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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

Open to Public Inspection

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

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

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

A For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020

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

C Name of organization
JEWISH FEDERATION OF PALM BEACH COUNTY INC
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
ONE HARVARD CIRCLE NO 100
City or town, state or province, country, and ZIP or foreign postal code
WEST PALM BEACH, FL 33409

D Employer identification number
59-0948696
E Telephone number
(561) 478-0700
G Gross receipts \$ 31,665,818

F Name and address of principal officer:
KATHY G SIGALL
ONE HARVARD CIRCLE NO 100
WEST PALM BEACH, FL 33409

H(a) Is this a group return for subordinates?
☐ Yes ☒ No
H(b) Are all subordinates included?
☐ Yes ☐ No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

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

J Website: ▶ WWW.JEWISHPALMBEACH.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1962

M State of legal domicile: FL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
PLEASE REFER TO MISSION DESCRIBED AT PART III, QUESTION 1

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

3 Number of voting members of the governing body (Part VI, line 1a) 3 46

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 45

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 113

6 Total number of volunteers (estimate if necessary) 6 2,500

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a -61,367

7b Net unrelated business taxable income from Form 990-T, line 39 7b -237,579

Revenue

8 Contributions and grants (Part VIII, line 1h) 24,375,111 23,412,790

9 Program service revenue (Part VIII, line 2g) 971,825 1,054,263

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3,463,198 3,765,705

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,823,230 1,434,574

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 30,633,364 29,667,332

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14,409,353 16,716,053

14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 7,691,175 8,504,929

16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0

16b Total fundraising expenses (Part IX, column (D), line 25) ▶3,824,971

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 5,949,027 5,090,028

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 28,049,555 30,311,010

19 Revenue less expenses. Subtract line 18 from line 12 2,583,809 -643,678

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 160,914,777 158,652,657

21 Total liabilities (Part X, line 26) 34,644,698 34,804,404

22 Net assets or fund balances. Subtract line 21 from line 20 126,270,079 123,848,253

Part II Signature Block

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

Sign Here

Signature of officer
KATHY G SIGALL CHIEF FINANCIAL OFFICER
Type or print name and title

2021-05-03
Date

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date

Check ☐ if self-employed PTIN P00646430

Firm's name ▶ MORRISON BROWN AGRIZ & FARRA LLC Firm's EIN ▶ 13-5381590

Firm's address ▶ 225 NE MIZNER BLVD SUITE 685 Phone no. (561) 909-2100
BOCA RATON, FL 33432

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2019)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

THE JEWISH FEDERATION OF PALM BEACH COUNTY IS THE COMMUNITY-BUILDING ORGANIZATION OF THE JEWISH COMMUNITY. OUR MISSION IS TO STRENGTHEN JEWISH IDENTITY, ENERGIZE THE RELATIONSHIP WITH ISRAEL AND MEET HUMAN NEEDS THAT ARE UNIQUELY THE OBLIGATION OF THE JEWISH COMMUNITY.

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

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

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

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

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

4a	(Code:) (Expenses \$	1,825,292	including grants of \$	(Revenue \$	30,525)
See Additional Data					

4b	(Code:) (Expenses \$	1,847,809	including grants of \$	(Revenue \$	658,850)
See Additional Data					

4c	(Code:) (Expenses \$	1,498,507	including grants of \$	(Revenue \$	325,800)
See Additional Data					

(Code:) (Expenses \$	18,545,267	including grants of \$	16,716,053) (Revenue \$	39,088)
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ALLOCATIONS AND DISTRIBUTIONS - PROVIDES FINANCIAL SUPPORT TO AGENCIES AND ORGANIZATIONS THAT SUPPORT JEWISH SOCIAL SERVICE, CULTURAL AND EDUCATIONAL PROGRAMS. WORKS WITH LOCAL AFFILIATED AGENCIES, NATIONAL AND REGIONAL ORGANIZATIONS TO IDENTIFY ANY SERVICES AND PROGRAMS REQUIRED FOR THE MAINTENANCE, GROWTH AND DEVELOPMENT OF THE JEWISH COMMUNITY OF THE GREATER PALM BEACHES.

4d Other program services (Describe in Schedule O.)

(Expenses \$	18,545,267	including grants of \$	16,716,053) (Revenue \$	39,088)
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4e	Total program service expenses ▶	23,716,875
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Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	67
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

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

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 113			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes		
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	Yes		
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		No	
b If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No	
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes		
c 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	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Yes		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	Yes		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No	
9 Sponsoring organizations maintaining donor advised funds.				
a 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?	9b		No	
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		No	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 720, Schedule N.	15		No	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No	

Part VI

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	46	
	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	Enter the number of voting members included in line 1a, above, who are independent	45	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	Yes	
b	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **FL**

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
KATHY SIGALL CHIEF FINANCIAL OFFIC ONE HARVARD CIRCLE WEST PALM BEACH, FL 33409 (561) 478-0700

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

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

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

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

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

[illegible]

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	1,385,415	0	186,651

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 7

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
G4S SECURE SOLUTIONS (USA) INC PO BOX 277469 ATLANTA, GA 30384	SECURITY	529,468
COMMERCIAL LANDSCAPE PROFESSIONALS INC 1579 WILD FERN DRIVE FLEMING ISLAND, FL 32003	LANDSCAPE SERVICES	175,206
THE BREAKERS PALM BEACH INC ONE SOUTH COUNTY ROAD PALM BEACH, FL 33480	VENUE AND CATERING FOR VARIOUS EVENTS	150,000
TRIUMPH STAFFING ASSOCIATES INC 100 W CYPRESS CREEK RD 1020 FORT LAUDERDALE, FL 33309	TEMPORARY STAFF ASSIGNMENTS	119,108

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 ▶ 4

Form 990 (2019)										Page 9					
Part VIII Statement of Revenue															
Check if Schedule O contains a response or note to any line in this Part VIII										<input type="checkbox"/>					
										(A)	(B)	(C)	(D)		
										Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .		1a	15,680,039											
	b Membership dues . . .		1b												
	c Fundraising events . . .		1c												
	d Related organizations		1d												
	e Government grants (contributions)		1e												
	f All other contributions, gifts, grants, and similar amounts not included above		1f	7,732,751											
	g Noncash contributions included in lines 1a - 1f:\$		1g	2,589,863											
	h Total. Add lines 1a-1f										23,412,790				
Program Service Revenue	2a DESIGNATED PROGRAM REVENUE		Business Code												
			900099		1,054,263		1,054,263								
	b														
	c														
	d														
	e														
	f All other program service revenue.														
	g Total. Add lines 2a-2f.		1,054,263												
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			▶			1,849,827				-61,367		1,911,194		
	4 Income from investment of tax-exempt bond proceeds			▶											
	5 Royalties			▶											
			(i) Real	(ii) Personal											
	6a Gross rents		6a												
	b Less: rental expenses		6b												
	c Rental income or (loss)		6c												
	d Net rental income or (loss)		▶												
			(i) Securities	(ii) Other											
	7a Gross amount from sales of assets other than inventory		7a	3,692,932											
	b Less: cost or other basis and sales expenses		7b	1,777,054											
	c Gain or (loss)		7c	1,915,878											
	d Net gain or (loss)		▶			1,915,878								1,915,878	
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		8a	243,824											
	b Less: direct expenses		8b	221,432											
	c Net income or (loss) from fundraising events		▶			22,392								22,392	
	9a Gross income from gaming activities. See Part IV, line 19		9a												
	b Less: direct expenses		9b												
	c Net income or (loss) from gaming activities		▶												
	10a Gross sales of inventory, less returns and allowances		10a												
b Less: cost of goods sold		10b													
c Net income or (loss) from sales of inventory		▶													
Miscellaneous Revenue		Business Code													
11a OTHER REVENUE		900099		756,080								756,080			
b MISCELLANEOUS EVENT REVENUE		900099		332,580								332,580			
c ADMIN FEES		900099		323,522								323,522			
d All other revenue															
e Total. Add lines 11a-11d		▶			1,412,182										
12 Total revenue. See instructions		▶			29,667,332		1,054,263		-61,367				5,261,646		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	16,716,053	16,716,053		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	589,106	88,366	117,821	382,919
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,131,115	3,214,011	986,894	1,930,210
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	446,734	219,255	75,638	151,841
9 Other employee benefits	892,953	438,256	151,189	303,508
10 Payroll taxes	445,021	219,539	73,814	151,668
11 Fees for services (non-employees):				
a Management				
b Legal	10,333	7,764	1,487	1,082
c Accounting	50,880		50,880	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	106,014		106,014	
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	201,326	126,835	4,027	70,464
13 Office expenses	303,655	120,991	42,215	140,449
14 Information technology				
15 Royalties				
16 Occupancy	5,084	883	4,201	
17 Travel	24,702	13,561	7,590	3,551
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,085,003	690,141	60,673	334,189
20 Interest	349,686	349,686		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,073,927	823,758	71,771	178,398
23 Insurance	53,564	4,135	49,429	
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 BAD DEBT	761,839		761,839	
b PROFESSIONAL FEES	672,888	472,019	115,205	85,664
c REPAIRS AND MAINTENANCE	273,313	163,779	31,298	78,236
d MISCELLANEOUS	117,814	47,843	57,179	12,792
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	30,311,010	23,716,875	2,769,164	3,824,971
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		6,431,733	1	8,119,252	
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net		8,186,060	3	8,626,485	
	4	Accounts receivable, net			4		
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		87,208	5	80,978	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6		
	7	Notes and loans receivable, net		11,842,041	7	10,447,139	
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		229,914	9	328,126	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	34,499,358			
	b	Less: accumulated depreciation	10b	5,523,999	30,056,974	10c	28,975,359
	11	Investments—publicly traded securities			11		
	12	Investments—other securities. See Part IV, line 11		103,401,145	12	101,721,116	
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		679,702	15	354,202	
16	Total assets. Add lines 1 through 15 (must equal line 34)		160,914,777	16	158,652,657		
Liabilities	17	Accounts payable and accrued expenses		948,467	17	997,871	
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities		12,894,737	20	12,368,421	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable to unrelated third parties		2,826,596	24	4,246,513	
	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		17,974,898	25	17,191,599	
26	Total liabilities. Add lines 17 through 25		34,644,698	26	34,804,404		
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions		82,196,632	27	76,689,049	
	28	Net assets with donor restrictions		44,073,447	28	47,159,204	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.						
	29	Capital stock or trust principal, or current funds			29		
	30	Paid-in or capital surplus, or land, building or equipment fund			30		
	31	Retained earnings, endowment, accumulated income, or other funds			31		
	32	Total net assets or fund balances		126,270,079	32	123,848,253	
33	Total liabilities and net assets/fund balances		160,914,777	33	158,652,657		

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	29,667,332
2	Total expenses (must equal Part IX, column (A), line 25)	2	30,311,010
3	Revenue less expenses. Subtract line 2 from line 1	3	-643,678
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	126,270,079
5	Net unrealized gains (losses) on investments	5	-1,778,148
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	123,848,253

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
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?		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.		

Additional Data

Software ID:
Software Version:
EIN: 59-0948696
Name: JEWISH FEDERATION OF PALM BEACH COUNTY
INC

Form 990 (2019)

Form 990, Part III, Line 4a:

FEDERATION OPERATING PROGRAMS MISSIONS - THE MISSIONS PROGRAM DEVELOPS, COORDINATES AND FACILITATES IMMERSIVE CONTENT RICH TRAVEL EXPERIENCES THAT HIGHLIGHT THE BREADTH AND DEPTH OF PROJECTS AND PROGRAMS THAT THE FEDERATION SUPPORTS IN ISRAEL, THE FORMER SOVIET UNION AND OTHER COUNTRIES. MOSAIC - THE MOSAIC PROGRAM PRODUCES THE TELEVISION SHOW MOSAIC, WHICH CAN BE SEEN ON SUNDAY MORNINGS ON THE LOCAL NBC AFFILIATE. THIS PROGRAM CONSISTS OF INFORMATIONAL INTERVIEWS RELATED TO LOCAL, NATIONAL AND INTERNATIONAL JEWISH ISSUES AND THEIR IMPACT ON THE LOCAL JEWISH COMMUNITY. ISRAEL AND OVERSEAS - THE ISRAEL & OVERSEAS DEPARTMENT OF THE FEDERATION OVERSEES AND EVALUATES A COMPREHENSIVE SPECTRUM OF PARTNERSHIP PROGRAMS THAT DIRECTLY IMPACT AND BENEFIT THE LIVES OF THOUSANDS OF JEWS THROUGHOUT THE WORLD. SPECIFICALLY, THE FEDERATION PROVIDES FUNDING, OVERSIGHT AND DIRECT INVOLVEMENT IN THE FOLLOWING PARTNERSHIPS: IN THE TZAHAR (TZFAT, HATZOR AND ROSH PINA) REGION IN ISRAEL THROUGH PROGRAMS FOCUSING ON ECONOMIC DEVELOPMENT, EDUCATION, AND ASSISTANCE FOR AT-RISK YOUTH (YOUTH FUTURES); IN THE CITY OF RAMLA, ISRAEL THROUGH PACT (PARENTS AND CHILDREN TOGETHER) AND ENP (ETHIOPIAN NATIONAL PROJECT) OFFERING AFTER-SCHOOL ENRICHMENT PROGRAMS; AND IN ST. PETERSBURG, RUSSIA THROUGH AN ARRAY OF WELFARE AND JEWISH RENEWAL INITIATIVES. ALSO, THE VOLUNTEER SHALIACH'S (EMISSARY FROM ISRAEL) GOAL IS TO WORK THROUGHOUT THE LOCAL COMMUNITY IN A VARIETY OF SETTINGS AND WITH ALL AGE GROUPS TO PROVIDE OPPORTUNITIES FOR COMMUNITY MEMBERS TO STRENGTHEN THEIR CONNECTION TO ISRAEL AND EMBED THEIR SENSE OF BELONGING TO THE PEOPLE OF ISRAEL. ISRAEL PROGRAM CENTER - THE ISRAEL PROGRAM CENTER CREATES OPPORTUNITIES FOR INDIVIDUALS AND COHORTS OF THE PALM BEACH JEWISH COMMUNITY TO DEVELOP AUTHENTIC AND MEANINGFUL ENGAGEMENT WITH AND CONNECTIONS TO ISRAEL. THIS IS ACCOMPLISHED THROUGH A WIDE VARIETY OF EDUCATIONAL PROGRAMMING ACTIVITIES THAT FOCUS ON THE SPECIFIC NEEDS, DESIRES AND NATURE OF THE DIFFERENT COMMUNITIES AND COHORTS. JEWISH COMMUNITY FOUNDATION PROGRAMS - THE PROGRAMMING OF THE JEWISH COMMUNITY FOUNDATION IS TO PERPETUATE PERMANENT FINANCIAL SUPPORT TO SUSTAIN A VIBRANT JEWISH COMMUNITY LOCALLY, IN ISRAEL AND THROUGHOUT THE WORLD. THIS IS ACCOMPLISHED THROUGH MEANINGFUL PARTNERSHIPS WITH DONORS, JEWISH COMMUNITY ORGANIZATIONS AND SYNAGOGUES. THE PROGRAM ALSO PROVIDES CONTINUING EDUCATION PROGRAMS FOR LOCAL BUSINESS PROFESSIONALS RELATING TO THE NOT-FOR-PROFIT SECTOR. OUTREACH - THE OUTREACH PROGRAM SERVES AS THE EDUCATION AND ENGAGEMENT ARM OF THE FINANCIAL RESOURCE DEVELOPMENT DEPARTMENT BY OFFERING PROGRAMS AND EVENTS THAT HIGHLIGHT THE FEDERATION'S MISSION. FUNDRAISING IS NOT PART OF THESE PROGRAMS; RATHER THE GOAL IS TO SHARE THE REASONS WHY IS IT IMPORTANT TO BE INVOLVED WITH FEDERATION AND THE LOCAL JEWISH COMMUNITY. YOUNG ADULT ENGAGEMENT - THE YOUNG ADULT ENGAGEMENT PROGRAM FOCUSES ON CULTIVATION AND PHILANTHROPIC JOURNEYS OF YOUNG ADULTS AGES 22-45. THROUGH A VARIETY OF PROGRAMS, INCLUDING BUT NOT LIMITED TO, VOLUNTEER OPPORTUNITIES, SOCIAL OUTINGS, AND IMMERSIVE EXPERIENCES, THE DEPARTMENT'S END GOAL IS TO ENSURE THE FUTURE OF JEWISH LEADERSHIP IN THE PALM BEACHES. STRATEGIC COMMUNITY RELATIONS - THE STRATEGIC COMMUNITY RELATIONS PROGRAM CREATES STRATEGIC PARTNERSHIPS WITH OTHER NOT-FOR-PROFIT ORGANIZATIONS WHOSE MISSION ALIGNS WITH THE MISSION OF THE JEWISH FEDERATION. COMMUNITY WIDE SERVICES - THE COMMUNITY WIDE SERVICES PROGRAM HOUSES ALL ACTIVITIES RELATED TO RESEARCH AND ANALYSIS OF THE JEWISH COMMUNITY POPULATION OF THE GREATER PALM BEACHES.

Form 990, Part III, Line 4b:

AGENCY SERVICES AND CAMPUS OPERATIONS
AGENCY SERVICES: THE AGENCY SERVICES PROGRAM PROVIDES SUPPORT FOR THE MANDEL JEWISH COMMUNITY CENTERS AND THE ARTHUR I. MEYER JEWISH ACADEMY.
CAMPUS OPERATIONS : THE CAMPUS OPERATIONS MAINTAINS THE REAL ESTATE AND FACILITIES OWNED BY THE FEDERATION, WHICH INCLUDES LAND AND BUILDING FOR THE MANDEL JCC AND THE ARTHUR I. MEYER JEWISH ACADEMY.

Form 990, Part III, Line 4c:

COMMUNITY PROGRAM CENTERJEWISH COMMUNITY RELATIONS COUNCIL - THE COMMUNITY RELATIONS PROGRAM HELPS TO ENSURE A VIBRANT JEWISH FUTURE BY CONVENING, EDUCATING AND MOBILIZING THE JEWISH COMMUNITY TO (1) PROMOTE A SECURE JEWISH AND DEMOCRATIC STATE OF ISRAEL; (2) COMBAT ANTI-SEMITISM, DISCRIMINATION AND BIGOTRY; (3) FOSTER UNDERSTANDING WITHIN AND BEYOND THE JEWISH COMMUNITY; AND (4) CHAMPION A JUST AND PLURALISTIC SOCIETY.MANDEL CENTER FOR LEADERSHIP DEVELOPMENT - THE VISION OF THE MANDEL CENTER FOR LEADERSHIP DEVELOPMENT IS TO BUILD A COMMUNITY IN WHICH THE JEWISH FEDERATION OF PALM BEACH COUNTY CREATES AND NOURISHES A CULTURE OF STRONG LEADERSHIP. THE MANDEL CENTER ENCOURAGES COMMUNITY MEMBERS TO SERVE AS LEADERS FOR THE JEWISH FEDERATION AND TO SEEK ONGOING LEARNING AND DEVELOPMENT. THE MISSION OF THE MANDEL CENTER IS TO ENGAGE AND DEVELOP HIGH PERFORMANCE VOLUNTEER AND PROFESSIONAL LEADERS. ITS GOAL IS TO RECRUIT, INSPIRE, TRAIN AND RETAIN LEADERS WHO HAVE THE VALUES, COMMITMENT AND SKILLS TO GIVE HIGH QUALITY LEADERSHIP TO THE JEWISH FEDERATION.GROSS FAMILY FOUNDATION PROGRAMS - AS THE NUMBER OF LIVING HOLOCAUST SURVIVORS DECREASES AND GLOBAL ANTISEMITISM INCREASES, THE GROSS FAMILY CENTER FOR THE STUDY OF ANTISEMITISM AND THE HOLOCAUST AND JEWISH FEDERATION OF PALM BEACH COUNTY ARE WORKING TOGETHER TO RAISE AWARENESS OF THE HOLOCAUST AND PREJUDICE FACED BY JEWISH PEOPLE AROUND THE WORLD. THE GROSS FAMILY CENTER SPEAKER SERIES PROVIDES THE PALM BEACHES WITH INNOVATIVE PROGRAMMING THAT EXPLORES THE EXPERIENCES AND CONSEQUENCES OF ANTISEMITISM, RACISM AND VIOLATIONS OF HUMAN RIGHTS. THIS SPEAKER SERIES FREE AND OPEN TO THE PUBLIC FEATURES PROMINENT EXPERTS AND INTERNATIONAL SPEAKERS, CONNECTING COMMUNITY MEMBERS TO A SIGNIFICANT ASPECT OF THE JEWISH EXPERIENCE.COMMISSION FOR JEWISH EDUCATION- THE COMMISSION FOR JEWISH EDUCATION PROVIDES, EDUCATION, SUPPORT SERVICES AND OTHER RESOURCES TO INDIVIDUALS, FAMILIES, AND INSTITUTIONS IN ORDER TO CONNECT COMMUNITY MEMBERS WITH JEWISH LEARNING OPPORTUNITIES TO STRENGTHEN JEWISH EDUCATION, AND TO ENRICH THE LIVES OF JEWISH FAMILIES THROUGH THE GREATER PALM BEACHES. CURRENTLY, THE LITERACY PROGRAM WORKS WITH PALM BEACH COUNTY SCHOOLS AS WELL AS JEWISH PRESCHOOLS IN OUR COMMUNITY. TOGETHER THE FOLLOWING PROGRAMS, READING EXPRESS, READING TOGETHER, PROJECT SPECIALISTS, TIKKUN OLAM TODDLER PROGRAM, AND AFTERCARE CREATIVES ENGAGE OVER 250 VOLUNTEERS, IMPACT OVER 20 ELEMENTARY SCHOOLS, AND ENHANCE THE LIVES OF OVER 2,500 CHILDREN.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD FLAH MEMBER AT LARGE	2.00	X						0	0	0
JULIANA KOHL GENDELMAN MEMBER AT LARGE	2.00	X						0	0	0
BRIAN SEYMOUR MEMBER AT LARGE	2.00	X						0	0	0
CHARLES GOTTESMAN HUMAN RESOURCES CHAIR	2.00	X						0	0	0
HERBERT JAVER MEMBER AT LARGE	2.00	X						0	0	0
MICHAEL L KOHNER MEMBER AT LARGE	2.00	X						0	0	0
ARTHUR LEHRHOFF MEMBER AT LARGE	2.00	X						0	0	0
GARY LESSER MEMBER AT LARGE	2.00	X						0	0	0
VIVIAN LIEBERMAN MEMBER AT LARGE	2.00	X						0	0	0
BRIAN LEMELMAN MEMBER AT LARGE	2.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JUSTIN PAUL MEMBER AT LARGE	2.00	X						0	0	0
RABBI ANDREW ROSENKRANZ MEMBER AT LARGE	2.00	X						0	0	0
GARY L SCHOTTENSTEIN MEMBER AT LARGE	2.00	X						0	0	0
RONALD SCHRAM MEMBER AT LARGE	2.00	X						0	0	0
ALYSON SELIGMAN MEMBER AT LARGE	2.00	X						0	0	0
KEVIN SHAPIRO MEMBER AT LARGE	2.00	X						0	0	0
BOWIE JACOBSON MEMBER AT LARGE	2.00	X						0	0	0
BENTE S LYONS MEMBER AT LARGE	2.00	X						0	0	0
LYNN PESECKIS MEMBER AT LARGE	2.00	X						0	0	0
BERYL SIMONSON AUDIT COMMITTEE CHAIR	2.00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SYDELLE SONKIN MEMBER AT LARGE	2.00	X						0	0	0
RONDA STARR MEMBER AT LARGE	2.00	X						0	0	0
SUSAN SHULMAN PERTNOY ISRAEL & OVERSEAS CHAIR	2.00	X						0	0	0
CAROLE SOLOMON JEWISH COMMUNITY FOUNDATION CHAIR	2.00	X						0	0	0
IRA GERSTEIN BOARD CHAIR	10.00			X				0	0	0
DEBBIE SHAPIRO VICE CHAIR	2.00			X				0	0	0
HOPE SILVERMAN BOARD CHAIR-ELECT	2.00			X				0	0	0
RON PERTNOY SECRETARY	2.00			X				0	0	0
RAY GOLDEN IMMEDIATE PAST BOARD CHAIR	2.00			X				0	0	0
LYNN KASTON VICE CHAIR	2.00			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARK LEVY VICE CHAIR	2.00			X				0	0	0
ROBERT GORDON TREASURER	2.00			X				0	0	0
ARTHUR LORING VICE CHAIR	4.00 2.00			X				0	0	0
KATHY SIGALL CHIEF FINANCIAL OFFICER	43.00			X				188,531	0	24,637
MICHAEL HOFFMAN CHIEF EXECUTIVE OFFICER	2.00 51.00			X				318,390	0	46,858
ILAN HURVITZ CHIEF PLANNING OFFICER	4.00 43.00					X		145,680	0	29,443
DEBRA ROSHFELD CHIEF OPERATING OFFICER	2.00 13.00					X		148,532	0	16,555
MINDY HANKEN CHIEF PROGRAM OFFICER	2.00 43.00					X		179,223	0	23,476
JEFF TRYNZ SENIOR VICE PRESIDENT OF MARKETING	2.00 43.00					X		141,753	0	12,419
MATTHEW KERNKRAUT CHIEF DEVELOPMENT OFFICER	2.00 43.00					X		263,306	0	33,263

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF PALM BEACH COUNTY
INC

Employer identification number
59-0948696

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10

☐

An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s).

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	22,583,747	28,162,240	21,006,114	24,375,111	23,412,790	119,540,002
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3	22,583,747	28,162,240	21,006,114	24,375,111	23,412,790	119,540,002
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . .						6,966,416
6	Public support. Subtract line 5 from line 4.						112,573,586

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . . .	22,583,747	28,162,240	21,006,114	24,375,111	23,412,790	119,540,002
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,614,801	3,102,121	4,646,973	3,463,198	3,765,705	16,592,798
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . . .	1,303,757	1,953,803	5,022,650	2,795,046	2,488,837	13,564,093
11	Total support. Add lines 7 through 10						149,696,893

12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	75.200 %
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	75.720 %

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► ☐

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► ☐

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . .						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV

Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

Part V

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

<div>1</div> <div><input type="checkbox"/></div> <div>Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.</div>			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	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	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<div><input type="checkbox"/></div> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

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

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

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

Additional Data

Software ID:
Software Version:
EIN: 59-0948696
Name: JEWISH FEDERATION OF PALM BEACH COUNTY
INC

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

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493123010251

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF PALM BEACH COUNTY INC

Employer identification number
59-0948696

Part I

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

1

Total number at end of year

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

(a) Donor advised funds

106
3,623,085
5,384,337
23,837,283

(b) Funds and other accounts

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

Yes

No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Yes

No

Part II

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

1

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

☐ Preservation of land for public use (e.g., recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

a

Total number of conservation easements

b

Total acreage restricted by conservation easements

c

Number of conservation easements on a certified historic structure included in (a)

d

Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

Held at the End of the Year

2a

2b

2c

2d

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes

No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes

No

9

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

Part III

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

1a

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

b

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

(i) Revenue included on Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2

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

a

Revenue included on Form 990, Part VIII, line 1 ► \$

b

Assets included in Form 990, Part X ► \$

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

Cat. No. 52283D

Schedule D (Form 990) 2019

Part III

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

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a☐ Public exhibition

b☐ Scholarly research

c☐ Preservation for future generations

d☐ Loan or exchange programs

e☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back	
1a	Beginning of year balance	53,873,681	52,088,667	49,563,237	47,036,709	49,593,888
b	Contributions	1,937,629	2,427,551	1,385,214	771,812	2,286,881
c	Net investment earnings, gains, and losses	1,434,353	2,504,496	4,160,774	4,952,848	-1,411,693
d	Grants or scholarships	2,906,196	2,940,280	2,820,721	3,012,399	3,248,376
e	Other expenditures for facilities and programs					
f	Administrative expenses	208,982	206,753	199,837	185,733	183,991
g	End of year balance	54,130,485	53,873,681	52,088,667	49,563,237	47,036,709

2

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

a

Board designated or quasi-endowment

27.000 %

b

Permanent endowment

66.000 %

c

Temporarily restricted endowment

7.000 %

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

3a

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)	Yes	
3a(ii)		No
3b		

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4

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

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	5,827,000		5,827,000
b	Buildings	24,664,658	3,971,366	20,693,292
c	Leasehold improvements			
d	Equipment	584,120	300,425	283,695
e	Other	3,423,580	1,252,208	2,171,372
Total.	Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			28,975,359

Part VII

Investments—Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) STATE OF ISRAEL BONDS	286,502	F
(B) BOND MUTUAL FUNDS	17,128,426	F
(C) EQUITY MUTUAL FUNDS	46,297,793	F
(D) MONEY MARKET MUTUAL FUNDS	10,268,075	F
(E) PRIVATE EQUITY	7,087,128	F
(F) REAL ASSET FUNDS	3,633,247	F
(G) COMMON STOCK	1,360,207	F
(H) BONDS	2,366,371	F
(I) MULTI-ASSET/OPPORTUNISTIC	13,293,367	F
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	101,721,116	

Part VIII

Investments—Program Related.

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

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

Part IX

Other Assets.

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

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

Part X

Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ALLOCATIONS PAYABLE	6,971,939
(3) SPLIT INTEREST AGREEMENTS	2,195,445
(4) DUE TO AFFILIATES AND SUPPORTING FOUNDATIONS	2,734,520
(5) DESIGNATED CAMPAIGN GIFTS	698,938
(6) DUE TO PALM BEACH JEWISH COMMUNITY CAMPUS CORPORATION	4,417,802
(7) CAPITAL LEASES	172,955
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	17,191,599

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

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

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

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

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

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

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

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 59-0948696
Name: JEWISH FEDERATION OF PALM BEACH COUNTY
INC

Form 990, Schedule D, Part VII - Investments Other Securities

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
STATE OF ISRAEL BONDS	286,502	F
BOND MUTUAL FUNDS	17,128,426	F
EQUITY MUTUAL FUNDS	46,297,793	F
MONEY MARKET MUTUAL FUNDS	10,268,075	F
PRIVATE EQUITY	7,087,128	F
REAL ASSET FUNDS	3,633,247	F
COMMON STOCK	1,360,207	F
BONDS	2,366,371	F
MULTI-ASSET/OPPORTUNISTIC	13,293,367	F

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	<p>THE FEDERATION IS A NONPROFIT CORPORATION WHOSE REVENUE IS DERIVED FROM CONTRIBUTIONS AND OTHER FUNDRAISING ACTIVITIES. THE FEDERATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501 (C) (3) OF THE INTERNAL REVENUE CODE AND SALES AND USE TAX UNDER THE LAWS OF THE STATE OF FLORIDA. DURING THE YEARS ENDED JUNE 30, 2020 AND 2019, THE FEDERATION GENERATED NET UNRELATED BUSINESS LOSSES FROM CERTAIN ALTERNATIVE INVESTMENTS. NO PROVISIONS FOR FEDERAL OR STATE INCOME TAXES WERE RECORDED AS THE AMOUNTS ARE IMMATERIAL TO THESE CONSOLIDATED FINANCIAL STATEMENTS. THE FEDERATION RECOGNIZES AND MEASURES TAX POSITIONS BASED ON THEIR TECHNICAL MERIT AND ASSESSES THE LIKELIHOOD THAT THE POSITIONS WILL BE SUSTAINED UPON EXAMINATION BASED ON THE FACTS, CIRCUMSTANCES AND INFORMATION 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 U.S. FEDERAL JURISDICTION AND FLORIDA ARE THE MAJOR TAX JURISDICTIONS WHERE THE FEDERATION FILES INCOME TAX RETURNS. THE FEDERATION IS GENERALLY NO LONGER SUBJECT TO U.S. FEDERAL OR STATE EXAMINATIONS BY TAX AUTHORITIES FOR FISCAL YEARS BEFORE 2017.</p>

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	INVESTMENT MANAGEMENT FEES

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	DESIGNATED GIFTS

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	DESIGNATED GIFTS INVESTMENT MANAGEMENT FEES

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		HIGH RIDGE (event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	243,824			243,824
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	243,824			243,824
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment	210,379			210,379
	9 Other direct expenses	11,053			11,053
	10 Direct expense summary. Add lines 4 through 9 in column (d) ►				221,432
11 Net income summary. Subtract line 10 from line 3, column (d) ►				22,392	

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11	Does the organization conduct gaming activities with nonmembers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13	Indicate the percentage of gaming activity conducted in:		
a	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address ►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$		
c	If "Yes," enter name and address of the third party:		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ►		
	<input type="checkbox"/> Director/officer	<input type="checkbox"/> Employee	<input type="checkbox"/> Independent contractor
17	Mandatory distributions:		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		<input type="checkbox"/> Yes <input type="checkbox"/> No
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$		

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

Return Reference	Explanation
------------------	-------------

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

Schedule I
(Form 990)

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
JEWISH FEDERATION OF PALM BEACH COUNTY
INC

Employer identification number

59-0948696

Part I General Information on Grants and Assistance

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

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

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 125

3 Enter total number of other organizations listed in the line 1 table ▶

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

Part III can be duplicated if additional space is needed.

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

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

Return Reference	Explanation
PART I, LINE 2:	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 GRANTEEES IS VERIFIED. GRANTS FOR GENERAL ASSISTANCE IS MONITORED BY THE PLANNING AND ALLOCATIONS DEPARTMENT WHICH REQUIRES REPORTS AND FINANCIAL DATA INDICATING HOW FUNDS ARE UTILIZED.
SCHEDULE I, PART I, LINE 2	JEWISH FEDERATION OF PALM BEACH COUNTY, INC. REPORTS GRANTS ON SCHEDULE I TO THE JEWISH FEDERATIONS OF NORTH AMERICA (JFNA), WHICH IS A 501 (C)(3) DOMESTIC U.S. CHARITY. IN ADDITION, JFNA, AND ITS BENEFICIARY AGENCIES, UNITED ISRAEL APPEAL (UIA), A SUBSIDIARY OF JFNA , AND THE AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE (JDC) - BOTH 501 (C) (3) ORGANIZATIONS-- EACH FILE A SEPARATE FORM 990 AND DETAILED SCHEDULE F.

Additional Data

Software ID:
Software Version:
EIN: 59-0948696
Name: JEWISH FEDERATION OF PALM BEACH COUNTY
INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JFNA 25 BROADWAY NEW YORK, NY 100041010	13-1624240	501(C)(3)	4,418,507				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE INC 220 E 42ND STREET STE 400 NEW YORK, NY 10017	13-1656634	501(C)(3)	638,883				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER CHICAGO FOOD DEPOSITORY 4100 WEST ANN LURIE PLACE CHICAGO, IL 60632	36-2971864	501(C)(3)	400,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ALPERT JEWISH FAMILY & CHILDREN'S SERVICE INC 5841 CORPORATE WAY STE 200 WEST PALM BEACH, FL 334072039	59-1520581	501(C)(3)	1,516,801				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRTHRIGHT ISRAEL FOUNDATION 711 THIRD AVE 10TH FLOOR NEW YORK, NY 10017	13-4092050	501(C)(3)	390,173				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
JEWISH FEDERATION OF METROPOLITAN CHICAGO 30 SOUTH WELLS STREET CHICAGO, IL 60606	36-2167761	501(C)(3)	200,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MANDEL JEWISH COMMUNITY CENTER OF THE PALM BEACHES INC 8500 JOG ROAD BOYNTON BEACH, FL 33472	59-1582799	501(C)(3)	1,779,599				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
KRAMER SENIOR SERVICES AGENCY INC 4847 DAVID MACK DRIVE WEST PALM BEACH, FL 33417	90-0730105	501(C)(3)	1,021,259				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROADRUNNER FOOD BANK INC 5840 OFFICE BLVD NE ALBUQUERQUE, NM 87109	85-0278525	501(C)(3)	150,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
JEWISH RESIDENTIAL AND FAMILY SERVICES INC 5841 CORPORATE WAY STE 200 WEST PALM BEACH, FL 33407	65-0737159	501(C)(3)	122,805				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PALM BEACH OPERA INC 1800 SOUTH AUSTRALIAN AVENUE SUITE 301 WEST PALM BEACH, FL 33409	59-1060864	501(C)(3)	121,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
JUPITER MEDICAL CENTER FOUNDATION INC 1210 SOUTH OLD DIXIE HIGHWAY JUPITER, FL 33458	65-0132406	501(C)(3)	110,600				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE EMANU-EL OF PALM BEACH INC 190 NORTH COUNTY ROAD PALM BEACH, FL 334803740	59-1027143	501(C)(3)	113,393				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
UJA FEDERATION OF NEW YORK 130 EAST 59TH STREET ATTN DONOR CENTER NEW YORK, NY 100221397	51-0172429	501(C)(3)	100,919				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INNER CITY INNOVATORS INC 505 15TH STREET WEST PALM BEACH, FL 33401	81-3809173	501(C)(3)	100,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ISRAEL POLICY FORUM 355 LEXINGTON AVENUE NEW YORK, NY 10017	90-0653286	501(C)(3)	100,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUTH AND NORMAN RALES JEWISH FAMILY SERVICES INC 21300 RUTH AND BARON COLEMAN BLVD BOCA RATON, FL 33428	65-1115689	501(C)(3)	100,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
THE LORD'S PLACE INC 2808 NORTH AUSTRALIAN AVENUE WEST PALM BEACH, FL 33407	59-2240502	501(C)(3)	100,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MORSELIFE FOUNDATION INC 4847 FRED GLADSTONE DR WEST PALM BCH, FL 33417	59-2774476	501(C)(3)	298,996				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
AMERICAN FRIENDS OF THE TEL AVIV UNIVERSITY INC 39 BROADWAY 15TH FLOOR NEW YORK, NY 10006	13-1996126	501(C)(3)	75,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ISRAEL EDUCATION FOUNDATION INC 251 H STREET NW WASHINGTON, DC 20001	52-1623781	501(C)(3)	75,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
JEWISH FEDERATION OF NEW MEXICO 5520 WYOMING BLVD NE ALBUQUERQUE, NM 87109	85-0158242	501(C)(3)	75,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON INSTITUTE FOR NEAR EAST POLICY 1111 19TH STREET NW STE 500 WASHINGTON, DC 20036	52-1376034	501(C)(3)	72,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
RAYMOND F KRAVIS CENTER FOR THE PERFORMING ARTS 701 OKEECHOBEE BOULEVARD WEST PALM BEACH, FL 334016399	59-2245054	501(C)(3)	70,080				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE JUDEA OF PALM BEACH COUNTY INC 4311 HOOD ROAD PALM BEACH GARDENS, FL 33410	59-2100649	501(C)(3)	72,888				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ARTHUR I MEYER JEWISH ACADEMY 5225 HOOD ROAD PALM BEACH GARDENS, FL 33418	59-1491258	501(C)(3)	1,005,874				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRANDEIS UNIVERSITY 415 SOUTH STREET MS 126 WALTHAM, MA 02453	04-2103552	501(C)(3)	50,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
CATAWBA COLLEGE 2300 W INNES ST SALISBURY, NC 28144	56-0530251	501(C)(3)	50,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEVELAND CLINIC FOUNDATION PHILANTHROPY INSTITUTE CLEVELAND, OH 44195	34-0714585	501(C)(3)	50,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
REFUGEPOINT 689 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	20-2061482	501(C)(3)	40,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BREAST CANCER RESEARCH FOUNDATION INC 28 WEST 44TH STREET STE 609 NEW YORK, NY 10036	13-3727250	501(C)(3)	40,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
TOWN OF PALM BEACH UNITED WAY INC 44 COCOANUT ROW - SUITE M-201 PALM BEACH, FL 334804069	59-0637885	501(C)(3)	39,600				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REUT USA 8383 WILSHIRE BOULEVARD SUITE 400 BEVERLY HILLS, CA 90211	20-3585888	501(C)(3)	36,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
DIRECT RELIEF 6100 WALLACE BECKNELL SANTA BARBARA, CA 93117	95-1831116	501(C)(3)	35,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH WOMEN'S FOUNDATION OF THE GREATER PALM BEACHES 2274 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33409	47-1611411	501(C)(3)	42,580				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
JUVENILE DIABETES RESEARCH FOUNDATION INTERNATIONAL SOUTHERN FLORIDA CHAPTER WEST PALM BEACH, FL 33409	23-1907729	501(C)(3)	32,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPPORTUNITY INC 4171 WESTGATE AVE WEST PALM BEACH, FL 33409	59-0624429	501(C)(3)	30,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
HILLEL OF BROWARD & PALM BEACH LEVINE WEINBERGER JEWISH LIFE CENTER BOCA RATON, FL 33431	56-2472825	501(C)(3)	38,490				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS OF MAGEN DAVID ADOM 20 W 36TH STREET STE 1100 NEW YORK, NY 10008	13-1790719	501(C)(3)	26,595				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
FEEDING AMERICA 35 EAST WACKER DRIVE SUITE 2000 CHICAGO, IL 60601	36-3673599	501(C)(3)	26,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ISRAEL FUND 1400 NW 107TH AVE MIAMI, FL 33172	94-2607722	501(C)(3)	26,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
FOODBANK OF SANTA BARBARA COUNTY 4554 HOLLISTER AVE SANTA BARBARA, CA 93110	77-0169214	501(C)(3)	25,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PALM BEACH DAY ACADEMY INC 241 SEAVIEW AVENUE PALM BEACH, FL 33480	59-0873834	501(C)(3)	25,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ANTI-DEFAMATION LEAGUE 5295 TOWN CENTER ROAD STE 300 BOCA RATON, FL 33486	13-1818723	501(C)(3)	24,765				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIFT OF LIFE MARROW REGISTRY 5901 BROKEN SOUND PKWY NW BOCA RATON, FL 33487	22-3131232	501(C)(3)	22,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
AMERICAN FRIENDS OF THE ISRAEL MUSEUM 545 FIFTH AVENUE SUITE 920 NEW YORK, NY 10017	23-7182582	501(C)(3)	20,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARP-COMPREHENSIVE ALCOHOLISM REHABILITATION PROGRAMS INC 1626 OKEECHOBEE ROAD WEST PALM BEACH, FL 33401	59-1447364	501(C)(3)	20,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ISRAEL TENNIS CENTERS FOUNDATION 3275 WEST HILLSBORO BLVD SUITE 102 DEERFIELD BEACH, FL 33442	13-2961273	501(C)(3)	17,180				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTON GALLERY & SCHOOL OF ART INC 1450 S DIXIE HIGHWAY WEST PALM BEACH, FL 33401	59-0624432	501(C)(3)	15,900				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
PALM BEACH ORTHODOX SYNAGOGUE 120 N COUNTY ROAD PALM BEACH, FL 33480	65-0478910	501(C)(3)	69,768				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3501 SANSOM STREET PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	15,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
PLANNED PARENTHOOD OF SOUTH EAST AND NORTH FLORIDA 2300 NORTH FLORIDA MANGO ROAD WEST PALM BEACH, FL 33409	59-1391115	501(C)(3)	13,700				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALGEMEINER INC 788 EASTERN PARKWAY STE 303 BROOKLYN, NY 11213	81-1236747	501(C)(3)	12,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
STEWART'S CARING PLACE 2955 WEST MARKET STREET SUITE R AKRON, OH 44333	20-0181338	501(C)(3)	12,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL FOUNDATION FOR JEWISH CAMPUS LIFE 800 8TH ST NW WASHINGTON, DC 20001	52-1844823	501(C)(3)	140,600				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ORT AMERICA INC 75 MAIDEN LANE 10TH FLOOR NEW YORK, NY 10038	13-5562424	501(C)(3)	11,250				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDATION FOR THE DEFENSE OF DEMOCRACIES INC PO BOX 33249 WASHINGTON, DC 20033	13-4174402	501(C)(3)	11,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY 101 S INDEPENDENCE MALL EAST PHILADELPHIA, PA 19106	23-7379280	501(C)(3)	11,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS OF THE ISRAEL PHILHARMONIC ORCHESTRA INC 122 EAST 42ND STREET SUITE 4507 NEW YORK, NY 10168	23-7183563	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
BALTIMORE MUSEUM OF INDUSTRY 1415 KEY HIGHWAY BALTIMORE, MD 21230	52-1205675	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTERLINK INC PO BOX 24490 FT LAUDERDALE, FL 33307	52-2292725	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
INTERNATIONAL PLANNED PARENTHOOD FEDERATION 125 MAIDEN LANE FL 9 NEW YORK, NY 100385063	13-1845455	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH BOOK COUNCIL 520 8TH AVENUE 4TH FLOOR NEW YORK, NY 10018	13-3737760	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
KENNEDY KRIEGER FOUNDATION INC 707 N BROADWAY PHILANTHROPY DEPT BALTIMORE, MD 21205	52-1734695	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL FOUNDATION FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION INC 600 PEACHTREE STREET ATLANTA, GA 30308	58-2106707	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE RD SUITE 1200 JENKINTOWN, PA 19046	23-7825575	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLICOLOR 20 WEST 36TH STREET NEW YORK, NY 10018	13-3912768	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
TEMPLE MICAH 2829 WISCONSIN AVENUE NW WASHINGTON, DC 200074702	52-0845118	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SOCIETY OF THE FOUR ARTS INC 2 FOUR ARTS PLAZA PALM BEACH, FL 33480	59-0454318	501(C)(3)	10,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
JAZZ AT ASPEN SNOWMASS 110 EAST HALLAM SUITE 104 ASPEN, CO 81611	84-1220222	501(C)(3)	9,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S GOLF FOUNDATION INC 7301 HAVERHILL ROAD N RIVIERA BEACH, FL 33407	65-0262208	501(C)(3)	9,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 SAINT JUDE PLACE MEMPHIS, TN 38105	62-0646012	501(C)(3)	8,143				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP BAUERCREST FOUNDATION INC 26 ROBIN ROAD WESTON, MA 02493	82-4967541	501(C)(3)	7,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ISLAND HARVEST LTD 15 GRUMMAN ROAD WEST BETHPAGE, NY 117143569	11-3136350	501(C)(3)	7,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAILS-TO-TRAILS CONSERVANCY THE DUKE ELLINGTON BUILDING WASHINGTON, DC 20037	52-1437006	501(C)(3)	7,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
TEMPLE BETH EL 2815 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33407	59-6045467	501(C)(3)	10,998				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN COMMITTEE FOR THE WEIZMANN INST OF SCIENCE INC 5900 N ANDREWS AVENUE SUITE 415 FT LAUDERDALE, FL 33309	13-1623886	501(C)(3)	7,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
TEMPLE ISRAEL NANCY DON CARTER CAMPUS WEST PALM BEACH, FL 33407	59-0696295	501(C)(3)	10,738				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOSTON SYMPHONY ORCHESTRA 301 MASSACHUSETTS AVENUE BOSTON, MA 021154511	04-2103550	501(C)(3)	6,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
COMMUNITY CHEST OF PORT WASHINGTON INC 382 MAIN STREET PORT WASHINGTON, NY 11050	11-1614994	501(C)(3)	6,500				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOCTORS WITHOUT BORDERS USA INC P O BOX 5030 HAGERSTOWN, MD 217415030	13-3433452	501(C)(3)	6,200				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
INSIGHT THROUGH EDUCATION INC 101 PEMBROKE DRIVE PALM BEACH GARDENS, FL 33418	27-3388434	501(C)(3)	6,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEARNING THROUGH AN EXPANDED ARTS PROGRAM INC 535 EIGHTH AVENUE SUITE 1100 NEW YORK, NY 10018	13-2925233	501(C)(3)	6,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
FREDERICK BOOK ARTS CENTER INC 217 WEST PATRICK STREET FREDERICK, MD 21701	82-3894693	501(C)(3)	5,400				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CIVIL LIBERTIES UNION FOUNDATION 125 BROAD STREET - 18TH FLOOR NEW YORK, NY 10004	13-6213516	501(C)(3)	5,200				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
FEEDING SOUTH FLORIDA 4925 PARK RIDGE BLVD BOYNTON BEACH, FL 33426	59-2097520	501(C)(3)	5,152				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN JEWISH WORLD SERVICE INC 45 WEST 36TH STREET 11TH FLOOR NEW YORK, NY 100187904	22-2584370	501(C)(3)	5,100				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
BRIGHAM & WOMEN'S HOSPITAL INC DEVELOPMENT OFFICE BOSTON, MA 02116	04-2312909	501(C)(3)	5,100				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACADIA CENTER ENVIRONMENT NORTHEAST P O BOX 583 ROCKPORT, ME 04856	01-0518193	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ADOPT-A-FAMILY OF THE PALM BEACHES 1712 SECOND AVE NORTH LAKE WORTH, FL 33460	59-2471253	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AHRC NEW YORK CITY FOUNDATION INC 83 MAIDEN LANE 8TH FLOOR NEW YORK, NY 10038	13-3779611	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
ARS NOVA THEATER I INC 511 W 54TH ST NEW YORK, NY 10019	80-0339038	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOOMER ESIASON FOUNDATION 483 10TH AVENUE NEW YORK, NY 10018	11-3142753	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
CAMILLUS HOUSE 1603 NW 7TH AVENUE MIAMI, FL 33136	65-0032862	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD JEWISH CENTER OF JUPITER 107 VIA VERACRUZ JUPITER, FL 334586912	20-0186163	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
COMMITTEE FOR ACCURACY IN MIDDLE EAST REPORTING IN AMERICA INC PO BOX 35040 BOSTON, MA 02135	52-1332702	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSERVATION COLORADO EDUCATION FUND 1536 WYNKOOP ST SUITE 510 DENVER, CO 80202	84-0614285	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
FRIENDS OF THE JEWISH MUSEUM OF VIENNA INC 301 EAST 87TH STREET 20E NEW YORK, NY 10128	45-5313316	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMAN RIGHTS FIRST 75 BROAD STREET NEW YORK, NY 10004	13-3116646	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
JEWISH FEDERATION OF GREATER SANTA BARBARA 524 CHAPALA STREET SANTA BARBARA, CA 93101	23-7354759	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEWY BODY DEMENTIA ASSOCIATION INC 912 KILLIAN HILL ROAD SW LILBURN, GA 30047	05-0577683	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
MANNA FOOD CENTER INC 9311 GAITHER ROAD GAITHERSBURG, MD 20877	52-1289203	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIAMI CITY BALLET 2200 LIBERTY AVENUE MIAMI BEACH, FL 331399824	59-2578534	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
NATIONAL ABORTION FEDERATION 1090 VERMONT AVENUE NW SUITE 1000 WASHINGTON, DC 20005	43-1097957	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL IMMIGRATION LAW CENTER 3450 WILSHIRE BLVD 108 - 62 LOS ANGELES, CA 90010	95-4539765	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
OCEAN FOUNDATION 1320 19TH STREET NW WASHINGTON, DC 20036	71-0863908	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PALM BEACH COUNTY FOOD BANK INC 525 GATOR DR LANTANA, FL 33462	90-0788707	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
PALM BEACH NORTH ATHLETIC FOUNDATION INC 11300 US HWY1 STE 500 PALM BEACH GARDENS, FL 33408	82-2416593	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PALM BEACH POLICE FOUNDATION INC 139 N COUNTY RD STE 26 PALM BEACH, FL 33480	83-0462654	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
PARK AVENUE SYNAGOGUE 50 EAST 87TH STREET NEW YORK, NY 10128	13-1860028	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RED DEVILS INC 200 E JOPPA RD STE 105 TOWSON, MD 21286	74-3070929	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
SIXTH & I SYNAGOGUE INC 600 I STREET NW WASHINGTON, DC 20001	33-1036146	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOME INC 71 O STREET NW WASHINGTON, DC 20001	23-7098123	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
SOUTHWEST ORLANDO JEWISH CONGREGATION INC 11200 S APOPKA VINELAND RD ORLANDO, FL 32836	59-2298201	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STETSON UNIVERSITY INC 421 N WOODLAND BLVD HILLEL UNIT 8330 DELAND, FL 32723	59-0624416	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
TEMPLE ISRAEL 477 LONGWOOD AVENUE BOSTON, MA 02215	04-2104029	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ART GUILD OF PORT WASHINGTON 200 PORT WASHINGTON BLVD MANHASSET, NY 11030	11-3532550	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
THE CHILDRENS SCHOLARSHIP FUND EIGHT WEST 38TH STREET 9TH FLOOR NEW YORK, NY 10018	13-4002189	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE JEWISH COMMUNITY CENTER OF GREATER ORLANDO INC 851 N MAITLAND AVENUE MAITLAND, FL 32751	23-7448234	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
THOMAS JEFFERSON UNIVERSITY OFFICE OF INSTITUTIONAL ADVANCEMENT PHILADELPHIA, PA 19107	23-1352651	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA BEACH RESCUE SQUAD 740 VIRGINIA BEACH BLVD VIRGINIA BEACH, VA 234514234	54-6047133	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
WITHINREACH FOUNDATION INC PO BOX 256 PORT WASHINGTON, NY 11050	46-0874626	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUNG ADULT INSTITUTE INC 460 WEST 34TH STREET 11TH FLOOR NEW YORK, NY 10001	11-2030172	501(C)(3)	5,000				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION
TEMPLE BETH TIKVAH OF GREENACRES INC 4550 JOG ROAD GREENACRES, FL 33467	59-2286877		5,324				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE BETH AM 2250 CENTRAL BOULEVARD JUPITER, FL 33458	59-2248680		5,088				GENERAL SUPPORT TO CARRY OUT THE MISSION OF THE ORGANIZATION

Schedule J (Form 990)	Compensation Information	OMB No. 1545-0047
		2019
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		
▶ Attach to Form 990.		
▶ Go to www.irs.gov/Form990 for instructions and the latest information.		
Department of the Treasury Internal Revenue Service	Name of the organization JEWISH FEDERATION OF PALM BEACH COUNTY INC	Employer identification number 59-0948696

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Schedule J (Form 990) 2019

Part III **Supplemental Information**

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

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

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
JEWISH FEDERATION OF PALM BEACH COUNTY
INC

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Employer identification number

59-0948696

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A COLORADO EDUCATION AND CULTURAL FACILITIES AUTHORITY	84-0896727		09-10-2013	15,000,000	CONSTRUCTION, EQUIPMENT, AND COST OF ISSUANCE.		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue								
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X						
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X						

Part III Private Business Use

					A		B		C		D	
					Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?					X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?					X						

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶								
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6 Total of lines 4 and 5								
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . .								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?		X						
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X						
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148? . . .		X						

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X						

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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2019

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF PALM BEACH COUNTY
INC

Employer identification number
59-0948696

Part I

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2

Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. ▶ \$

3

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. ▶ \$

Part II

Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) MICHAEL HOFFMAN	CHIEF EXECUTIVE OFFICER	PURCHASE HOME DUE TO RELOCATION		X	115,000	80,978		No	Yes		Yes	
Total						80,978						

Part III

Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) JULIANA GENDELMAN	BOARD MEMBER AT LARGE	202,164	INSURANCE		No
(2) ALYSON SELIGMAN	BOARD MEMBER AT LARGE	47,580	SELIGMAN BRAND STRATEGIES		No

Part V Supplemental Information

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

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

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Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures . .				
3 Art—Fractional interests . .				
4 Books and publications . .				
5 Clothing and household goods				
6 Cars and other vehicles . . .				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded .	X	88	2,489,363	FMV OF SHARES RECEIVED
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .	X	3	100,500	FACE VALUE OF BONDS
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential . .				
16 Real estate—Commercial . .				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

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

29

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b

If "Yes," describe the arrangement in Part II.

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

No

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b

If "Yes," describe in Part II.

33

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

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**Open to Public
Inspection**

Department of the Treasury

Name of the organization

JEWISH FEDERATION OF PALM BEACH COUNTY
INC

Employer identification number

59-0948696

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	BARRY BERG- FATHER-IN-LAW TO RACHEL BERG (EMP) BARBARA KAY- MOTHER OF SUSAN SHULMAN-PERTNOY (BOD), MOTHER-IN-LAW TO RON PERTNOY (BOD & CC) ALAN SHULMAN- FATHER OF SUSAN SHULMAN PERTNOY (BOD), FATHER-IN-LAW TO RON PERTNOY (BOD & CC) RON PERTNOY- HUSBAND OF SUSAN SHULMAN PERTNOY (BOD), SON-IN-LAW OF ALAN SHULMAN (CC), SON-IN-LAW OF BARBARA KAY (BOD) SUSAN SHULMAN PERTNOY- WIFE OF RON PERTNOY (CC & BOD), DAUGHTER OF BARBARA KAY (BOD), DAUGHTER OF ALAN SHULMAN (BOD) ANDREW COMITER-SON OF RICHARD COMITER (BOD) SANDY BAKLOR- HUSBAND TO ARLENE KAUFMAN (BOD) MARK LEVY- HUSBAND TO STACEY LEVY (BOD) STEVEN ELLISON- HUSBAND TO STACEY ELLISON (BOD) JIM BALDINGER- BROTHER-IN-LAW TO GARY LESSER RABBI ANDREW ROSENKRANZ- HUSBAND TO ERICA ROSENKRANZ BUSINESS RELATIONSHIPS: MARK LEVY(CC)- CONTRACTUAL RELATIONSHIP WITH RONALD PERTNOY(CC AND BOD) ALLYSON SELIGMAN-CONTRACTUAL RELATIONSHIP WITH THE JEWISH FEDERATION OF PALM BEACH COUNTY(SELIGMAN BRAND STRATEGIES)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE NOMINATING COMMITTEE PREPARES A SLATE OF NEW BOARD MEMBERS TO BE APPROVED BY THE BOARD.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE TAX PREPARER PREPARES THE 990 AND IT IS REVIEWED BY THE AUDIT COMMITTEE. THERE IS A SECURE PORTAL ON THE FEDERATION WEBSITE AVAILABLE ONLY TO THE 46 VOTING MEMBERS OF THE BOARD OF DIRECTORS. THE COMPLETED FORM 990 IS POSTED ON THIS SECURE PORTAL AND BOARD MEMBERS ARE NOTIFIED THAT THE COMPLETED FORM 990 IS POSTED FOR THEIR REVIEW.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EMPLOYEES ARE GIVEN A COPY OF THE CONFLICT OF INTEREST POLICY AND ASKED TO COMPLETE AND SIGN A CONFLICT OF INTEREST DISCLOSURE FORM WHEN FIRST HIRED AND THEN ANNUALLY AFTER THAT. RETURN OF SIGNED FORMS IS MONITORED AND INDIVIDUAL FOLLOW UP IS DONE FOR 100% COMPLIANCE. MEMBERS OF THE BOARD OF DIRECTORS ARE GIVEN A COPY OF THE CONFLICT OF INTEREST POLICY AND ASKED TO COMPLETE AND SIGN A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY. AT A BOARD MEETING THE BOARD CHAIR REVIEWS WHY IT IS NECESSARY FOR ALL BOARD MEMBERS AND KEY EMPLOYEES TO COMPLETE THE CONFLICT OF INTEREST DISCLOSURE FORM. RETURN OF SIGNED FORMS IS MONITORED AND INDIVIDUAL FOLLOW UP IS DONE BY MAIL AND AT BOARD MEETINGS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	CEO: THE COMPENSATION COMMITTEE IS PROVIDED WITH COMPARABILITY DATA FOR CEO COMPENSATION COMPILED BY AN INDEPENDENT NATIONAL HR CONSULTING FIRM, INCLUDING DATA FROM THE OTHER LARGE CITY JEWISH FEDERATIONS AND EXTERNAL MARKET DATA FROM BOTH NOT-FOR-PROFIT AND FOR-PROFIT ORGANIZATIONS. THE COMPENSATION COMMITTEE DOCUMENTS ITS DECISIONS IN A LETTER SIGNED BY THE FEDERATION BOARD CHAIR AS CHAIR OF THE COMPENSATION COMMITTEE. THE CEO IS PROVIDED WITH AN EMPLOYMENT CONTRACT, AND THE TERMS ARE REPORTED TO THE FEDERATION EXECUTIVE COMMITTEE IN AN EXECUTIVE SESSION. FOR OTHER SENIOR MANAGEMENT COMPENSATION DECISIONS, THE COMPENSATION COMMITTEE IS PROVIDED WITH COMPARABILITY DATA FROM OTHER JEWISH FEDERATIONS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	INFORMATION IS AVAILABLE ON THE JEWISH FEDERATION OF PALM BEACH COUNTY, INC.'S WEBSITE, ON GUIDESTAR AND UPON REQUEST. GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND BYLAWS ARE AVAILABLE ON THE JEWISH FEDERATION OF PALM BEACH COUNTY, INC.'S WEBSITE. FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	NO CHANGES FROM THE PRIOR YEAR.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF PALM BEACH COUNTY
INC

Employer identification number
59-0948696

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)PALM BEACH JEWISH COMMUNITY CAMPUS CORP ONE HARVARD CIRCLE SUITE 100 WEST PALM BEACH, FL 33409 65-0006250	OWNS PROPERTY FOR THE PURPOSE OF PROVIDING EDUCATIONAL, PROGRAMMING	FL	501(C)(3)	LINE 7	JEWISH FEDERATION OF PALM BEACH COUNTY INC		No
(2)NORTH PALM BEACH COUNTY JEWISH COMMUNITY CAMPUS CORP ONE HARVARD CIRCLE SUITE 100 WEST PALM BEACH, FL 33409 46-1245509	MAINTAINS PROPERTY FOR THE PURPOSE OF PROVIDING EDUCATIONAL, PROGRAMMING	FL	501(C)(3)	LINE 7	JEWISH FEDERATION OF PALM BEACH COUNTY INC		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

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.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)	Yes	
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)	Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses		No
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PALM BEACH JEWISH COMMUNITY CAMPUS CORP	B	1,971,131	CASH
(2) PALM BEACH JEWISH COMMUNITY CAMPUS CORP	E	2,826,596	CASH
(3) PALM BEACH JEWISH COMMUNITY CAMPUS CORP	K	2,252,241	MARKET VALUE
(4) NORTH PALM BEACH COUNTY JEWISH COMMUNITY CAMPUS CORPORATION	B	35,517	CASH

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.

[illegible]

Part VII **Supplemental Information**

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

Return Reference	Explanation