part IV  | •  | \$  |  |   |
| Par                                   | t I-B  | Complete if the organ  | nization is exempt under secti  | on 501(c)(3).  |  |  |   |  |   |
| 1                                     | Enter t  | the amount of any excise ta  | x incurred by the organization under :  | section 4955   |  | <b>&gt;</b>  | \$  |  |   |
| 2                                     | Enter t  | the amount of any excise ta  | x incurred by organization managers   | under section 4955   | i  | <b>•</b>   | \$  |  |   |
| 3                                     | If the   | organization incurred a sect   | ion 4955 tax, did it file Form 4720 for   | this year?   |  |  |   | ☐ Yes  | □ No  |
| 4a                                    | Was a  | correction made?   |   |  |  |  |   | ☐ Yes  | □ No  |
| ь                                     | If "Yes  | s," describe in Part IV  |   |  |  |  |   | □ res  | □ N0  |
|                                       | t I-C  |  | nization is exempt under secti  | on 501(c), exc   | ept secti  | on 501(c)  | (3).  |  |   |
| 1                                     | Enter 1  | the amount directly expende  | ed by the filing organization for section   | n 527 exempt func  | tion activiti  | es 🕨   | \$  |  |   |
| 2                                     |  |  | anization's funds contributed to other  | •  |  |  | •   |  |   |
|                                       |  | on activities  |   | -  |  | <b>&gt;</b>  | \$  |  |   |
| 3                                     | Total e  | exempt function expenditure  | es Add lines 1 and 2 Enter here and   | on Form 1120-POL,  | line 17b   | •  | \$  |  |   |
| 4                                     | Did the  | e filing organization file <b>Forr</b>   | n 1120-POL for this year?   |  |  |  | •   |  | □ No  |
| 5                                     | organı<br>of poli  | zation made payments For tical contributions received  | employer identification number (EIN) o<br>each organization listed, enter the an<br>that were promptly and directly delive<br>te (PAC) If additional space is needed          | nount paid from the<br>red to a separate p   | e filing orga<br>political org                                     | anızatıon's fu<br>anızatıon, sı  | unds A  | the filing<br>Also enter the   | amount  |
|                                       |  | (a) Name   | (b) Address   | (c) EIN  | filing   | ount paid fro<br>organization<br>If none, ent<br>-0-                               | 's  | (e) Amount contributions and promp directly deliv separate proganization enter | received<br>otly and<br>vered to a<br>political<br>If none, |
|                                       |  |  |   |  |  |  |   |  |   |
| !                                     |  |  |   |  |  |  |   |  |   |
| }                                     |  |  |   |  |  |  |   |  |   |
|                                       |  |  |   |  |  |  |   |  |   |
| i                                     |  |  |   |  |  |  |   |  |   |
| ;<br>                                 |  |  |   |  |  |  |   |  |   |
|                                       |  | 1 50 1 11 1 11 11 1  |   |  |  |  |   |  |   |

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

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

Grassroots nontaxable amount

Grassroots lobbying expenditures

|       | Form 5768 (election  | under section 501(h)).   |                              |  |                                 |              |
|-------|--|--|------------------------------|--|---------------------------------|--------------|
| For e | each "Yes" response on lines 1a through                                | 11 below, provide in Part IV a detailed description of the lobbying  | (a)                          |  | (b)                             |              |
| actıv | ,  |  | Yes                          | No   | Amou                            | nt           |
| 1     |  | ation attempt to influence foreign, national, state or local legislation,<br>blic opinion on a legislative matter or referendum, through the use of  |                              |  |                                 |              |
| а     | Volunteers?  |  | Yes                          |  |                                 |              |
| b     | Paid staff or management (include co                                   | mpensation in expenses reported on lines 1c through 1i)?   | Yes                          |  |                                 |              |
| С     | Media advertisements?  |  |                              | No   |                                 |              |
| d     | Mailings to members, legislators, or t                                 | he public?   | Yes                          |  |                                 | 117          |
| е     | Publications, or published or broadcas                                 | st statements?   | Yes                          |  |                                 | 1,288        |
| f     | Grants to other organizations for lobb                                 | ying purposes?   |                              | No   |                                 |              |
| g     | Direct contact with legislators, their s                               | taffs, government officials, or a legislative body?  | Yes                          |  |                                 | 16,645       |
| h     | Rallies, demonstrations, seminars, co                                  | nventions, speeches, lectures, or any similar means?   |                              | No   |                                 |              |
| i     | Other activities?  |  |                              | No   |                                 |              |
| j     | Total Add lines 1c through 1i  |  |                              |  |                                 | 18,050       |
| 2a    | Did the activities in line 1 cause the o                               | rganization to be not described in section 501(c)(3)?  |                              | No   |                                 |              |
| b     | If "Yes," enter the amount of any tax                                  | incurred under section 4912  |                              |  |                                 |              |
| C     | If "Yes," enter the amount of any tax                                  | incurred by organization managers under section 4912   |                              |  |                                 |              |
| d     | If the filing organization incurred a se                               | ction 4912 tax, did it file Form 4720 for this year?   |                              |  |                                 |              |
| Pai   | t III-A Complete if the organ (6).                                     | sization is exempt under section $501(c)(4)$ , section $501(c)$  | )(5), o                      | r secti                                    | on 501(                         | c)           |
|       | (0).   |  |                              |  | Yes                             | No           |
| 1     | Were substantially all (90% or more)                                   | dues received nondeductible by members?  |                              | Г  | 1                               |              |
| 2     | Did the organization make only in-hor                                  | use lobbying expenditures of \$2,000 or less?  |                              |  | 2                               |              |
| 3     | Did the organization agree to carry ov                                 | er lobbying and political expenditures from the prior year?  |                              |  | 3                               |              |
| Pai   |  | ization is exempt under section 501(c)(4), section 501(c   |                              |  |                                 | c)(6)        |
|       | and if either (a) BOTH answered "Yes."                                 | l Part III-A, lines 1 and 2, are answered "No" OR (b) Par  | t III-A                      | , line 3                                   | , is                            |              |
| 1     | Dues, assessments and similar amou                                     | nts from members   | 1                            |  |                                 |              |
| 2     | Section 162(e) nondeductible lobbyin expenses for which the section 52 | g and political expenditures (do not include amounts of political 27(f) tax was paid).   |                              |  |                                 |              |
| а     | Current year   |  | 2a                           |  |                                 |              |
| b     | Carryover from last year   |  | 2b                           |  |                                 |              |
| С     | Total  |  | 2c                           |  |                                 |              |
| 3     |  | 6033(e)(1)(A) notices of nondeductible section 162(e) dues   | 3                            |  |                                 |              |
| 4     |  | on line 2c exceeds the amount on line 3, what portion of the excess does<br>the reasonable estimate of nondeductible lobbying and political  |                              |  |                                 |              |
| 5     | '  | cal expenditures (see instructions)  | 5                            |  |                                 |              |
|       | Taxable amount of lobbying and politicate IV Supplemental Inform       |  |                              |  |                                 |              |
| Pro   | vide the descriptions required for Part I                              | -A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list)  | , Part II                    | A, lines                                   | 1 and 2 (s                      | ee           |
| ins   | <u> </u>   | mplete this part for any additional information  |                              |  |                                 |              |
|       | Return Reference   | Explanation  |                              |  |                                 |              |
| Sche  | GO'<br>SAF<br>PRO<br>ON  | EACTIVITIES ARE TO ENHANCE THE ABILITY OF THE FEDERATION TO ACTIVITIES ARE TO ENHANCE THE ABILITY OF THE FEDERATION TO ACTIVITIES AND ADMINISTRATIVE DECISION MAKING PROSEQUARD THE JEWISH COMMUNITY STATE GOVERNMENT SUPPORT FOR DECRAMS IN ADDITION, THE COMMITTEE LOOKS FOR THE OPPORTUNITY ISSUES THAT PROTECT THE FREEDOMS WHICH HAS ALLOWED THE JEWISHOLD AND THROUGHOUT THE UNITED STATES | CESSES<br>THE VIT.<br>TO EDU | IN ORDE<br>AL HEAL <sup>-</sup><br>CATE PC | ER TO<br>FH AND SO<br>OLICY MAK | OCIAL<br>ERS |

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

### Supplemental Financial Statements

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

DLN: 93493135103068 OMB No 1545-0047

(Form 990)

2

Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** GREATER MIAMI JEWISH FEDERATION INC 59-0624404 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 1 Total number at end of year 233 0 0 2 Aggregate value of contributions to (during 38,254,561 0 3 22,024,735 Aggregate value of grants from (during year) 128,343,886 0 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 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? ☐ No ✓ Yes Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > 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? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items 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 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

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

 $\boldsymbol{c} \ \ \text{Leasehold improvements}$ 

d Equipment . . .

e Other .

| Jene   | · · · · · · · · · · · · · · · · · · ·   | -111:  |  | 0.11   | C::  | rage Z   |
|--|---|--|--|--|--|--|
|  | t III Organizations Maintaining C   |  |  |  |  |  |
| 3  | Using the organization's acquisition, access items (check all that apply)   | ion, and other record  | ,  | following that are a   | significant use of it                                    | ts collection  |
| а  | Public exhibition   |  | d 🗌 Loa  | n or exchange prog   | rams   |  |
| b  | ☐ Scholarly research  |  | e 🗌 Oth  | er   |  |  |
| С  | Preservation for future generations   |  |  |  |  |  |
| 4  | Provide a description of the organization's of Part XIII  | collections and explain  | n how they further t   | he organization's ex   | kempt purpose in   |  |
| 5  | During the year, did the organization solicit assets to be sold to raise funds rather than  |  |  |  |  | es 🗆 No  |
| Par  | rt IV Escrow and Custodial Arrang<br>Complete if the organization an<br>X, line 21.   |  | orm 990, Part IV,  | line 9, or reporte   | ed an amount on  | Form 990, Part   |
| 1a   | Is the organization an agent, trustee, custo<br>included on Form 990, Part X?   | dian or other interme  | diary for contribution   | ns or other assets   | not 🗌 <b>Y</b>   | es 🗌 No  |
| b  | If "Yes," explain the arrangement in Part X   | III and complete the   | following table  |  | Amount   |  |
| c  | Beginning balance   |  | <b>-</b>   | 1c   |  |  |
| d  | Additions during the year   |  |  | 1d   |  |  |
| е  | Distributions during the year   |  |  | 1e   |  |  |
| f  | Ending balance  |  |  | 1f   |  |  |
| 2a   | Did the organization include an amount on   | Form 990, Part X, line   | e 21, for escrow or o  |  | ability?   | es 🗆 No  |
| b  | -   |  | •  |  | , L 1  |  |
| Pa   | ert V Endowment Funds. Complete   | if the organization  | answered "Yes"   | on Form 990, Par   | t IV, line 10.   | _  |
|  | <u> </u>  | (a)Current year  | (b)Prior year  | (c)Two years back  | (d)Three years back                                      | (e)Four years back   |
|  |   |  |  |  |  |  |
| 1a   | Beginning of year balance   | 57,675,983   | 58,183,594   | 61,946,291   | 51,797,973   | 44,091,719   |
|  | Beginning of year balance Contributions   | 57,675,983<br>1,719,216  |  | 61,946,291<br>484,833  | 3,686,188  |  |
| b  |   |  | 3,468,409  | <u> </u>   |  | 6,794,358  |
| b<br>c   | Contributions   | 1,719,216  | 3,468,409<br>-606,365  | 484,833<br>336,233   | 3,686,188<br>3,933,612                                   | 6,794,358<br>2,156,439   |
| b<br>c<br>d<br>e   | Contributions Net investment earnings, gains, and losses  | 1,719,216<br>3,508,252   | 3,468,409<br>2 -606,365<br>0   | 484,833<br>336,233   | 3,686,188<br>3,933,612<br>0                              | 6,794,358<br>2,156,439<br>0  |
| b<br>c<br>d<br>e   | Contributions  Net investment earnings, gains, and losses  Grants or scholarships  Other expenditures for facilities  | 1,719,216<br>3,508,252   | 3,468,409<br>-606,365<br>0 0<br>3,465,311                                | 484,833<br>336,233<br>0<br>4,682,000   | 3,686,188<br>3,933,612<br>0                              | 6,794,358<br>2,156,439<br>0<br>1,152,295   |
| b<br>c<br>d<br>e   | Contributions   | 1,719,216<br>3,508,252<br>0  | 3,468,409<br>-606,365<br>0<br>3,465,311<br>-95,656                       | 484,833<br>336,233<br>0<br>4,682,000   | 3,686,188<br>3,933,612<br>0<br>2,629,834                 | 6,794,358<br>2,156,439<br>0<br>1,152,295<br>92,248                               |
| b<br>c<br>d<br>e<br>f<br>g                                     | Contributions  Net investment earnings, gains, and losses Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses   | 1,719,216<br>3,508,252<br>0<br>598,462<br>99,679<br>62,205,310   | 3,468,409<br>-606,365<br>0 0<br>2 3,465,311<br>-95,656<br>57,675,983     | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594                  | 3,686,188<br>3,933,612<br>0<br>2,629,834<br>101,316      | 6,794,358<br>2,156,439<br>0<br>1,152,295<br>92,248                               |
| b<br>c<br>d<br>e<br>f<br>g                                     | Contributions  Net investment earnings, gains, and losses Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses  End of year balance  | 1,719,216<br>3,508,252<br>0<br>598,462<br>99,679<br>62,205,310   | 3,468,409<br>-606,365<br>0 0<br>2 3,465,311<br>-95,656<br>57,675,983     | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594                  | 3,686,188<br>3,933,612<br>0<br>2,629,834<br>101,316      | 6,794,358<br>2,156,439<br>0<br>1,152,295<br>92,248                               |
| b<br>c<br>d<br>e<br>f<br>g                                     | Contributions  Net investment earnings, gains, and losses Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses  End of year balance  Provide the estimated percentage of the cu  | 1,719,216<br>3,508,252<br>598,462<br>99,675<br>62,205,310  | 3,468,409<br>-606,365<br>0 0<br>2 3,465,311<br>-95,656<br>57,675,983     | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594                  | 3,686,188<br>3,933,612<br>0<br>2,629,834<br>101,316      | 6,794,358<br>2,156,439<br>0<br>1,152,295<br>92,248                               |
| b<br>c<br>d<br>e<br>f<br>g<br>2                                | Contributions   | 1,719,216<br>3,508,252<br>598,462<br>99,679<br>62,205,310<br>rrent year end balanc<br>7 %  | 3,468,409<br>-606,365<br>0 0<br>2 3,465,311<br>-95,656<br>57,675,983     | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594                  | 3,686,188<br>3,933,612<br>0<br>2,629,834<br>101,316      | 6,794,358<br>2,156,439<br>0<br>1,152,295<br>92,248                               |
| b c d e f g a b c  | Contributions   | 1,719,216 3,508,252 598,462 99,679 62,205,310 rrent year end balance 7 % 68 % ould equal 100%  | 3,468,409 -606,365 0 0 3,465,311 -95,656 57,675,983 e (line 1g, column ( | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594<br>a)) held as   | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623       | 6,794,358<br>2,156,439<br>0<br>1,152,295<br>92,248                               |
| b c d e f g a b c  | Contributions   | 1,719,216 3,508,252 598,462 99,679 62,205,310 rrent year end balance 7 % 68 % ould equal 100%  | 3,468,409 -606,365 0 0 3,465,311 -95,656 57,675,983 e (line 1g, column ( | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594<br>a)) held as   | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623       | 6,794,358<br>2,156,439<br>0<br>1,152,295<br>92,248<br>51,797,973                 |
| b c d e f g a b c  | Contributions   | 1,719,216 3,508,252 598,462 99,679 62,205,310 rrent year end balance 7 % 68 % ould equal 100%  | 3,468,409 -606,365 0 0 3,465,311 -95,656 57,675,983 e (line 1g, column ( | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594<br>a)) held as   | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623       | 6,794,358 2,156,439 0 1,152,295 92,248 51,797,973                                |
| b c d e f g a b c  | Contributions   | 1,719,216 3,508,252 598,462 99,679 62,205,310 rrent year end balance 7 % 68 % ould equal 100%  | 3,468,409 -606,365 0 0 3,465,311 -95,656 57,675,983 e (line 1g, column ( | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594<br>a)) held as   | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623       | 6,794,358<br>2,156,439<br>0<br>1,152,295<br>92,248<br>51,797,973                 |
| b<br>c<br>d<br>e<br>f<br>g<br>2<br>a<br>b<br>c                 | Contributions   | 1,719,216 3,508,252 598,462 99,679 62,205,310 rrent year end balance 7 % 68 % ould equal 100% ession of the organization.  | 3,468,409 -606,365 0 0 3,465,311 -95,656 57,675,983 e (line 1g, column ( | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594<br>a)) held as   | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623       | 6,794,358 2,156,439 0 1,152,295 92,248 51,797,973  Yes No Ba(i) Yes              |
| b c d e f g a b c  | Contributions  Net investment earnings, gains, and losses Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses  End of year balance  Provide the estimated percentage of the cu Board designated or quasi-endowment  Permanent endowment  25 %  Temporarily restricted endowment  The percentages on lines 2a, 2b, and 2c sh Are there endowment funds not in the possorganization by  (i) unrelated organizations  (ii) related organizations   | 1,719,216 3,508,252 598,462 99,679 62,205,310 rrent year end balance 7 % 68 % ould equal 100% ession of the organization   | 3,468,409 -606,365 0 0 3,465,311 -95,656 57,675,983 e (line 1g, column ( | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594<br>a)) held as   | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623       | 6,794,358 2,156,439 0 1,152,295 92,248 51,797,973  Yes No Ba(i) Yes Fa(ii) No    |
| b<br>c<br>d<br>e<br>f<br>g<br>2<br>a<br>b<br>c                 | Contributions  Net investment earnings, gains, and losses Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses  End of year balance  Provide the estimated percentage of the cu Board designated or quasi-endowment  Permanent endowment   7 Temporarily restricted endowment  The percentages on lines 2a, 2b, and 2c sh Are there endowment funds not in the possorganization by  (i) unrelated organizations  (ii) related organizations  If "Yes" on 3a(ii), are the related organizations   | 1,719,216 3,508,252 598,462 99,675 62,205,310 rrent year end balance 7 % 68 % ould equal 100% ession of the organization one listed as required the organization's endition.   | 3,468,409 -606,365 0 3,465,311 -95,656 57,675,983 ate (line 1g, column ( | 484,833<br>336,233<br>0<br>4,682,000<br>-98,237<br>58,183,594<br>a)) held as   | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623       | 6,794,358 2,156,439 0 1,152,295 92,248 51,797,973  Yes No Ba(i) Yes Ia(ii) No 3b |
| b<br>c<br>d<br>e<br>f<br>g<br>2<br>a<br>b<br>c                 | Contributions   | 1,719,216 3,508,252 598,462 99,679 62,205,310 rrent year end balance 7 % 68 % ould equal 100% ession of the organization on the organization of the organization on the organization of the organization on the organization of th | 3,468,409 -606,365 0 3,465,311 -95,656 57,675,983 ate (line 1g, column ( | 484,833 336,233 0 4,682,000 -98,237 58,183,594 a)) held as  nd administered fo | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623 r the | 6,794,358 2,156,439 0 1,152,295 92,248 51,797,973  Yes No Ba(i) Yes Ia(ii) No 3b |
| b<br>c<br>d<br>e<br>f<br>g<br>2<br>a<br>b<br>c<br>3a<br>b<br>4 | Contributions  Net investment earnings, gains, and losses Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses  End of year balance  Provide the estimated percentage of the cu Board designated or quasi-endowment ▶  Permanent endowment ▶ 25 %  Temporarily restricted endowment ▶  The percentages on lines 2a, 2b, and 2c sh Are there endowment funds not in the possorganization by  (i) unrelated organizations  (ii) related organizations  If "Yes" on 3a(ii), are the related organization Describe in Part XIII the intended uses of the cu  to | 1,719,216 3,508,252 598,462 99,679 62,205,310 rrent year end balance 7 % 68 % ould equal 100% ession of the organization on the organization of the organization on the organization of the organization on the organization of th | 3,468,409 -606,365 0 3,465,311 -95,656 57,675,983 at (line 1g, column (  | 484,833 336,233 0 4,682,000 -98,237 58,183,594 a)) held as  nd administered fo | 3,686,188 3,933,612 0 2,629,834 101,316 56,686,623 r the | 6,794,358 2,156,439 0 1,152,295 92,248 51,797,973  Yes No Ba(i) Yes Ia(ii) No 3b |

0

0

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

2,494,237

3,564,927

110,804

735,050

2,383,433

2,829,877

| Part VII Investments—Other Securities. Complete if t<br>See Form 990, Part X, line 12.  (a) Description of security or category                    | (b)Book value                 | (c)Method of valuation                                      |
|--|-------------------------------|---|
| (including name of security)   | (b)Book value                 | Cost or end-of-year market value                            |
| (1)Financial derivatives   |                               |   |
| (3)Other (A) ALTERNATIVE STRATAGIES  | 100,614,188                   | F   |
| (B) COMMODITIES  | 576,146                       | F   |
| (C) STATE OF ISRAEL BONDS  | 13,582,324                    | С   |
| (C)  |                               |   |
| (D)  |                               |   |
| (E)  |                               |   |
| F)   |                               |   |
| (G)  |                               |   |
| (H)  |                               |   |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12 )  | 114,772,658                   |   |
| Part VIII Investments—Program Related. Complete if   | the organization answei       | red '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<br>Cost or end-of-year market value |
| (1)  |                               | Cost of end-of-year market value                            |
| (2)  |                               |   |
| (3)  |                               |   |
| (4)  |                               |   |
| (5)  |                               |   |
| (6)  |                               |   |
| (7)  |                               |   |
| (8)  |                               |   |
| (9)  |                               |   |
|  |                               |   |
| <b>Part IX</b> Other Assets. Complete if the organization answere  | bd 'Yes' on Form 990, Part I\ | /, line 11d See Form 990, Part X, line 15                   |
| (a) Description  | on                            | (b) Book va   |
| (2)  |                               |   |
| (3)  |                               |   |
| (4)  |                               |   |
| (5)  |                               |   |
|  |                               |   |
| 6)   |                               |   |
| 77)  |                               |   |
| (8)  |                               |   |
| 9)   |                               |   |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. Complete if the organization of                        | answered 'Yes' on Form        | 990, Part IV, line 11e or 11f.                              |
| See Form 990, Part X, line 25.   |                               |   |
| ( ) 5  | (b) Book                      |   |
| (a) Description of liability   | (b) Book                      |   |
| (a) Description of liability   | (b) Book                      | 0   |
| 1. (a) Description of liability (1) Federal income taxes   |                               |   |
| (a) Description of liability (1) Federal income taxes  DBLIGATIONS TO AFFILIATED AGENCIES  |                               | 0   |
| (a) Description of liability  (1) Federal income taxes  DBLIGATIONS TO AFFILIATED AGENCIES  SPLIT INTEREST AGREEMENT  DTHER LIABILITIES            |                               | 0<br>33,753,440   |
| (a) Description of liability (1) Federal income taxes  OBLIGATIONS TO AFFILIATED AGENCIES  SPLIT INTEREST AGREEMENT  OTHER LIABILITIES             |                               | 0<br>33,753,440<br>2,915,157                                |
| (a) Description of liability (1) Federal income taxes  OBLIGATIONS TO AFFILIATED AGENCIES  SPLIT INTEREST AGREEMENT  OTHER LIABILITIES (4)         |                               | 0<br>33,753,440<br>2,915,157                                |
| (a) Description of liability (1) Federal income taxes  DBLIGATIONS TO AFFILIATED AGENCIES  SPLIT INTEREST AGREEMENT  DTHER LIABILITIES (4) (5)     |                               | 0<br>33,753,440<br>2,915,157                                |
|  |                               | 0<br>33,753,440<br>2,915,157                                |
| (a) Description of liability (1) Federal income taxes  OBLIGATIONS TO AFFILIATED AGENCIES  SPLIT INTEREST AGREEMENT  OTHER LIABILITIES (4) (5) (6) |                               | 0<br>33,753,440<br>2,915,157                                |
| (a) Description of liability (1) Federal income taxes  OBLIGATIONS TO AFFILIATED AGENCIES  SPLIT INTEREST AGREEMENT  OTHER LIABILITIES (4) (5)     |                               | 0<br>33,753,440<br>2,915,157                                |

Part XI

2

d

е

3

4

5

1

2

b

d

е 3

а

b

c

Part XIII

5

4

b

Part XII

Schedule D (Form 990) 2016

Page 4

22,535,812

68,776,550

435,600

69,212,150

54,247,953

2,175,376

52.072.577

52,072,577

Schedule D (Form 990) 2015

Donated services and use of facilities .

Prior year adjustments . . . .

Other (Describe in Part XIII ) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Other (Describe in Part XIII ) . .

Add lines 2a through 2d . . . Subtract line 2e from line 1 . Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b. Other (Describe in Part XIII ) . . . . . Add lines 4a and 4b . .

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Other (Describe in Part XIII ) . . . . .

Supplemental Information

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . . Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Total expenses and losses per audited financial statements .

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

Amounts included on line 1 but not on Form 990, Part IX, line 25

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

2a

2b

2c

2d

4b

Explanation

2a

2b

2c

2d

435,600 0

435,600

1,739,776

0

2e

3

4c

5

16,893,587

435,600

5,206,625

2e

3

4c

| Schedule D (Form 990) 2015                 | Page <b>5</b> |
|--|---------------|
| Part XIII Supplemental Information (contin | ued)          |
| Return Reference                           | Explanation   |
|  |               |
|  |               |
|  |               |
|  |               |
|  |               |
|  |               |
|  |               |
|  |               |
|  |               |

Schedule D (Form 990) 2016

#### Additional Data

Software ID: 16000425
Software Version: v1.00

**EIN:** 59-0624404

Name: GREATER MIAMI JEWISH FEDERATION INC

|  | Supp | <u>lemental</u> | Inform | atio |
|--|------|-----------------|--------|------|
|--|------|-----------------|--------|------|

# Return Reference Explanation

Schedule D, Part V, Line 4

THE ENDOWMENT FUNDS ARE USED FOR CHARITABLE, SCIENTIFIC AND EDUCATIONAL PURPOSES AND IN FURTHERANCE OF THE CHARITABLE MISSION OF THE GREATER MIAMI JEWISH FEDERATION

| Supplemental Information   |  |
|----------------------------|--|
| Return Reference           | Explanation  |
| Schedule D, Part X, Line 2 | THE FEDERATION IS A NONPROFIT CORPORATION WHOSE REVENUE IS DERIVED FROM CONTRIBUTIONS AND OTHER FUND RAISING ACTIVITIES THE FEDERATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SE CTION 501 (C) (3) OF THE INTERNAL REVENUE CODE OF 1986 THERE IS NO UNRELATED BUSINESS INC OME TAX FOR FOR THE YEARS ENDED JUNE 30, 2017 AND 2016 THE FEDERATION RECOGNIZES AND MEAS URES TAX POSITIONS BASED ON THEIR TECHNICAL MERIT AND ASSESSES THE LIKELIHOOD THAT THE POS ITIONS WILL BE SUSTAINED UPON EXAMINATION BASED ON THE FACTS, CIRCUMSTANCES AND INFORMATIO N AVAILABLE AT THE END OF EACH PERIOD INTEREST AND PENALTIES ON TAX LIABILITIES, IF ANY, WOULD BE RECORDED IN INTEREST EXPENSE AND OTHER NON-INTEREST EXPENSE, RESPECTIVELY THE USS FEDERAL JURISDICTION IS THE MAJOR TAX JURISDICTION WHERE THE FEDERATION FILES INFORMATION AND AND AND AND AND AND AND AND AND AN |

| Supplemental Information     |  |
|------------------------------|--|
| Return Reference             | Explanation  |
| Schedule D, Part XI, Line 2d | EDERATION'S AUDITED FINANCIAL STATEMENTS INCLUDE \$3,588,724 OF REVENUES FOR SUPPORTING FOU NDATION, \$858,294 FOR HOLOCAUST MEMORIAL COMMITTEE AND \$2,194,649 FOR THE CENTER FOR THE A DVANCEMENT OF JEWISH EDUCATION THAT ARE REPORTED ON THEIR RESPECTIVE FORM 990S THE AUDITE D INTEREST INCOME IS INCREASED BY \$650,578 FOR INVESTMENT MANAGEMENT FEES BOOKED AGAINST I NTEREST INCOME FOR FINANCIAL STATEMENT PURPOSES |

| Supplemental Information      |   |
|-------------------------------|---|
| Return Reference              | Explanation   |
| Schedule D, Part XII, Line 2d | FEDERATION'S AUDITED FINANCIAL STATEMENTS INCLUDE \$1,032,101 OF EXPENSES FOR SUPPORTING FO UNDATION, \$728,063 FOR HOLOCAUST MEMORIAL COMMITTEE AND \$2,025,035 FOR THE CENTER FOR THE ADVANCEMENT OF JEWISH EDUCATION THAT ARE REPORTED ON THEIR RESPECTIVE FORM 990S THE AUDIT ED INTEREST INCOME IS INCREASED BY \$650,578 FOR INVESTMENT MANAGEMENT FEES BOOKED AGAINST INTEREST INCOME FOR FINANCIAL STATEMENT PURPOSES |

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135103068 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ▶ Attach to Form 990. ▶ See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number GREATER MIAMI JEWISH FEDERATION INC. 59-0624404 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 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? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed ) (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures (a) Region offices in the employees, agents, region (by type) (e.g., program service, describe for and investments and independent fundraising, program specific type of region in region contractors in services, investments, grants service(s) in region region to recipients located in the region) (1) Middle East and North Africa YOUTH FUTURES IN 1 1 Program Services 381,000 YERUCHAM (2) (3) (4) (5) 3a Sub-total b Total from continuation sheets to Part I 381.000 c Totals (add lines 3a and 3b)

| Schedule F (Form 990)      | chedule F (Form 990) 2016 Page <b>2</b>   |                        |                      |                          |                      |                    |   |  |  |  |
|----------------------------|---|------------------------|----------------------|--------------------------|----------------------|--------------------|---|--|--|--|
|                            | Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to 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 |   |                        |                      |                          |                      |                    |   |  |  |  |
| (1)                        |   | South America          | GENERAL SUPPORT      | 51,290                   | Wire Transfer        |                    |   |  |  |  |
| ( 2)                       | 1   |                        |                      |                          |                      |                    |   |  |  |  |
| ( 3)                       | (3)   |                        |                      |                          |                      |                    |   |  |  |  |
| (4)                        | (4)   |                        |                      |                          |                      |                    |   |  |  |  |
| 2 Enter total numb         | ber of recipient  | t organizations listed | above that are recoç | gnized as charities by t | the foreign country, | recognized as tax- | , |  |  |  |

Schedule F (Form 990) 2016

( 18)

| Schedule F (Form 990) 2016      |   |                          |                             |                                    |   |  | Page <b>3</b>  |  |  |  |
|---------------------------------|---|--------------------------|-----------------------------|------------------------------------|---|--|--|--|--|--|
| Part IIII Grants and Ot         | ther Assistance to  | ) Individuals (          | Outside the Unite           | ad States. Complete if             | the organization an                     | nswered "Yes" to Form 9                      | 90, Part IV, line 16.  |  |  |  |
| Part III can be                 | Part III can be duplicated if additional space is needed.                       |                          |                             |                                    |   |  |  |  |  |  |
| (a) Type of grant or assistance | e <b>(b)</b> Region   | (c) Number of recipients | (d) Amount of<br>cash grant | (e) Manner of cash<br>disbursement | (f) Amount of<br>non-cash<br>assistance | (g) Description<br>of non-cash<br>assistance | (h) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |  |  |  |
|                                 | Middle East and North<br>Africa   | 132                      | 97,550                      | WIRE                               |   |  |  |  |  |  |
| SCHOLARSHIPS                    | North America<br>(including Canada and<br>Mexico, but not the<br>United States) | 5                        | 1,450                       | WIRE                               |   |  |  |  |  |  |
| (3)                             |   |                          |                             |                                    |   |  |  |  |  |  |
| (4)                             |   |                          |                             |                                    |   |  |  |  |  |  |
| (5)                             |   |                          |                             |                                    |   |  |  |  |  |  |
| ( 6)                            |   |                          |                             |                                    |   |  |  |  |  |  |
| (7)                             |   |                          |                             |                                    |   |  |  |  |  |  |
| (8)                             |   |                          | -                           | '                                  |   |  |  |  |  |  |

| (3)   |   |  |  |   |  |
|-------|---|--|--|---|--|
| (4)   |   |  |  |   |  |
| ( 5)  |   |  |  |   |  |
| (6)   |   |  |  |   |  |
| (7)   |   |  |  |   |  |
| (8)   |   |  |  |   |  |
| (9)   |   |  |  |   |  |
| ( 10) |   |  |  |   |  |
| (11)  |   |  |  |   |  |
| ( 12) |   |  |  |   |  |
| ( 13) | · |  |  | · |  |

( 13) (14) (15) (16) (17)

Schedule F (Form 990) 2016

| Sche | dule F (Form 990) 2016  |       | Page <b>4</b> |
|------|---|-------|---------------|
| Par  | t 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   | <b>☑</b> 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) |       |               |
|      |   | ☐ Yes | <b>✓</b> 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)  |       |               |
|      | Corporations (see Instructions for Form 5471)   | ☐ Yes | <b>✓</b> 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   | <b>☑</b> 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 | <b>✓</b> 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)  | □Yes  | <b>☑</b> No   |
|      |   |       |               |

| Schedule F (Forr    | 990) 2016 Page <b>5</b>  |
|---------------------|--|
| Pri<br>an<br>me     | pplemental Information vide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; ounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting thod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide additional information (see instructions). |
| Return<br>Reference | Explanation  |
| Schedule F, Pa      | rt WITH THE ASSISTANCE OF THE JEWISH FEDERATIONS OF NORTH AMERICA AND THE JEWISH AGENCY FOR ISRAEL AND OUR AGENT IN ISRAEL, WE MONITOR ALL OF THE PROGRAM GRANTS PROVIDED THROUGH THE  |

# JEWISH FEDERATIONS OF NORTH AMERICA

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

licensing

DLN: 93493135103068

OMB No 1545-0047

**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.

Open to Public

Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. **Employer identification number** Name of the organization GREATER MIAMI JEWISH FEDERATION INC 59-0624404 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. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations e ✓ Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants ✓ Phone solicitations ✓ Special fundraising events ✓ In-person solicitations 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 If "Yes," list the ten 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 (ii) Activity (iii) Did (v) Amount paid to (vi) Amount paid to (iv) Gross receipts fundraiser have ındıvıdual from activity (or retained by) (or retained by) custody or or entity (fundraiser) fundraiser listed in organization control of col (i) contributions? Yes No PHONE Seigel Marketing Group SOLICITATION 45,325 1845 North Farewell Ave No 118,049 72,724 Suite 300 Milwaukee, WI 53202 2 5 8 9 10 Total 118,049 45,325 72,724 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

| Pa                | Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported rethan \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events gross receipts greater than \$5,000. |   |   |                                   |  |  |  |
|-------------------|---|---|---|-----------------------------------|--|--|--|
| Revenue           |   | (a)Event #1  PACESETTER  (event type)   | (b) Event #2  MAIN EVENT  (event type)        | (c)Other events  0 (total number) | (d) Total events (add col (a) through col (c)) |  |  |
|                   | 1 Gross receipts  | 1,902,564<br>1,902,564<br>0   | 608,420<br>608,420<br>0                       |                                   | 2,510,984<br>2,510,984<br>0                    |  |  |
| Direct Expenses   | 4 Cash prizes   | from line 3, column (d)   | 0       | <b>&gt;</b>                       | 0        |  |  |
| Revenue           | on Form 990-EZ, line 6a.  | (a) Bingo   | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming                  | (d) Total gaming (add col (a) through col (c)) |  |  |
| Direct Expenses   | 1 Gross revenue   | ☐ Yes % % ☐ No  | ☐ Yes %                                       | ☐ Yes%                            |  |  |  |
| ——<br>9<br>a<br>b | 7 Direct expense summary Add lines 2 t 8 Net gaming income summary Subtrac  Enter the state(s) in which the organizati Is the organization licensed to conduct ga If "No," explain  | t line 7 from line 1, colum<br>on conducts gaming activi<br>aming activities in each of | ties  |                                   | ☐ Yes ☐ No                                     |  |  |
|                   | Were any of the organization's gaming lid   | ☐ Yes ☐ No  |   |                                   |  |  |  |

| Sche | dule G (Form 990 or 990-EZ) 2016  |  |   |        |       | F   | Page <b>3</b> |  |
|------|---|--|---|--------|-------|-----|---------------|--|
| 11   | Does the organization conduct gaming  | activities with nonmembers   | 7   |        | Yes   | □No |               |  |
| 12   | Is the organization a grantor, beneficial formed to administer charitable gamin                           |  | member of a partnership or other entity   |        | Yes   |     |               |  |
| 13   | Indicate the percentage of gaming acti  | vity conducted in  |   |        | - 155 |     |               |  |
| а    | The organization's facility   |  |   | 13a    |       |     | %             |  |
| b    | An outside facility   |  |   | 13b    |       |     | %             |  |
| 14   | Enter the name and address of the per   | son who prepares the organ   | ization's gaming/special events books and r   | ecords |       |     |               |  |
|      | Name >  |  |   |        |       |     |               |  |
|      | Address •   |  |   |        |       |     |               |  |
| 15a  | Does the organization have a contract revenue?  | with a third party from whor   | m the organization receives gaming  |        | □Yes  | □No |               |  |
| b    |   |  | anization ► \$ and the  | ne     |       |     |               |  |
|      | amount of gaming revenue retained by  | the third party 🕨 \$   |   |        |       |     |               |  |
| С    | 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   |  |   |        |       |     |               |  |
| а    | Is the organization required under state law to make charitable distributions from the gaming proceeds to |  |   |        |       |     |               |  |
|      | retain the state gaming license?  |  |   |        |       | □No |               |  |
| b    | Enter the amount of distributions requ  |  |   |        |       |     |               |  |
|      | in the organization's own exempt activ  |  | •   |        |       |     |               |  |
| Pa   |   | 5c, 16, and 17b, as appli  | ons required by Part I, line 2b, column<br>icable. Also complete this part to provi |        |       |     |               |  |
|      | Return Reference  | Return Reference Explanation   |   |        |       |     |               |  |
| Sche | dule G, Part I, Line 2b   | 1 SIEGEL MARKETING GROUP 1845 NORTH FAREWELL AVE STE 300 MILWAUKEE, WI 53202 |   |        |       |     |               |  |

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135103068 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **2016** Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer Identification number** GREATER MIAMI JEWISH FEDERATION INC 59-0624404 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eliqibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance See Additional Data Table (1)(2)(3)(4)

(6)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . . . 211 

Page **2** 

Schedule I (Form 990) 2016

**SCHOLARSHIPS** (2) 21 21,967 SCHOLARSHIP TO STUDENTS ATTENDING VARIOUS UNIVERSITIES IN THE UNITED STATES

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

Schedule I (Form 990) 2016

NEED-BASED AND CAMP INCENTIVE

Part III

(3) 62 83.845 HOUSING, FOOD, CLOTHING AND MEDICAL **ASSISTANCE** (3)

(4)

(5) (6)

(7)

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

Part IV Return Reference **Explanation** 

Schedule I, Part I, Line 2 WHEN FUNDS ARE GRANTED FOR A SPECIFIC PROJECT, THERE IS USUALLY A GRANT AGREEMENT OR LETTER OF DIRECTION WHICH INCLUDES REPORTING

REQUIREMENTS FOR GENERAL SUPPORT GRANTS, THERE ARE NO REPORTING REQUIREMENTS THE TAX STATUS AND PUBLIC CHARITY CLASSIFICATION OF ALL GRANTEES IS VERIFIED IF ADVERSE INFORMATION ABOUT POSSIBLE MISUSE OF FUNDS BY A GRANTEE IS OBTAINED, E.G., THROUGH REPORTS IN THE MEDIA,

#### **Additional Data**

Aish Hatorah (Cleveland)

Alexander Muss Institute for

Rockville Centre, NY 11570

14077 Cedar Road

Israel Education

78 Randall Avenue

Cleveland, OH 44118

**Software ID:** 16000425 **Software Version:** v1.00 **EIN:** 59-0624404

Name: GREATER MIAMI JEWISH FEDERATION INC

| Form 990,Schedule I, Part                                | II, Grants and | Other Assistance to           | Domestic Organiza           | tions and Domesti                        | c Governments                                      |
|--|----------------|-------------------------------|-----------------------------|--|--|
| (a) Name and address of<br>organization<br>or government | (b) EIN        | (c) IRC section if applicable | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash<br>assistance | <b>(f)</b> Method of val<br>(book, FMV, approther) |

501c3

501c3

40,000

83,199

its. aluation praisal,

| rm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Gove |         |                                  |                             |  |                   |  |  |  |
|---|---------|----------------------------------|-----------------------------|--|-------------------|--|--|--|
| (a) Name and address of<br>organization<br>or government  | (b) EIN | (c) IRC section<br>if applicable | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash<br>assistance | (f) Met<br>(book, |  |  |  |

34-1698873

59-0173782

| <br>Domostic | Carr |
|--------------|------|
|              |      |
|              |      |
|              |      |
|              |      |
|              |      |
|              |      |
|              |      |
|              |      |

(q) Description of

non-cash assistance

(h) Purpose of grant

or assistance

General support to

General support to

the organization

the organization

carryout the mission of

carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 41-0793046 501c3 45.000 American Academy of General support to carryout the mission of

Dermatology Association Inc 38546 Eagle Way the organization Chicago, IL 60678

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

Hollywood, FL 33021

American Committee for the 13-1623886 501c3 50.000 General support to Weizmann Institute of Science carryout the mission of 200 South Park Road Suite 405 Ithe organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance American Friends of Bar Ilan 13-6192275 501c3 65.000 General support to University carryout the mission of

Biltmore Hotel the organization Coral Gables, FL 33134 General support to

American Friends of Beit Issie 13-3434781 501c3 10.000 carryout the mission of Shapiro the organization

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

PO Box 8058

Little Rock, AR 72203

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

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

| American Friends of Kollel Bais<br>Yechiel<br>61 NE 41st St<br>Miami, FL 33137 | 36-3541014 | 501c3 | 7,000   | o |  | General support to carryout the mission of the organization |
|--|------------|-------|---------|---|--|---|
| American Friends of LIBI   | 32-0081620 | 501c3 | 160,000 | 0 |  | General support to  |

the organization

carryout the mission of

American Friends of LIBI 4200 Biscavne Boulevard

Miami, FL 33137

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-1790719 501c3 125.000 American Friends of Magen General support to carryout the mission of

the organization

David Adom 4101 Pine Tree Dr Miami Beach, FL 33141

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

1551 E 7th Street

Brooklyn, NY 11230

the organization American Friends of Shovu 20-1901828 501c3 10.000 General support to Yısroel carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance American Friends of Tel Aviv 13-1996126 501c3 24.400 General support to carryout the mission of

University 39 Broadway Suite 1510 New York NY 10006

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

New York, NY 10110

the organization American Friends of the Israel 23-7182582 501c3 15.000 General support to carryout the mission of Museum 500 Fifth Avenue Suite 2540 the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government other) assistance 65-1319818 501c3 10.000 American Friends of Yirgun General support to carryout the mission of

the organization

320 5th Avenue 3rd Floor the organization New York, NY 10001

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

251 H Street NW

Washington, DC 20001

American Israel Education 52-1623781 501c3 167.250 General support to Foundation Inc carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance American Jewish Committee 13-5563393 501c3 15.000 General support to carryout the mission of

Ithe organization

(NY) 1933-1945 Meridian Avenue Miami Beach, FL 33139

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

301 Washington Avenue

Miami Beach, FL 33139

the organization American Jewish Joint 13-1656634 501c3 10.000 General support to Distribution Committee Inc. carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 13-3106768 501c3 10.000 American Society for Yad General support to carryout the mission of

Vashem Inc 500 Fifth Avenue 42nd Floor the organization New York, NY 10110 Americans for Immigrant

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

Justice 500 17th Street

Miami Beach, FL 33139

65-0610872 501c3 100.000 General support to carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Antachia Anamia O MDC E2 1226002 E01-2 7 500 General support to out the mission of

the organization

| International Foundation Inc<br>100 Park Avenue Suite 108<br>Rockville, MD 20850 | 52-1330903 | 30163 | 7,500 | 0 |  | carryout the mission<br>the organization |
|--|------------|-------|-------|---|--|--|
| Aventura Chabad  | 000000000  | 501c3 | 9.500 | o |  | General support to                       |

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

Aventura Chabad 21001 BISCAYNE BLVD

Aventura, FL 33180

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

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

6855 Red Road Coral Gables, FL 33143

| Bais HaVaad Linyonei Mishpat<br>105 River Avenue Suite 301<br>Lakewood, NJ 08701 | 26-3711474 | 501c3 | 135,000 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|---------|---|--|---|
| Baptist Health Foundation  | 59-1923401 | 501c3 | 44,755  | 0 |  | General support to  |

carryout the mission of

the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

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

501c3

Bascom Palmer Eve Institute

P O Box 016880

Miami, FL 33101

59-0967012

| Barkaı Yeshıvah<br>5302 21st Ave<br>Brookln, NY 11204 | 11-3487526 | 501c3 | 36,000 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|--------|---|--|---|
|   |            |       |        |   |  |   |

General support to

the organization

carryout the mission of

55,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Coneral support to Dark Darrid Histoland Lakes Chill CE 0204010 E01-2 127 250

| 2600 NE 209th Street Aventura, FL 33180 | 65-0394819 | 50103 | 137,350 | U |  | carryout the mission of<br>the organization |
|---|------------|-------|---------|---|--|---|
| Berkshire Taconic Community             | 06-1254469 | 501c3 | 20.000  | 0 |  | General support to                          |

Foundation carryout the mission of

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

8700 S W 112th Street

Miami, FL 33176

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Both David Congregation 50-0627912 E0163 12 100 Conoral cupport to

the organization

| Beth Torah Adath Yeshurun                   | 59-2750308 | 501c3 | 60,000 | 0   |  | General support to      |
|---|------------|-------|--------|-----|--|-------------------------|
| 4100 College Station<br>Brunswick, ME 04011 |            |       |        |     |  | the organization        |
| (Mıamı)                                     |            |       | ·      |     |  | carryout the mission of |
| Detri David Colliglegation                  | 33-003/012 | 30103 | 12,100 | · · |  | General support to      |

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

925 Arthur Godfrey Rd Ste 101

Miami Beach, FL 33140

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Beth Torah Congregation 59-2750308 501c3 11<br>20350 N E 26th Avenue<br>North Miami Beach, FL 33180 | 0,600 |  |  | General support to carryout the mission of the organization |
|---|-------|--|--|---|
|---|-------|--|--|---|

9,500

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

501c3

Birchot Haaretz LTD

New York, NY 10006

115 Broadway Suite 302

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

the organization

| Birthright Israel Foundation<br>PO Box 5892<br>Hicksville, NY 11802 | 13-4092050 | 501c3 | 241,000 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|---------|---|--|---|
|   |            |       |         |   |  |   |

B'naı Vail Congregation 84-0812741 501c3 6,000 General support to

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

19 Vail Road

Vail, CO 81657

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Bowdoin College<br>19500 Turnberry Way<br>aventura, FL 33180 | 01-0215213 | 501c3 | 10,000 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|--------|---|--|---|

18,500

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

501c3

CAMP COLEMAN (ATLANTA

1580 SPALDING DRIVE

Atlanta, GA 30350

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Camp Emunah        | 11-6264174 | 501c3 | 5,200 | 0 |  | General support to      |
|--------------------|------------|-------|-------|---|--|-------------------------|
| 25 Broadway        |            |       | ·     |   |  | carryout the mission of |
| New York, NY 10004 |            |       |       |   |  | the organization        |

5,100

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

501c3

Camp Gan Israel Florida

7170 Loxabatchee Road

Parkland, FL 33067

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Camp Judaea (Atlanta<br>1440 Spring Street NW<br>Altlanta, GA 30309 | 58-6014651 | 501c3 | 40,400 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|--------|---|--|---|
|   |            |       |        |   |  |   |

55,000

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

501c3

Camp Ramah Darom

171-06 76th Avenue

Flushing, NY 11366

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 27-0700622 501c3 10.000 Canine Assisted Therapy General support to

1040 NE 45th St carryout the mission of Oakland Park, FL 33334 the organization Catholic Legal Services 65-0804650 501c3 100,000 General support to

Archdiocese of Miami Inc. carryout the mission of 225 South Street the organization

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

Williamstown, MA 01267

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| Cedille Records<br>575 Lexington Ave Fl 4<br>New York, NY 10022 | 36-3925368 | 501c3 | 25,000 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|--------|---|--|---|
| Center for Israel Education Inc                                 | 26-0220636 | 501c3 | 10,000 | 0 |  | General support to  |

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

4601 Ponce de Leon Bld 300

Coral Gables, FL 33146

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance port to

the organization

| Center for the Advancement of | 59-0624373 | 501c3 | 1,488,228 | 0 |  | General support to      |
|-------------------------------|------------|-------|-----------|---|--|-------------------------|
| Jewish Education              |            |       |           |   |  | carryout the mission of |
| 4200 Biscayne Boulevard       |            |       |           |   |  | the organization        |
| Miami, FL 33137               |            |       |           |   |  |                         |
|                               |            |       |           |   |  |                         |

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

38 Banks Street

Cambridge, MA 02138

ation 501c3 Chabad House at Harvard 04-3425635 31.000 General support to

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance port to

|  |            |       |        | _ |  |   |
|--|------------|-------|--------|---|--|---|
| Chabad Lubavitch of North<br>Miami<br>12407 Biscayne Blvd<br>North Miami, FL 33181 | 65-1124450 | 501c3 | 14,700 | 0 |  | General support to<br>carryout the mission of<br>the organization |
|  | 65 4434450 | F04 3 | 44700  |   |  |   |

501c3 21.600 General support to Chabad of Golden Beach 65-0833192 Florida carryout the mission of

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

19201 Collins Avenue

Sunny Isles, FL 33160

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

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

2125 Biscavne Blvd

Miami, FL 33137

| Chai Lifeline<br>2699 Stirling Rd Suite B303<br>Ft Lauderdale, FL 33312 | 11-2940331 | 501c3 | 6,000  | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|--------|---|--|---|
| Children's Aid Society  | 13-5562191 | 501c3 | 25,000 | O |  | General support to  |

carryout the mission of

the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

| City Year Miami               | 22-2882549 | 501c3 | 38,000 | 0 |  | General support to   |
|-------------------------------|------------|-------|--------|---|--|----------------------|
| 44 W Flagler Street Suite 500 |            |       |        |   |  | carryout the mission |
| Miami, FL 33130               |            |       |        |   |  | the organization     |

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

Brooklyn, NY 11213

ut the mission of the organization Colel Chabad 11-3254483 501c3 50,000 General support to 806 Eastern Parkway carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

the organization

| Columbia College Fund (New<br>York)<br>622 W 113th Street 2nd Floor<br>New York, NY 10025 | 13-5598093 | 501c3 | 30,000 | 0 |  | General support to<br>carryout the mission of<br>the organization |
|---|------------|-------|--------|---|--|---|
| Columbia Law School   | 13-5598093 | 501c3 | 30,000 | 0 |  | General support to  |

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

19201 Collins Avenue

Sunny Isles, FL 33160

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Compaction & Chaires 94-1229920 50163 10 0001 General support to

| PO Box 485<br>Etna, NH 03750 | 04-1320029 | 50103 | 10,000 | ŭ |  | carryout the mission of<br>the organization |
|------------------------------|------------|-------|--------|---|--|---|
| Eula, NH 03/30               |            |       |        |   |  | the organization                            |
| Congregation Emanu-El (New   | 13-1623975 | 501c3 | 25.000 | 0 |  | General support to                          |

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

1 East 65th Street

New York, NY 10021

General support to 23,000 York) carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 23-7160847 501c3 10.000 General support to

Congregation Lev Someiach 7280 W Palmetto Pk Rd Ste carryout the mission of 204 Boca Raton, FL 33433

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

11155 S W 112th Ave

Miami, FL 33176

the organization Congregation Zichron Yoel 46-4440466 501c3 6.000 General support to Hirsch carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 13-3695770 501c3 20.000 Daniel Centers for Progressive General support to carryout the mission of

Judaism 7902 Carlyle Avenue Miami Beach, FL 33141

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

Brooklyn, NY 11223

the organization Darchei David Foundation 11-2750798 501c3 7.200 General support to 1984 E First Street carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

the organization

Darchei Hora Ah Lrabbanim 11-3111928 501c3 10.000 General support to 3054 Bedford Avenue Brooklyn, NY 11210

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

11155 S W 112th Ave

Miami, FL 33176

carryout the mission of the organization Dave & Mary Alper JCC 59-2736411 501c3 1.165.774 General support to

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance support to

the organization

|                             | 40.0400450 |       |           | _ |  |                         |
|-----------------------------|------------|-------|-----------|---|--|-------------------------|
| North Miami Beach, FL 33179 |            |       |           |   |  |                         |
| 19410 Ambassador Court      |            |       |           |   |  | the organization        |
| School                      |            |       |           |   |  | carryout the mission of |
| David Posnack Jewish Day    | 59-1606514 | 501c3 | 2,000,000 | 0 |  | General support to      |

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

PO Box 5030

Hagerstown, MD 21741

ianization Doctors Without Borders 13-3433452 501c3l 75.000 General support to

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

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

501c3

56-0532129

Duke University

Durham, NC 27701

710 W Main Street Suite 200

| Dublin School               | 02-0229869 | 501c3 | 10,000 | 0 |  | General support to      |
|-----------------------------|------------|-------|--------|---|--|-------------------------|
| 18900 NE 25th Avenue        |            |       |        |   |  | carryout the mission of |
| North Miami Beach, FL 33180 |            |       |        |   |  | the organization        |

General support to

the organization

carryout the mission of

250,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Endowment Fund of Maccabi 26-0043932 501c3 10.000 General support to

USA Sports for Israel Inc
19000 NE 25th Avenue
North Miami Beach, FL 33180

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

No Miami Beach, FL 33180

FIU Foundation Inc 23-7047106 501c3 500,000 0 General support to 20350 NE 26th Avenue carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

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

11200 SW 8th St MARC 531

Miami, FL 33199

| Florida Hillel Council<br>5890 South Pine Island Road<br>Davie, FL 33328 | 00000000   | 501c3 | 368,600 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|---------|---|--|---|
| Florida International University   | 23-7047106 | 501c3 | 25,000  | 0 |  | General support to  |

carryout the mission of

the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Friends of Chahad-Lubavitch 74-2062008 E0163 10 0001 General support to

| E   (1 D  | 11 2466176  | F04 3 | 35 000 |                                       |  | 6 1 11                  |
|---|-------------|-------|--------|---------------------------------------|--|-------------------------|
| 3575 NE 207th St K SpaceB20<br>Aventura, FL 33180 |             |       |        |                                       |  | the organization        |
| Bolivia   |             |       | ,      | -                                     |  | carryout the mission of |
| I Helius of Chabau-Lubavitch                      | / 4-3002030 | 30103 | 10,000 | · · · · · · · · · · · · · · · · · · · |  | Toelleral support to    |

Friends of Ir David 11-3466176 501c31 35,0001 |General support to co Michael-Ann Russell JCC carryout the mission of

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

North Miami Beach, FL 33180

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Consula of the Tousel Defense 12 2156445 E01-2 250 620 General support to mission of

the organization

| Forces Inc<br>2040 NE 163rd St Suite 207<br>North Miami Beach, FL 33162 | 13-3130443 | 50103 | 330,030 | U |  | carryout the mission<br>the organization |
|---|------------|-------|---------|---|--|--|
| Friends of United Hatzalah Inc  | 11-3533002 | 501c3 | 5,400   | 0 |  | General support to                       |

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

Friends of United Hatzalah Inc. 350 5th Ave Fl 59 Suite2711

New York, NY 10118

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Friends of Yajad Venezuela<br>200 SOUTH BISCAYNE BLVD<br>Miami, FL 33131 | 45-2500945 | 501c3 | 25,000 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|--------|---|--|---|
|  |            |       |        |   |  |   |

5,400

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

501c3

Friendship Circle of Miami

8700 SW 112 Street

Miami, FL 33176

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Franklahin Cirola of Missa 27 1027160 E01-2 7 000

the organization

| Miami Beach, FL 33140 Fuente Latina | 47-1624899 | 501c3 | 10.000 | 0   |  | General support to      |
|-------------------------------------|------------|-------|--------|-----|--|-------------------------|
| 5401 COLLINS AVE 719                |            |       |        |     |  | the organization        |
| Beach                               |            |       |        |     |  | carryout the mission of |
| Friendship Circle of Miami          | 2/-102/109 | 20103 | 7,000  | U U |  | General support to      |

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

12550 Biscayne Blvd Suite 310

North Miami, FL 33181

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| Gainesville Hillel Inc | 65-1090524 | 501c3 | 26,912 | 0 |  | General support to      |
|------------------------|------------|-------|--------|---|--|-------------------------|
| 4210 77th Street East  |            |       |        |   |  | carryout the mission of |
| Palmetto, FL 34221     |            |       |        |   |  | the organization        |

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

3700 O St NW Washington, DC 20057

Georgetown University 53-0196603 501c3 250,000 General support to

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance port to

the organization

| Glimmerglass Opera Theatre<br>Inc<br>P O Box 610002<br>Miami, FL 33181 | 16-1053970 | 501c3 | 25,000 | 0 |  | General support to<br>carryout the mission of<br>the organization |
|--|------------|-------|--------|---|--|---|
| Gordon Dav School  | 59-0637812 | 501c3 | 41.102 | 0 |  | General support to  |

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

2625 S W Third Avenue

Miami, FL 33129

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 31-1794932 501c3 51.540 GREATER MIAMI COUNCIL General support to carryout the mission of

BBYO 2020 K Street NW 7TH Floor the organization Washington, DC 20006

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

Miami Beach, FL 33140

59-0651086 501c3 218.190 Greater Miami Hebrew Academy

General support to carryout the mission of 2400 Pine Tree Drive the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Greenpeace International Inc<br>2007 R Street N W<br>Washington, DC 20009 | 52-1541501 | 501c3 | 10,081  | 0  |  | General support to carryout the mission of the organization |
|---|------------|-------|---------|----|--|---|
|   |            |       |         |    |  | <del></del>   |
| Hadassah (New York)   | 13-1656651 | 501c3 | 100,000 | lo |  | General support to  |

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

4740 N State Rd 7 Suite 201

Lauderdale Lakes, FL 33319

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

the organization

| Hebrew Free Loan Association | 65-0204289 | 501c3 | 24,105 | 0 |  | General support to      |
|------------------------------|------------|-------|--------|---|--|-------------------------|
| of South FL                  |            |       |        |   |  | carryout the mission of |
| P O BOX 630362               |            |       |        |   |  | the organization        |
| Miami, FL 33163              |            |       |        |   |  |                         |

Heifer International 35-1019477 501c3 5.500 General support to

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

P O BOX 6021

Albert Lea, MN 56007

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-0556674 501c3 5.800 HELPING HANDS KOSHER General support to carryout the mission of

FOOD 4000 Alton Road Miami, FL 33140

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

Miami, FL 33199

the organization 52-1844823 501c3 50.000 General support to carryout the mission of

Hillel at Florida International University

11200 SW 8th Street Ithe organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

the organization

| Hillel at the University of<br>Florida<br>2020 W University Avenue<br>Gainesville, FL 32603 | 65-1090524 | 501c3 | 78,982 | 0 |  | General support to<br>carryout the mission of<br>the organization |
|---|------------|-------|--------|---|--|---|
| Hispanic Federation   | 13-3573852 | 501c3 | 75,000 | o |  | General support to  |

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

1 Penn Plaza Suite 6250

New York, NY 10119

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Hochberg Preparatory        | 59-2750308 | 501c3 | 103,000 | 0 |  | General support to      |
|-----------------------------|------------|-------|---------|---|--|-------------------------|
| 20350 N E 26th Avenue       |            |       |         |   |  | carryout the mission of |
| North Miami Beach, FL 33180 |            |       |         |   |  | the organization        |

392,330

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

501c3

Holocaust Memorial Committee

1933 Meridian Avenue

Miami Beach, FL 33139

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| Holy Yeshivah & Talmud Torah<br>Emeth-Jerusalem<br>1615 Carroll St<br>Brooklyn, NY 11213 | 13-5619651 | 501c3 | 11,700 | 0 |  | General support to<br>carryout the mission of<br>the organization |
|--|------------|-------|--------|---|--|---|
| Honest Reporting   | 16-1611859 | 501c3 | 18.000 | 0 |  | General support to  |

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

Skokie, IL 60077

10024 Skokie Blvd Suite 202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Center for Israel Education | 26-1422898 | 501c3 | 20,000 | 0 |  | General support to      |
|-----------------------------|------------|-------|--------|---|--|-------------------------|
| 335 Colewood Way N W        |            |       |        |   |  | carryout the mission of |
| Atlanta, GA 30328           |            |       |        |   |  | the organization        |

6.049.500

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

501c3

Institute of Contemporary Art

4040 NF 2nd Ave Suite 200

Miami, FL 33137

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Icrael Guide Dog Contor for the 22-2510020 50163 20 0001 General support to

the organization

| Jackson Health Foundation                                   | 65-0077727 | 501c3 | 110,000 | 0 |  | General support to                       |
|---|------------|-------|---------|---|--|--|
| Blind<br>9901 Donna Klein Boulevard<br>Boca Raton, FL 33428 |            |       |         | _ |  | carryout the mission of the organization |
| Islael Guide Dog Celiter for the                            | 23-2313023 | 20102 | 20,000  | U |  | General support to                       |

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

1501 NW N River Dr First Floor

Miami, FL 33125

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

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

501c3

11-2697261

Jaffa Institute

711 Third Avenue Suite 700

New York, NY 10017

| JACOBSON SINAI ACADEMY<br>18801 NE 22ND AVENUE<br>North Miami Beach, FL 33180 | 59-0903811 | 501c3 | 65,587 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|--------|---|--|---|
|   |            |       |        |   |  |   |

General support to

the organization

carryout the mission of

6,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 20 0000507 E04 3 20 500 upport to

| Joursh Agonsy for Israel North                   | 22-0052492 | E01.03 | 127 000 | 0 |  | Conoral support to                       |
|--|------------|--------|---------|---|--|--|
| 4200 North University Drive<br>Sunrise, FL 33351 |            |        |         |   |  | carryout the mission of the organization |
| Jewish Adoption & Foster Care                    | 20-0898587 | 501c3  | 28,500  | Ü |  | General support to                       |

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

Miami, FL 33129

Jewish Agency for Israel North 23-0053483 POTCS 13/,000

zation General support to carryout the mission of America 2625 S W 3rd Avenue the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Jewish Community Services 59-0637867 50163 2 256 219 General support to on of

the organization

| 735 NE 125th Street<br>North Miami, FL 33161 | 33 000,00, | 33103 | 2,233,213 | Ū |  | carryout the mission<br>the organization |
|--|------------|-------|-----------|---|--|--|
| Jewish Federation of Lee and                 | 59-2668992 | 501c3 | 189,461   | 0 |  | General support to                       |

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

Charlotte Counties
7200 Camino Real Suite 104

Boca Raton, FL 33433

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance EQ 404E400 E04 3 40.000

the organization

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

925 Arthur Godfrey Rd Ste 101

Miami Beach, FL 33140

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| Jewish Museum of Florida - FIU<br>301 Washington Avenue<br>Miami Beach, FL 33139 | 65-0198264 | 501c3 | 25,000 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|--------|---|--|---|
|  |            |       |        |   |  | _   |

Jewish Resource Center 27-3448777 501c3 10,000 General support to

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

PO Box 65464

Washington, DC 20035

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance January Theodorean Community of 12 6167067 E01-2 20.000 Conoral support to

the organization

| Joseph Biden Foundation                         | 81-1329470 | 501c3 | 100.000 | 0 |  | General support to                          |
|---|------------|-------|---------|---|--|---|
| America Box 62 3080 Broadway New York, NY 10027 | 13-010/90/ | 50163 | 20,000  | 0 |  | carryout the mission of<br>the organization |

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

3275 W Hillsboro Boulevard

Deerfield Beach, FL 33442

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance support to

| Just One Life<br>587 5th Ave Ste702<br>New York, NY 10017 | 13-3533863 | 501c3 | 17,781 | 0 |  | General support to<br>carryout the mission of<br>the organization |
|---|------------|-------|--------|---|--|---|
| Kehillas Bais Yehiida Tzvi of                             | 11-3335787 | 501c3 | 10 000 | 0 |  | General support to  |

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

Cedarhurst, NY 11516

nızatıon Cedarhurst

eneral support to carryout the mission of 391 Oakland Avenue the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Keren Hayeshıvot Trust | 13-3702251 | 501c3 | 7,200 | 0 |  | General support to      |
|------------------------|------------|-------|-------|---|--|-------------------------|
| 1616 East 10th Street  |            |       |       |   |  | carryout the mission of |
| Brooklyn, NY 11223     |            |       |       |   |  | the organization        |

167,087

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

501c3

65-0591858

Kesher LD

18900 N E 25th Ave

North Miami Beach, FL 33180

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Kneses Hatorah 13-7153245 501c3 10.000 General support to carryout the mission of

the organization

324 Elmwood Avenue Brooklyn, NY 11230

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

2573 Larchmont

Beachwood, OH 44122

the organization Kollel Le'Mechanchim-Yad 34-1812782 501c3 8,000 Chaim Mordechai

General support to carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Lohrman Community Day 65-1119268 50163 8 0001 General support to

the organization

| Limmud Miami   | 26-2640956 | 501c3 | 9,000 | 0 |  | General support to                          |
|--|------------|-------|-------|---|--|---|
| School<br>727 Lehrman Drive<br>Miami Beach, FL 33141 |            |       |       |   |  | carryout the mission of<br>the organization |
| Lemman Community Day                                 | 03-1119200 | 70163 | 0,000 | U |  | General support to                          |

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

21150 NE 22nd Court

Miami, FL 33180

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance eral support to

the organization

| Maccabi USA         | 13-1810938 | 501c3 | 10,000 | 0 |  | Genera  |
|---------------------|------------|-------|--------|---|--|---------|
| 2573 Larchmont Rd   |            |       |        |   |  | carryo  |
| Beachwood, OH 44122 |            |       |        |   |  | the org |

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

1459 W Hubbard Street

Chicago, IL 60642

out the mission of organization Maestro Cares Foundation 45-3706112 501c3 10,000 General support to

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Magen David Yeshiva<br>4600 Sheridan St Ste 201<br>Hollywood, FL 33021 | 11-1666839 | 501c3 | 28,000 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|--------|---|--|---|

54,700

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

501c3

Mechina High School

Miami Beach, FL 33140

4000 Alton Road

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance MEOR Inc 51-0430002 501c3 10.000 General support to

38546 Eagle Way carryout the mission of Chicago, IL 60678

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

Miami Beach, FL 33140

the organization Miami Beach Jewish 59-2788834 501c3 378,000 General support to carryout the mission of Community Center 4221 Pine Tree Drive the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Miami Cancer Institute<br>8900 N Kendall Dr | 47-3090066 | 501c3 | 250,000 | 0 |  | General support to carryout the mission of |
|---|------------|-------|---------|---|--|--|
| Mıamı, FL 33176                             |            |       |         |   |  | the organization                           |

510,000

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

501c3

Miami Dade College Foundation

6823 St Charles Avenue

New Orleans, LA 70118

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| Mıamı Heat Charıtable Fund  | 65-0350357 | 501c3 | 20,000 | 0 |  | General support to      |
|-----------------------------|------------|-------|--------|---|--|-------------------------|
| PO Box 8058                 |            |       |        |   |  | carryout the mission of |
| Little Rock, AR 72203       |            |       |        |   |  | the organization        |
| Mıamı Jewish Health Systems | 59-0624414 | 501c3 | 95,234 | 0 |  | General support to      |

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

5200 NE 2 Ave Miami, FL 33137

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Miami Music Project Inc | 26-4084871 | 501c3 | 16,667 | 0 |  | General support to      |
|-------------------------|------------|-------|--------|---|--|-------------------------|
| 1300 Biscayne Blvd      |            |       |        |   |  | carryout the mission of |
| Miami, FL 33132         |            |       |        |   |  | the organization        |

2,880,062

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

501c3

Michael-Ann Russell JCC

18900 NF 25th Avenue

North Miami Beach, FL 33180

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance F04 3 EO 06344E0 45 000 support to

the organization

| Miller Center for Contemporary | 59-0624458 | 501c3 | 15,000 | l O | 1 | General support to      |
|--------------------------------|------------|-------|--------|-----|---|-------------------------|
| Judaic Studies                 |            |       |        |     | 1 | carryout the mission of |
| PO Box 248161                  |            |       |        |     | 1 | the organization        |
| Mıamı, FL 33176                |            |       |        |     | 1 |                         |
|                                |            |       |        |     |   |                         |

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

Charlotte, NC 28205

nization 501c3 Moishe House 26-2599786 10.000 General support to 2121 Comonwealth Ave 210 carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Mount Sinai Hospital | 13-1624096 | 501c3 | 81,500 | 0 |  | General support to      |
|----------------------|------------|-------|--------|---|--|-------------------------|
| 335 Central Avenue   |            |       |        |   |  | carryout the mission of |
| Lawrence, NY 11559   |            |       |        |   |  | the organization        |

20,000

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

501c3

Nachalat Moshe Inc

Brooklyn, NY 11223

1783 F 7 ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| National LGBTQ Task Force<br>25 West 4th Street<br>New York, NY 10012 | 52-1624852 | 501c3 | 5,500 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|-------|---|--|---|
| NCSY  | 13-5623717 | 501c3 | 6,700 | 0 |  | General support to  |

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

7200 West Camino Real 214

Boca Raton, FL 33433

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

|                            |            |       |        |   |  | 1                       |
|----------------------------|------------|-------|--------|---|--|-------------------------|
| New Israel Fund (New York) | 94-2607722 | 501c3 | 32,500 | 0 |  | General support to      |
| 6 E 39th Street Suite 301  |            |       |        |   |  | carryout the mission of |
| New York, NY 10016         |            |       |        |   |  | the organization        |

60,000

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

501c3

New World Symphony

Miami Beach, FL 33139

500 17th Street

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance General support to

13-1624124 501c3 10.000 New York Historical Society 148 West 90th Street carryout the mission of New York, NY 10024

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

New York, NY 10022

the organization New York Physicians 13-4137126 501c3 20,000 Foundation

General support to carryout the mission of 635 Madison Avenue 7th Floor the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| New York Presbyterian<br>300 NE 2nd Avenue Suite 1423<br>Miami, FL 33132 | 13-3160356 | 501c3 | 1,000,000 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|-----------|---|--|---|
| New York University  | 13-5562308 | 501c3 | 20,000    | 0 |  | General support to  |

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

P O Box 1023 Jackson, MS 39215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Nauth Minne Danch Commission 20 4656046 E01-2 17 000 General support to

the organization

| North Maini Beach Community | 20-4030910 | 20102 | 17,000 | U | · ' | I General Support to    |
|-----------------------------|------------|-------|--------|---|-----|-------------------------|
| Kollel                      |            |       |        |   |     | carryout the mission of |
| 601 NW 1st Court 10th Floor |            |       |        |   | 1   | the organization        |
| Miami, FL 33136             |            |       |        |   |     | _                       |
| 4                           |            |       |        |   |     |                         |

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

Ft Lauderdale, FL 33314

raanızatıon 501c3 Nova Southeastern University 59-1083502 31.342 General support to 3301 College Avenue carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| Ohr Yosef                | 45-3992808 | 501c3 | 50,000 | 0 |  | General support to   |
|--------------------------|------------|-------|--------|---|--|----------------------|
| 546 5th Avenue 2nd Floor |            |       |        |   |  | carryout the mission |
| New York, NY 10036       |            |       |        |   |  | the organization     |

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

1824 53rd Street Brooklyn, NY 11204

ryout the mission of organization Or Hachavım Inc 13-6181949 501c3 18,000 General support to

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance support to

the organization

| Or Haddash Institution Inc<br>P O Box 400331 | 20-4958881 | 501c3 | 25,200 | 0 |  | General support to<br>carryout the mission of |
|--|------------|-------|--------|---|--|---|
| Charlottesville, VA 22904                    |            |       |        |   |  | the organization                              |
| P E F Israel Endowment Funds                 | 13-6104086 | 501c3 | 20,000 | 0 |  | General support to                            |

P E F Israel Endowment Funds 13-6104086 501c31 20,0001 Inc

630 Third Avenue 15th Floor

New York, NY 10017

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Daniel Company Ashian 22 0041201 E01-2 10 000 General support to it the mission of

the organization

| 1320 S Dixie Highway<br>Coral Gables, FL 33146 |            |       |        |  |  | the organ |
|--|------------|-------|--------|--|--|-----------|
| Network  |            |       |        |  |  | carryout  |
| Pancreatic Cancer Action                       | 33-0041201 | 20102 | 10,000 |  |  | General   |

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

1103 Biscavne Blvd

Miami, FL 33132

ianization Perez Art Museum Miami 501c3l 25,000 General support to 59-2048869

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

carryout the mission of

| Prep for Prep      | 13-2613383 | 501c3 | 10,000 | 0 |  | General support to      |
|--------------------|------------|-------|--------|---|--|-------------------------|
| 328 W 71st St      |            |       |        |   |  | carryout the mission of |
| New York, NY 10023 |            |       |        |   |  | the organization        |

6,300

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

501c3

Presidential Synagogue

19410 Ambassador Court

North Miami Beach, FL 33179

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Durdalinas Varible Camirasa 6E 06701E0 E01-2 20.000 General support to

the organization

| 1778 East 15th Street<br>Brooklyn, NY 11229 | 03-00/0139 | 30103 | 20,000 | 0 |  | carryout the mission of<br>the organization |
|---|------------|-------|--------|---|--|---|
|   | 27 5002000 | F01-2 | 35.000 |   |  | <u> </u>                                    |
| Richardson Center for Global                | 27-5083008 | 501c3 | 35,000 | U |  | General support to                          |

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

Engagement 45 Bartlett Crescent Rd

Brookline, MA 02446

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Rockland County SPCC 13-2977273 501c3 10.000 General support to

28 Pieretti Court carryout the mission of Bloomfield, NJ 07003 SAY Stuttering Association for 33-1049070 501c3 32,500 the Young 55 West 39th Street Suite

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

New York, NY 10018

the organization General support to carryout the mission of the organization 1001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 59-1296635 501c3 1.169.734 Scheck Hillel Community General support to

Ithe organization

School carryout the mission of 19000 N F 25th Avenue the organization North Miami Beach, FL 33180

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

630 W 168th St PS 2 421

New York, NY 10032

School for Children with Hidden 22-3301312 501c3 20.000 General support to Intelliaence carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance F04 3 - --support to the mission of

| Shaarei Bina Shaarei Daat    | 45-3569596 | 501c3 | 6,000 | U |  | General support to   |
|------------------------------|------------|-------|-------|---|--|----------------------|
| Shearım                      |            |       |       |   |  | carryout the mission |
| 1511 Walnut Street Suite 401 |            |       |       |   |  | the organization     |
| Philadelphia, PA 19102       |            |       |       |   |  | _                    |
| •                            |            |       |       |   |  |                      |

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

501c3 Shul of Bal Harbour 59-2302315 1.132.500 General support to 9540 Collins Avenue carryout the mission of Surfside, FL 33154 the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

General support to

the organization

carryout the mission of

| Simon Wiesenthal Center (CA) | 95-3964928 | 501c3 | 20,000 | 0 |  | General support to      |
|------------------------------|------------|-------|--------|---|--|-------------------------|
| 675 NE 172ND ST              |            |       |        |   |  | carryout the mission of |
| Miami, FL 33162              |            |       |        |   |  | the organization        |

25,617

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

501c3

South Florida PBS

Financial Affairs Office

Gainesville, FL 32611

59-0737868

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 40 5600747 E04 3 40 000

the organization

| St Jude Children's Research                        | 62-0646012 | 501c3 | 25 000 | 0 |  | General support to                       |
|--|------------|-------|--------|---|--|--|
| 7200 Camino Real Suite 104<br>Boca Raton, FL 33433 |            |       |        |   |  | carryout the mission of the organization |
| Southern NCSY                                      | 13-5623/1/ | 501c3 | 18,000 | U |  | General support to                       |

General support to ot Jude Children's Research DOTES 25,000 carryout the mission of Hospital

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

208 E 51st Street Suite 303

New York, NY 10022

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

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

501c3

Suited for Success

Miami, FL 33136

1600 NW 3rd Ave 111

65-0508106

| Storm King Art Center<br>1 Museum Rd<br>New Windsor, NY 12553 | 14-1457573 | 501c3 | 10,000 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|--------|---|--|---|
|   |            |       |        |   |  |   |

General support to

the organization

carryout the mission of

15,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

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

501c3

TampaBay-Job-Links Inc

1150 Kane Concourse 5th Fl.

Bay Harbour Islands, FL 33154

27-4629468

| Talmudic College of Florida<br>4000 Alton Road<br>Miami Beach, FL 33140 | 59-1571122 | 501c3 | 23,000 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|--------|---|--|---|
|   |            |       |        |   |  |   |

General support to

the organization

carryout the mission of

20,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| Teach for America Miami-Dade<br>7902 Carlyle Avenue<br>Miami Beach, FL 33141 | 13-3541913 | 501c3 | 35,000 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|--------|---|--|---|
| Tel Aviv University  | 13-1996126 | 501c3 | 20,000 | 0 |  | General support to  |

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

PO Box 15129 Atlanta, GA 30333

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Tomple Both Am (Miami) 65-0880E12 50163 177 091 General support to

the organization

| 5950 N Kendall Drive<br>Miami, FL 33156 | 03-0000312 | 30103 | 177,001 | · · |  | carryout the mission of<br>the organization |
|---|------------|-------|---------|-----|--|---|
| Temple Beth Sholom-Miami                | 59-0714828 | 501c3 | 126,036 | 0   |  | General support to                          |

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

Beach

4144 Chase Avenue

Miami Beach, FL 33140

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance E04 3 407 500 t to

the organization

| Temple Judea (Coral Gables)                              | 59-0791048 | 501c3 | 26,639  | 0 |  | General support to                       |
|--|------------|-------|---------|---|--|--|
| Miami<br>1701 Washington Avenue<br>Miami Beach, FL 33139 |            |       |         |   |  | carryout the mission of the organization |
| Temple Emanu-El of Greater                               | 59-0/11180 | 50103 | 107,500 | U |  | General support to                       |

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

5500 Granada Boulevard

Coral Gables, FL 33146

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| Temple Menorah<br>1025 NE Miami Gardens Drive<br>North Miami Beach, FL 33179 | 59-0737893 | 501c3 | 25,750 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|--------|---|--|---|
| Terezin Music Foundation   | 04-3094768 | 501c3 | 15,000 | 0 |  | General support to  |

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

60 East 42nd St 2540 New York, NY 10165

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-2590962 501c3 25.000 The Annual Scholars General support to carryout the mission of

the organization

Conference on the Holocaust 12 N Airmont Rd Ste A the organization Suffern, NY 10901

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

25 Broadway Suite 1700

New York, NY 10004

The Jewish Federations of 13-1624240 501c3 9.261.357 General support to North America carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

the organization

| The Milken Institute   | 95-4240775 | 501c3 | 8,000 | 0 | I . | General support to   |
|------------------------|------------|-------|-------|---|-----|----------------------|
| 1320 S Dixie Highway   |            |       |       |   |     | carryout the mission |
| Coral Gables, FL 33146 |            |       |       |   |     | the organization     |
|                        |            |       |       |   |     |                      |

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

Miami, FL 33131

The Rok Family Shul 20-2253547

vout the mission of organization 501c3 6,450 General support to 35 SW 9th St carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance The Shul of Downtown 20-2253547 501c3 100.000 General support to

48 East Flagler Street 363 carryout the mission of Miami, FL 33131 the organization The Sterling and Francine Clark 04-2163004 501c3 10,000 General support to

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

Williamstown, MA 01267

Art Institute carryout the mission of 225 South Street the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

General support to

the organization

carryout the mission of

| Theatre Aspen           | 71-2319032 | 501c3 | 10,000 | 0 |  | General support to      |
|-------------------------|------------|-------|--------|---|--|-------------------------|
| 110 E Hallam Street 103 |            |       |        |   |  | carryout the mission of |
| Aspen, CO 81611         |            |       |        |   |  | the organization        |

327,921

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

501c3

59-1870702

Toras Emes

1025 NF Miami Gardens Dr.

N Miami Beach, FL 33179

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Trustees of Columbia 13-6162924 501c3 50.000 General support to carryout the mission of

University P O BOX 1385 the organization New York, NY 10008

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

Lawrenceville, NJ 08648

Trustees of the Lawrenceville 21-0634503 501c3 10.000 General support to School carryout the mission of PO Box 6126 the organization

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

General support to

the organization

carryout the mission of

| Tulane University            | 72-0423889 | 501c3 | 20,000 | 0 |  | General support to      |
|------------------------------|------------|-------|--------|---|--|-------------------------|
| 6823 St Charles Ave Hall 218 |            |       | ,      |   |  | carryout the mission of |
| New Orleans, LA 70118        |            |       |        |   |  | the organization        |

25,000

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

501c3

New Orleans, LA 70118

51-0172429

UJA Federation of New York

130 Fast 59th Street

New York, NY 10022

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance **UM Sylvester Comprehensive** 59-0624458 501c3 50.000 General support to carryout the mission of

the organization

Cancer Center P O Box 016960 Miami, FL 33101

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

2760 Appletree Lane

Northbrook, IL 60062

the organization United Nations Israel Education 81-2650878 501c3 25.000 General support to carryout the mission of Council

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance United States Helecaust 52-1200201 E0162 10 0001 General support to sion of

Ithe organization

| United Synagogue for  | 12 1650707 | F01-3 | 6 000  | 0 |  | Canada aumant ta   |
|---|------------|-------|--------|---|--|--------------------|
| Memorial Museum<br>100 Raoul Wallenberg PL SW<br>Washington, DC 20024 |            |       |        |   |  | the organization   |
| Officed States Holocaust  | 32-1309391 | 20103 | 10,000 |   |  | General support to |

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

120 Broadway Suite 1540

New York, NY 10271

|General support to United Synagogue for 13-1659707 501c31 6,000 Conservative Judaism carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance rt to

the organization

| United Way of Miami-Dade<br>County<br>3250 Southwest Third Ave<br>Miami, FL 33129 | 59-0830840 | 501c3 | 469,936 | 0 |  | General support to<br>carryout the mission of<br>the organization |
|---|------------|-------|---------|---|--|---|
| University of Florida   | 59-6002052 | 501c3 | 100,000 | 0 |  | General support to  |

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

University of Florida 59-6002052 PO Box 114025

Gainesville, FL 32611

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 59-0624458 501c3 20.000 University of Miami General support to 111 Allen Hall carryout the mission of Coral Gables, FL 33124 the organization University of Miami - Miller 59-0624458 501c3 10.000 General support to

the organization

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

Center for Contemporary

Judaic Studies

111 Allen Hall Coral Gables, FL 33124

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance E04 3 244 440 upport to

the organization

| 1100 Stanford Drive<br>Coral Gables, FL 33146 | 52-1/58/96 | 50103 | 311,410 | U |  | carryout the mission of<br>the organization |
|---|------------|-------|---------|---|--|---|
| University of Virginia Fund -                 | 54-0485595 | 501c3 | 7,500   | 0 |  | General support to                          |

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

211 Emmet Street

Charlotesville, VA 22903

zation apport to Parents Fund carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ort to

the organization

| US Friends of Yad Ezrah<br>12A N Airmont Road<br>Suffern, NY 10901 | 13-3887075 | 501c3 | 10,000 | 0 |  | General support to carryout the mission of the organization |
|--|------------|-------|--------|---|--|---|
| Voices for Children Foundation                                     | 59-2746076 | 501c3 | 10,000 | 0 |  | General support to  |

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

Inc

Miami, FL 33136

1500 NW 12 Ave No 1117

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance rt to

the organization

| Whitney Museum of American | 13-1789318 | 501c3 | 25,000 | 0 |  | General support to      |
|----------------------------|------------|-------|--------|---|--|-------------------------|
| Art                        |            |       |        |   |  | carryout the mission of |
| 99 Gansevoort St           |            |       |        |   |  | the organization        |
| New York City, NY 10014    |            |       |        |   |  | _                       |
|                            |            |       |        |   |  |                         |

501c3 24.383 WPBT - Channel 2 59-0737868 General support to

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

PO BOX 610002

Miami, FL 33261

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance port to e mission of

the organization

| Wyoming Seminary           | 24-0795509 | 501c3 | 140,000 | 0 |  | General support to     |
|----------------------------|------------|-------|---------|---|--|------------------------|
| 201 North Sprague Avenue   |            |       |         |   |  | carryout the mission ( |
| Kıngston, PA 18704         |            |       |         |   |  | the organization       |
| YACHAD NJCD - The National | 13-5623717 | 501c3 | 6,600   | 0 |  | General support to     |

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

Jewish Council for Disabilities

11 Broadway 13th Floor

New York, NY 10004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

General support to

the organization

carryout the mission of

| Yad David          | 45-4301089 | 501c3 | 18,000 | 0 |  | General support to      |
|--------------------|------------|-------|--------|---|--|-------------------------|
| 1100 Kıngs Hıghway |            |       |        |   |  | carryout the mission of |
| Brooklyn, NY 11229 |            |       |        |   |  | the organization        |

19,100

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

501c3

47-1768554

Yehudı Inc

4585 North Michigan Avenue

Miami Beach, FL 33140

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

General support to

the organization

carryout the mission of

| Yeshiva Elementary School<br>7902 Carlyle Avenue<br>Miami Beach, FL 33141 | 65-0063045 | 501c3 | 156,242 | 0 |  | General support to carryout the mission of the organization |
|---|------------|-------|---------|---|--|---|
| •   |            |       |         |   |  |   |

7,800

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

501c3

Yeshiva Meor HaTorah

Miami Beach, FL 33141

7902 Carlyle Avenue

47-1823109

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance upport to

the organization

| Yeshiva Toras Chaim<br>1025 N E Miami Gardens Drive | 65-0063045 | 501c3 | 10,400 | 0 |  | General support to<br>carryout the mission of |
|---|------------|-------|--------|---|--|---|
| North Miami Beach, FL 33179                         |            |       |        |   |  | the organization                              |
| Veshiva Wolozin Bnei Brak                           | 13-6222762 | 501c3 | 12 000 | 0 |  | General support to                            |

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

1778 East 15th Street

Brooklyn, NY 11229

|General support to resniva vvolozin bilei brak DOTES 12,000 Israel Inc carryout the mission of

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Young Israel of Bal Harbour 65-0905878 501c3 45.000

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

General support to 9592 Harding Avenue carryout the mission of Surfside, FL 33154 the organization

DLN: 93493135103068 OMB No 1545-0047

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.

Open to Public Inspection

2015

Department of the Treasury Internal Revenue Service

Schedule J (Form 990)

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.qov/form990.

**Employer identification number** Name of the organization GREATER MIAMI JEWISH FEDERATION INC

|    |   | 59-0624404   |            |     |    |
|----|---|--|------------|-----|----|
| Pa | rt I Questions Regarding Compensation   |  |            |     |    |
|    |   |  |            | Yes | No |
| 1a |   | ided any of the following to or for a person listed on Form<br>to provide any relevant information regarding these items |            |     |    |
|    | ┌ First-class or charter travel   | Housing allowance or residence for personal use  |            |     |    |
|    | □ Travel for companions   | → Payments for business use of personal residence  |            |     |    |
|    | Tax idemnification and gross-up payments  | Health or social club dues or initiation fees  |            |     |    |
|    | □ Discretionary spending account  | → Personal services (e g , maid, chauffeur, chef)  |            |     |    |
| b  | If any of the boxes in line 1a are checked, did the org reimbursement or provision of all of the expenses des   | . , , , ,  | 1b         | Yes |    |
| 2  | Did the organization require substantiation prior to re   | , , , , , , , , , , , , , , , , , , ,  |            |     |    |
|    | directors, trustees, officers, including the CEO/Execu  | utive Director, regarding the items checked in line 1a?  | 2          | Yes |    |
| 3  | Indicate which, if any, of the following the filing organiorganization's CEO/Executive Director Check all that used by a related organization to establish compensa |  |            |     |    |
|    | □ Compensation committee  | Written employment contract  |            |     |    |
|    | Independent compensation consultant   | Compensation survey or study   |            |     |    |
|    | Form 990 of other organizations   | Approval by the board or compensation committee  |            |     |    |
| 4  | During the year, did any person listed on Form 990, P<br>or a related organization  | art VII, Section A, line 1a with respect to the filing organization  |            |     |    |
| а  | Receive a severance payment or change-of-control p  | ayment?  | 4a         |     | Νo |
| b  | Participate in, or receive payment from, a supplement   | tal nonqualified retirement plan?  | 4b         |     | Νo |
| c  | Participate in, or receive payment from, an equity-bas  | sed compensation arrangement?  | 4c         |     | Νo |
|    | If "Yes" to any of lines 4a-c, list the persons and prov  | vide the applicable amounts for each item in Part III  |            |     |    |
|    | Only 501(c)(3), 501(c)(4), and 501(c)(29) organizati  | ons must complete lines 5-9.   |            |     |    |
| 5  | For persons listed on Form 990, Part VII, Section A, compensation contingent on the revenues of   | line 1a, did the organization pay or accrue any  |            |     |    |
| а  | The organization?   |  | 5a         |     | Νo |
| b  | Any related organization?   |  | 5b         |     | Νo |
|    | If "Yes," on line 5a or 5b, describe in Part III  |  |            |     |    |
| 6  | For persons listed on Form 990, Part VII, Section A, compensation contingent on the net earnings of   | line 1a, did the organization pay or accrue any  |            |     |    |
| а  | The organization?   |  | <b>6</b> a |     | Νo |
| b  | Any related organization?   |  | 6b         |     | Νo |
|    | If "Yes," on line 6a or 6b, describe in Part III  |  |            |     |    |
| 7  | For persons listed on Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," de  | · · · · · · · · · · · · · · · · · · ·  | 7          |     | No |
| 8  | Were any amounts reported on Form 990, Part VII, pasubject to the initial contract exception described in I in Part III   | aid or accured pursuant to a contract that was<br>Regulations section 53 4958-4(a)(3)? If "Yes," describe                |            |     |    |
| _  |   |  | 8          |     | Νo |
| 9  | If "Yes" on line 8, did the organization also follow the section 53 4958-6(c)?  | rebuttable presumption procedure described in Regulations  | 9          |     |    |

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

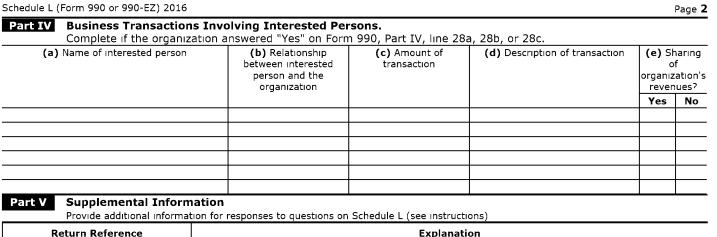
| (A) Name and Title   |             | (B) Breakdown of         | f W-2 and/or 1099-MIS                     | SC compensation                           | (C) Retirement and             | (D) Nontaxable | (E) Total of columns | (F) Compensation in                                    |
|--|-------------|--------------------------|---|---|--------------------------------|----------------|----------------------|--|
|  |             | Base<br>(1) compensation | (ii)<br>Bonus & incentive<br>compensation | (III)<br>Other reportable<br>compensation | other deferred<br>compensation | benefits       | (B)(ı)-(D)           | column(B) reported<br>as deferred on prior<br>Form 990 |
| 1 Jacob Solomon PRESIDENT AND CHIEF                                    | (i)         | 362,354                  | 0   | 180,163                                   | 183,000                        | 59,071         | 784,588              | 180,163  |
| EXECUTIVE OFFICER  | (ii)        | 0                        | 0   | 0   | 0                              | 0              | 0                    | 0  |
| 2 Jeffrey Y Levin<br>CHIEF DEVELOPMENT                                 | (i)         | 188,120                  | 0   | 0   | 0                              | 27,535         | 215,655              | 0  |
| OFFICER  |             | 0                        | 0   | 0   | 0                              | 0              | 0                    | 0  |
| 3 Bonnie R Mechoullam<br>CHIEF MARKETING AND<br>COMMUNICATIONS OFFICER | (ii)<br>(i) | 168,957                  | 0   | 0   | 0                              | 28,428         | 197,385              | 0  |
|  | (ii)        | 0                        | 0   | 0   | 0                              | 0              | 0                    | 0  |
| 4 Michelle Labgold CHIEF PLANNING OFFICER                              | (i)         | 154,435                  | 0   | 0   | 0                              | 17,620         | 172,055              | 0  |
| 5.12E. 12.1111.115 5.115E.   | (ii)        | 0                        | 0   | 0   | 0                              | 0              | 0                    | 0  |
| 5 Stephen Lande<br>FOUNDATION DIRECTOR                                 | (i)         | 159,126                  | 0   | 0   | 0                              | 29,736         | 188,862              | 0  |
|  | (ii)        | 0                        | 0   | 0   | 0                              | 0              | 0                    | 0  |
| 6 Simon S Kaminetsky<br>PHILANTROPHIC GIFT                             | (i)         | 147,709                  | 0   | 0   | 0                              | 16,361         | 164,070              | 0  |
| DIRECTOR   | (ii)        | 0                        | 0   | 0   | 0                              | 0              | 0                    | 0  |
| 7 Alon Ozer<br>SR INVESTMENT OFFICER                                   | (i)         | 174,969                  | 0   | 0   | 0                              | 17,820         | 192,789              | 0  |
|  | (ii)        | 0                        | 0   | 0   | 0                              | 0              | 0                    | 0  |

| Schedule J (Form 990) 2015              | Page <b>3</b>   |
|---|---|
| Part III Supplemental Infor             | mation  |
| Provide the information, explanation, o | r 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   |
|   | THE CHIEF EXECUTIVE OFFICER IS ALLOWED TWO INTERNATIONAL TRIPS WITH HIS SPOUSE AND THOSE TRIPS ARE TO ISRAEL FOR BUSINESS PURPOSES                                |
| Schedule J, Part I, Line 3              | THE CHIEF EXECUTIVE OFFICER'S SALARY IS BASED ON A SALARY STUDY PERFORMED BY A GLOBAL MANAGEMENT CONSULTING FIRM IT   |

IS ALSO DETERMINED BY COMPARABLE SALARY STUDIES PERFORMED BY THE JEWISH FEDERATIONS OF NORTH AMERICA

Schedule J (Form 990) 2015

| efile GRAPH                            | C prin                          | t - DO NO    | T PROCESS   | As Fil                                | ed Data -                       |               |   |              |       | DL          | .N: 93                            | 4931            | 351                       | 03068   |
|--|---------------------------------|--------------|---|---------------------------------------|---------------------------------|---------------|---|--------------|-------|-------------|-----------------------------------|-----------------|---------------------------|---------|
| Schedule L<br>(Form 990 or 99          |                                 |              |   |                                       | S with Ir                       |               | d Person                                    | s            |       |             | OI                                | MB No           | 1545                      | -0047   |
|  |                                 | •            | "Yes" on Forn   |                                       | rt IV, lines 25<br>990-EZ, Part |               |   | or 28        | c,    |             |                                   | 20              | 11                        | 6       |
|  |                                 |              |   | ➤ Attack                              | n to Form 990                   | or Form 99    | O-EZ.                                       |              | _     |             |                                   | 20              | <i>,</i>                  | U       |
| Department of the Tr                   |                                 | ▶Info        | rmation abou  |                                       | le L (Form 99<br>www.irs.gov,   |               | ) and its instr                             | uction       | ıs is | at          | 9                                 | Open 1          |                           |         |
| Internal Revenue Ser<br>Name of the or |                                 | n            |   |                                       |                                 |               |   | En           | olar  | yer ide     | ntifica                           | Insp<br>ation n |                           |         |
| GREATER MIAMI J                        |                                 |              | NC .  |                                       |                                 |               |   |              | •     | 4404        |                                   |                 |                           |         |
|  |                                 |              | sactions (sections (sec   |                                       |                                 |               |   |              |       |             | ae 40h                            |                 |                           |         |
|  |                                 | of disqualif |   |                                       |                                 |               | lified person an                            |              |       | Descript    |                                   | (d              | ) Cor                     | ected?  |
|  |                                 |              |   | (-,                                   |                                 | organization  |   | `            |       | ansacti     |                                   |                 | es                        | No      |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   | -            |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
| Co                                     | mplete i<br>ported ai<br>(b) Re | f the organi | From Interes<br>zation answere<br>n Form 990, Pai<br>(c) Purpose<br>of Ioan | d "Yes" on<br>t X, line 5<br>(d) Loan | Form 990-EZ,                    |               | 8a, or Form 99<br><b>(f)</b> Balance<br>due | (g)<br>defau | In    | (l<br>Appro | o, or if  i)  ved by d or  ittee? | <b>(</b> i      | janiza<br>i)Writ<br>ireem | ten     |
|  |                                 |              |   | То                                    | From                            |               |   | _            | No    | Yes         | No                                | Yes             |                           | No      |
| (1)<br>JEFFREY LEVIN                   | CHIEF<br>DEVELO<br>OFFICE       |              | MORTGAGE  |                                       | X                               | 450,000       | 268,413                                     |              | No    | Yes         |                                   | Yes             |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
| Total                                  |                                 |              |   |                                       |                                 | <b>\$</b>     | 268,413                                     |              |       |             |                                   |                 |                           |         |
|  |                                 |              | i <b>ce Benefitin</b><br>Inization answ                                     |                                       |                                 |               | lino 27                                     |              |       |             |                                   |                 |                           |         |
| (a) Name of inte                       |                                 |              | Relationship b  |                                       | (c) Amount o                    |               | (d) Type o                                  | of assis     | tano  | -e          | (e) Pu                            | rpose c         | of ass                    | stance  |
| (a) Name of mic                        |                                 |              | erested person<br>organization  | and the                               | (c) / iiii cane c               | or assistance | (4) 1) po o                                 |              |       |             | (0) 10                            |                 |                           |         |
|  |                                 |              |   | +                                     |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  | -                               |              |   |                                       |                                 |               |   |              |       |             |                                   |                 |                           |         |
|  |                                 |              |   |                                       |                                 |               |   |              |       | $\perp$     |                                   |                 |                           |         |
| For Danorwork Po                       | duction                         | Act Notice s | ee the Instructu  | one for For                           | m 000 or 000-E                  | : <b>7</b> C- | et No. 50056A                               |              | C - 1 | ا دادهما    | /Ear                              | . 000           |                           | EZ) 201 |



Schedule I (Form 990 or 990-FZ) 2016

Part V

DLN: 93493135103068 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** GREATER MIAMI JEWISH FEDERATION INC 59-0624404 Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line Art—Works of art . . 2 Art—Historical treasures Art-Fractional interests Books and publications Clothing and household goods . . . . . Cars and other vehicles Boats and planes . 8 Intellectual property Securities-Publicly traded . Χ 3,782,259 FMV OF SHARES RECEIVED 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution-Historic structures . . . . 14 Qualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . Х 2,708 FMV OF REAL ESTATE 17 Real estate—Other . . 18 Collectibles . . Food inventory . . . 19 20 Drugs and medical supplies 21 Taxidermy . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . Other ▶ ( \_\_\_\_\_\_ **26** Other ▶ ( \_\_\_ Other ► ( \_\_\_\_\_ 27 28 Other ▶ ( \_\_\_ Number of Forms 8283 received by the organization during the tax year for contributions 29 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a Nο b If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . . . . . . 32a Nο **b** If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II Schedule M (Form 990) (2016) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

| Schedule M (Form 990) (2016) | Page 2   |
|------------------------------|--|
| Part II Supplemental Info    |  |
|                              | ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part imber of contributions, the number of items received, or a combination of both. Also complete itional information. |
| Return Reference             | Explanation  |
|                              | Schedule M (Form 990) (2016)   |

| efile GRAPH                                   | IC prin   | t - DO NOT PROCESS   | As Filed Data -   |  | DLN:  | 93493135103068  |  |
|---|---|--|---|--|---|---|--|
| SCHEDUL<br>(Form 990 or<br>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.  Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. |  |   |  |   |   |  |
| GREATER MIAMI JE                              | ternal Revenue Service ame of the organization REATER MIAMI JEWISH FEDERATION INC  59-0624404   |  |   |  |   |   |  |
| Return<br>Reference                           | c 0, 3u   | pplemental Informatio  |   | Explanation  |   |   |  |
| Form 990,<br>Part VI,<br>Section A,<br>Line 2 | OF MIC<br>THER (<br>N ELISI<br>ER OF<br>FELDE<br>RSTEIN<br>W HALI<br>A (FATI<br>KRAVIT<br>ATHER<br>LEN YA<br>RKIN),<br>(WIFE (<br>LAURA<br>LAURA<br>CHARL   | CHAEL M ADLER AND GRADE MATTHEW ADLER), FRAES SCHECK BONWITT (DAU JEFFREY AND STEVEN SONKREIS (FATHER OF FANN (FATHER OF DANIEL HALL (HUSBAND OF GAIL MEY HER OF HEDY WHITEBOOK (FON TO FOR TISHER), NANWARKIN), NORMAN LIPOFF (FOR MEY WITE OF AIL MEY BOLL MEY BOLL WEY BOLL WEY BOLL WEY BOLL WEY BOLL WEY BOLL WEY BOLL WITE OF AIL MEY BOLL WOFFSKY), AARON PODH KOFFSKY), DOROTHY POLIN), GLORIA SCHARLIN (MIN), GLORIA SCHARLIN (MIN) | NDSON OF BUNNY AN BERRIN (WIFE OF GHTER OF RAQUEL HECK), NORMAN BE IY HANONO), ROBYI BERSTEIN), DANIEL ERS), FANNY HANO (A), LAURA KOFFSKY ITZ), STEVEN KRAVITZ, STEVEN KRAVITZ, BAND OF NANC'NDREW HALL), DRIFA OREN (SISTER CURST (HUSBAND OF DURST (WIFE OF A) OTHER OF DAVID SE | ANDMOTHER OF MATTHEW ADLER), MICHAEL M ADLER (FROBERT BERRIN), ROBERT AND MICHAEL SCHECK), ELIST AMAN (FATHER OF DEBRA BONG FISHER (DAUGHTER OF DOLE OF AND (DAUGHTER OF ARRON AND FORMAN LIPOFF), NANCY LIPOFF), NORMAN LIPOFF (MARK OREN (HUSBAND OF NIT OF RICHARD YULMAN), AARON FOOROTHY PODHURST), DOFARON PODHURST), DOFARON PODHURST), DAVID SCHARLIN), JEFFREY SCHECK AND ELISE STEVEN SCHECK AND ELISE STEVEN SCHECK AND ELISE SERVEN | SON OF BUNNY ABERRIN (HUSBANSE SCHECK BONNERAMAN WECHSLIND), AND ALBERSTEIN), FELDENKREIS), FOROTHY PODH TZ), DONALD LEFION CAY E EDRA OREN), NEDRA | ADLER, FÅ ND OF FRA WITT (SIST ER), GEORGE ALEX HALBE ANDRE RUBEN KLOD URST), MARK TON (F RAY EL LLEN YA DRA OREN THER OF ET (MOTHER OF ET LAND R |  |

990 Schedule O, Supplemental Information Return Explanation Reference Form 990. BOARD MEMBERS Part VI, Section A. Line 6

Return Explanation
Reference

Form 990, NOMINATING COMMITTEE PREPARES A LIST OF NEW BOARD MEMBERS TO BE APPROVED BY THE BOARD Part VI,
Section A,
Line 7a

Explanation Return Reference

Form 990. THE COMPLETED FORM 990 IS REVIEWED BY MEMBER(S) OF THE AUDIT COMMITTEE WHICH HAVE BEEN DELEGATED THAT AUTHORITY BY THE BOARD MEMBERS

Part VI. Section B. Line 11b

990 Schedule O, Supplemental Information

Return Explanation
Reference

Line 12c

Form 990, REY EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUALLY INTERESTS THAT WOULD GIVE RISE TO CONFLICTS Part VI, Section B.

Return Explanation

Form 990,
Part VI,
Section B,
Line 15

THE FEDERATION USES AN OUTSIDE CONSULTANT TO PERFORM A STUDY OF SALARIES OF EXECUTIVES AND
TOP MANAGEMENT OFFICIALS OF OTHER NOT FOR PROFIT ORGANIZATIONS INCLUDING OTHER JEWISH FED
ERATIONS THE FEDERATION ALSO USES A STUDY PREPARED BY THE JEWISH FEDERATIONS OF NORTH AME
RICA WHICH PROVIDES SALARIES FOR OTHER OFFICERS AND KEY EMPLOYEES

Return Explanation

Line 19

Form 990,
Part VI,
Section C.

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEME
NTS ARE AVAILABLE TO THE PUBLIC AND CAN BE OBTAINED UPON REQUEST

| efile GRAPHIC print - De                                   | O NOT PROCESS As Filed Data -                      |           |                            |           |                                   |                                   |                          |         |  |              | DLN: 93493                               | 135103                             | 068                |  |  |
|--|--|-----------|----------------------------|-----------|-----------------------------------|-----------------------------------|--------------------------|---------|--|--------------|--|------------------------------------|--------------------|--|--|
| SCHEDULE R<br>(Form 990)                                   | Related O  Complete if the organi                  | •         |                            |           |                                   |                                   | -                        |         | 37.                                    |              |  | 2016                               |                    |  |  |
| Department of the Treasury<br>Internal Revenue Service     | ► Attach to Form 990. ► Inform                     | nation al | out Schedul                | e R (Form | 990) and                          | its instruct                      | ions is at               | www.i   | rs.gov/form9                           | <u>990</u> . | Open to                                  | o Public                           | c                  |  |  |
| Name of the organization<br>GREATER MIAMI JEWISH FEDERATIO | ON INC   |           |                            |           |                                   |                                   |                          | Emp     | loyer identifi                         | icatior      | number                                   |                                    |                    |  |  |
|  |  |           |                            |           |                                   |                                   |                          |         | 624404                                 |              |  |                                    |                    |  |  |
| Part I Identification                                      | n of Disregarded Entities Complete If t            | he organ  | ization answ               | ered "Yes | " on Form                         | 990, Part                         | IV, line 3               | 3.      |  |              |  |                                    |                    |  |  |
| Name, address, and   | (a)<br>d EIN (if applicable) of disregarded entity |           | (b)<br>Primary a           |           | Legal dom<br>or foreigi           | c)<br>nicile (state<br>n country) | ( <b>d)</b><br>Total inc | ome     | <b>(e)</b><br>End-of-year as           | sets         | <b>(f</b><br>Direct co<br>ent            | ntrolling                          |                    |  |  |
|  |  |           |                            |           |                                   |                                   |                          |         |  |              |  |                                    |                    |  |  |
|  |  |           |                            |           |                                   |                                   |                          |         |  |              |  |                                    |                    |  |  |
|  |  |           |                            |           |                                   |                                   |                          |         |  |              |  |                                    |                    |  |  |
| Part II Identification                                     | of Related Tax-Exempt Organization                 | s Comple  | te if the ora              | anization | answered                          | "Ves" on F                        | orm 990                  | Dart I\ | / line 34 her                          | Calleo       | it had one or                            | more                               |                    |  |  |
| related tax-exer   | mpt organizations during the tax year.             | Compic    | If the org                 |           |                                   | 105 0111                          |                          | - unc 1 | v, iiie 3 i be                         |              | Te flad offe of                          |                                    |                    |  |  |
| See Additional Data Table<br>Name, address, an             | (a)<br>nd EIN of related organization              | Prim      | <b>(b)</b><br>ary activity | Legal dom | c)<br>nicile (state<br>n country) | (d)<br>Exempt Cod                 | le section               |         | (e)<br>charity status<br>on 501(c)(3)) | Dii          | <b>(f)</b><br>rect controlling<br>entity | Section<br>(13) cor<br>enti<br>Yes | 512(b)<br>ntrolled |  |  |
|  |  |           |                            |           |                                   |                                   |                          |         |  |              |  |                                    |                    |  |  |
|  |  |           |                            |           |                                   |                                   |                          |         |  |              |  |                                    |                    |  |  |
|  |  |           |                            |           |                                   |                                   |                          |         |  |              |  |                                    |                    |  |  |
|  |  |           |                            |           |                                   |                                   |                          |         |  |              |  |                                    |                    |  |  |
| For Panerwork Reduction A                                  | ct Notice, see the Instructions for Form 99        | 90.       |                            | Ca        | it No 5013                        | ]<br>35Y                          |                          |         |  | Sch          | edule R (Form                            | 990) 20                            | 116                |  |  |

|   |                         | 1 (1)                             | 1 1   |  | 1 45   | 1 40                                | 1 .                                   |                                  |                         | 1 ()  |                          | ., 1  |   |
|---|-------------------------|-----------------------------------|---|--|--|-------------------------------------|---------------------------------------|----------------------------------|-------------------------|---|--------------------------|-------|---|
| (a)<br>Name, address, and EIN of<br>related organization  |                         | <b>(b)</b><br>Primary<br>activity | (c) Legal domicile (state or foreign country) | (d)<br>Direct<br>controlling<br>entity | (e) Predominant Income(related, unrelated, excluded from tax under sections 512- |                                     |                                       | (h) Disproprtionate allocations? |                         | Code V-UBI<br>amount in bot<br>20 of<br>Schedule K-1<br>(Form 1065) | partner?                 |       | g ownersh                                 |
|   |                         |                                   |   |  | 514)   |                                     |                                       | Yes                              | No                      |   | Yes                      | No    |   |
|   |                         |                                   |   |  |  |                                     |                                       |                                  |                         |   |                          |       |   |
|   |                         |                                   |   |  |  |                                     |                                       |                                  |                         |   |                          |       |   |
|   |                         |                                   |   |  |  |                                     |                                       |                                  |                         |   |                          |       |   |
|   |                         |                                   |   |  |  |                                     |                                       |                                  |                         |   |                          |       |   |
|   |                         |                                   |   |  |  |                                     |                                       |                                  |                         |   |                          |       |   |
|   |                         |                                   |   |  |  |                                     |                                       |                                  |                         |   |                          |       |   |
|   |                         |                                   |   |  |  |                                     |                                       |                                  |                         |   |                          |       |   |
|   |                         |                                   |   |  |  |                                     |                                       |                                  |                         |   |                          |       |   |
| Identification of Related Organiza because it had one or more related or  |                         |                                   |   |  |  | zation ansv                         | vered "Yes                            | " on Fo                          | orm 9                   | 90, Part IV   | , line                   | 34    |   |
| Identification of Related Organiza because it had one or more related or  (a)  Name, address, and EIN of related organization |                         | L do (state                       | (c) egal micile or foreign                    | st during th                           | (d) controlling entity  Type   | (e)                                 | vered "Yes  (f) Share of total income | Share                            | (g) of end- year assets | of- Perce   | , line  i)  ntage ership | Se (1 | (I)<br>ection 512<br>3) control<br>entity |
| because it had one or more related or  (a)  Name, address, and EIN of   | rganizations treated as | L do (state                       | on or trus (c) egal micile                    | st during th                           | (d) controlling entity  Type   | (e)<br>le of entity<br>orp, S corp, | <b>(f)</b><br>Share of total          | Share                            | (g)<br>of end-<br>year  | of- Perce   | 1)<br>ntage              | Se (1 | <ol><li>control</li></ol>                 |
| because it had one or more related or  (a)  Name, address, and EIN of   | rganizations treated as | L do (state                       | (c) egal micile or foreign                    | st during th                           | (d) controlling entity  Type   | (e)<br>le of entity<br>orp, S corp, | <b>(f)</b><br>Share of total          | Share                            | (g)<br>of end-<br>year  | of- Perce   | 1)<br>ntage              | Se (1 | 3) control<br>entity?                     |
| because it had one or more related or  (a)  Name, address, and EIN of   | rganizations treated as | L do (state                       | (c) egal micile or foreign                    | st during th                           | (d) controlling entity  Type   | (e)<br>le of entity<br>orp, S corp, | <b>(f)</b><br>Share of total          | Share                            | (g)<br>of end-<br>year  | of- Perce   | 1)<br>ntage              | Se (1 | 3) control<br>entity?                     |
| because it had one or more related or  (a)  Name, address, and EIN of   | rganizations treated as | L do (state                       | (c) egal micile or foreign                    | st during th                           | (d) controlling entity  Type   | (e)<br>le of entity<br>orp, S corp, | <b>(f)</b><br>Share of total          | Share                            | (g)<br>of end-<br>year  | of- Perce   | 1)<br>ntage              | Se (1 | 3) control<br>entity?                     |
| because it had one or more related or  (a)  Name, address, and EIN of   | rganizations treated as | L do (state                       | (c) egal micile or foreign                    | st during th                           | (d) controlling entity  Type   | (e)<br>le of entity<br>orp, S corp, | <b>(f)</b><br>Share of total          | Share                            | (g)<br>of end-<br>year  | of- Perce   | 1)<br>ntage              | Se (1 | 3) control<br>entity?                     |
| because it had one or more related or  (a)  Name, address, and EIN of   | rganizations treated as | L do (state                       | (c) egal micile or foreign                    | st during th                           | (d) controlling entity  Type   | (e)<br>le of entity<br>orp, S corp, | <b>(f)</b><br>Share of total          | Share                            | (g)<br>of end-<br>year  | of- Perce   | 1)<br>ntage              | Se (1 | 3   |

| chedule R (Form 990) 2016  |            | Pa       | age <b>3</b> |
|--|------------|----------|--------------|
| 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           |
| 1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? |            |          | $\vdash$     |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity   | 1a         |          | No           |
| <b>b</b> Gift, grant, or capital contribution to related organization(s)   | 1b         | Yes      |              |
| c Gift, grant, or capital contribution from related organization(s)  | 1c         | Yes      |              |
| d Loans or loan guarantees to or for related organization(s)   | 1d         | Yes      |              |
| e Loans or loan guarantees by related organization(s)  | 1e         |          | No           |
| f Dividends from related organization(s)   | 1f         |          | No           |
| g Sale of assets to related organization(s)  | <b>1</b> g |          | No           |
| h Purchase of assets from related organization(s)  | 1h         |          | No           |
| i Exchange of assets with related organization(s)  | <b>1</b> i |          | No           |
| j Lease of facilities, equipment, or other assets to related organization(s)   | 1j         | Yes      |              |
| k Lease of facilities, equipment, or other assets from related organization(s)   | 1k         |          | No           |
| l Performance of services or membership or fundraising solicitations for related organization(s)   | 11         | Yes      |              |
| m Performance of services or membership or fundraising solicitations by related organization(s)  | 1m         |          | No           |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  | 1n         | Yes      | T            |
| o Sharing of paid employees with related organization(s)   | 10         | Yes      |              |
| p Reimbursement paid to related organization(s) for expenses   | 1p         |          | No           |
| q Reimbursement paid by related organization(s) for expenses   | <b>1</b> q | Yes      |              |
| r Other transfer of cash or property to related organization(s)  | 1r         | <u> </u> | No           |
| s Other transfer of cash or property from related organization(s)  | 1s         |          | No           |

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

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

| <b>1</b>                                       |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|--|--------------------------------|----------|--|-----|---|------------------------------------|--|--------------------------------------|----|--|------------|---------|---------------------------------------|
| <b>(a)</b><br>Name, address, and EIN of entity | <b>(b)</b><br>Primary activity | domicile | (d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514) | or  | (e) re all partners section 501(c)(3) rganizations? | (f)<br>Share of<br>total<br>income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Disproprtiona<br>allocations? |    | Code V-UBI<br>amount in box<br>20<br>of Schedule<br>K-1<br>(Form 1065) |            | ng<br>? | <b>(k)</b><br>Percentage<br>ownership |
|  |                                |          | 514)   | Yes | No  | ! i                                |  | Yes                                  | No |  | Yes        | No      |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    |  |            |         |                                       |
|  |                                |          |  |     |   |                                    |  |                                      |    | Schedul  | le R (Form | 1 99    | 0) 2016                               |

Schedule R (Form 990) 2016 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2016 Software ID: 16000425
Software Version: v1.00

**EIN:** 59-0624404 Name: GREATER MIAMI JEWISH FEDERATION INC Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations (d) (f) (b) (c) (e) (g) Name, address, and EIN of related organization Legal domicile Exempt Code section Public charity Direct controlling Section 512 Primary activity (state status entity (b)(13)(if section 501(c) controlled or foreign country) (3)) entity? Yes No (1) 501(c)(3) 509(a)(3) Type I N/A No Support Greater Miami FL Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 organizations 65-0688643 Support Greater Miami 501(c)(3) FL N/A No (1) 509(a)(3) Type I Jewish Federation and 4200 Biscayne Boulevard Miami, FL 33137 organizations 65-0871973 (2) Support Greater Miami FL 501(c)(3) 509(a)(3) Type I N/A Νo Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 organizations 65-0840870 (3) Support Greater Miami  $\mathsf{FL}$ 501(c)(3) 509(a)(3) Type I N/A No Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 65-0795652 organizations Support Greater Mıamı FL 501(c)(3) 509(a)(3) Type I N/A No (4) Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 65-1065543 organizations (5) Support Greater Mıamı FL 501(c)(3)) 509(a)(3) Type I N/A No Jewish Federation and 4200 Biscayne Boulevard Miami, FL 33137 other 501c3 organizations 65-0421798 Support Greater Miami  $\mathsf{FL}$ 501(c)(3) 509(a)(3) Type I N/A Νo Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 65-0078657 organizations Support Greater Miami 501(c)(3) 509(a)(3) Type I (7) FL N/A Νo Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 organizations 65-0008368 Support Greater Miami FL501(c)(3) 170(b)(1)(A)(vı) N/A No Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 65-0154991 organizations (9) Support Greater Miami FL 501(c)(3) N/A 509(a)(3) Type I No Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 organizations 65-0449936 509(a)(3) Type I (10) Support Greater Miami FL 501(c)(3) N/A No Jewish Federation and other 501c3 4200 Biscayne Boulevard Miami, FL 33137 organızatıons 20-2977057 Support Greater Miami 501(c)(3) N/A No (11)FL 509(a)(3) Type I Jewish Federation and 4200 Biscayne Boulevard Miami, FL 33137 organızatıons 65-0455791 (12) Support Greater Miami FL 501(c)(3) 509(a)(3) Type I N/A No Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 organizations 65-0604340 (13)Support Greater Miami FL 501(c)(3) 509(a)(3) Type I N/A No Jewish Federation and 4200 Biscayne Boulevard other 501c3 Mıamı, FL 33137 organizations 65-0067413 501(c)(3) Support Greater Miami FL 509(a)(3) Type I N/A Νo Jewish Federation and other 501c3 4200 Biscayne Boulevard Miami, FL 33137 65-0946000 organizations 509(a)(3) Type I Support Greater Mıamı FL 501(c)(3) N/A No Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 14-1944305 organizations Support Greater Miami FL 501(c)(3) 509(a)(3) Type I N/A No Jewish Federation and 4200 Biscayne Boulevard Miami, FL 33137 other 501c3 organizations 65-0720334 Support Greater Miami (17) $\mathsf{FL}$ 501c3 N/A Jewish Federation and 4200 Biscayne Boulevard Miami, FL 33137 20-1819335 other 501c3 organizations (18) Support Greater Miami FL 501c3 N/A Jewish Federation and 4200 Biscavne Boulevard other 501c3 Mıamı, FL 33137 organizations 65-0735838 509(a)(3) Type I Support Greater Miami FL 501(c)(3) N/A No (19)Jewish Federation and 4200 Biscayne Boulevard other 501c3 Miami, FL 33137 65-0884200 organizations

Name, address, and EIN of related organization Primary activity Legal domicile Exempt Code section Public charity Direct controlling Section 512 (b)(13)(state status entity or foreign country) (if section 501(c) controlled entity? (3)Yes No ln/a (21)Support Greater Miami FL 501(c)(3) 509(a)(3) Type I No Jewish Federation and

(b)

other 501c3

other 501c3

educational.

community

the Holocaust

building

lorganizations

Provides social,

programs to the

organizations

Support Greater Miami

Jewish Federation and

recreational, and cultural

Provide information to

Promote quality Jewish

learning and identity

the public concerning

(c)

FL

FL

FL

FL

(d)

501(c)(3)

501c3

501c3

501(c)(3)

(e)

509(a)(3) Type I

170(b)(1)(A)(vi)

170(b)(1)(A)(vi)

170(b)(1)(A)(vi)

ln/a

N/A

N/A

IN/A

(f)

(q)

Nο

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

4200 Biscavne Boulevard

4200 Biscavne Boulevard

Miami, FL 33137

Miami, FL 33137

4221 Pine Tree Drive

Miami Beach, FL 33140

1933 Meridian Avenue

Miami Beach, FL 33139

4200 Biscavne Boulevard

91-2106705

65-0008358

59-2788834

59-2659641 (4)

Miami, FL 33137 59-0624373

(1)

(2)

(3)