** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

Department of the Treasury

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 2021 calendar year, or tax year beginning JUL 1 2021 and ending JUN 30, 2022 C Name of organization D Employer identification number Check if applicable: X Address change JEWISH FEDERATION OF GREATER SEATTLE Name change 91-0575950 Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 300 LENORA STREET, PMB 6074 206-443-5400 15,006,738. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return SEATTLE, WA 98121 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: NANCY B. GREER Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: ► WWW.JEWISHINSEATTLE.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > Year of formation: 1960 M State of legal domicile: WA Part I Summary Briefly describe the organization's mission or most significant activities: THE FEDERATION LEADS A STRONG Governance JEWISH PUGET SOUND BY SERVING AS A COMMUNITY VOICE. (SEE SCHEDULE O) if the organization discontinued its operations or disposed of more than 25% of its net assets. 21 Number of voting members of the governing body (Part VI, line 1a) 21 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 27 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 183 Total number of volunteers (estimate if necessary) 6 10 901. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 1,333. 7h **Prior Year Current Year** 4,831,979 5,078,853. Contributions and grants (Part VIII, line 1h) 8 Revenue 169,908 256,273. Program service revenue (Part VIII, line 2g) 3,175,604 8,951,330. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -33,698 -13,233. 11 8,143,793 14 273 223. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,253,434 4,186,774. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 2,093,460. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,373,739. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,251,365. 1,321,672. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 7,598,259. 7,882,185. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 545,534. 6,391,038. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 29 93,924,162. 81,195,228. Total assets (Part X, line 16) 9,510,317, 8,537,997. 21 Total liabilities (Part X, line 26) 三年 84,413,845. 72,657,231. Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign NANCY B. GREER, PRESIDENT & CEO Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature SARAH B. HUANG SARAH B. HUANG 05/03/23 P00745974 Paid Firm's name CLARK NUBER, P.S. 91-1194016 Preparer Firm's EIN ▶ Firm's address > 10900 NE 4TH STREET, SUITE 1400 Use Only

BELLEVUE, WA 98004

May the IRS discuss this return with the preparer shown above? See instructions

No

X Yes

Phone no. 425-454-4919

91-0575950

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE FEDERATION LEADS A STRONG JEWISH PUGET SOUND BY SERVING AS A
	COMMUNITY VOICE, STRENGTHENING CONNECTIONS TO ISRAEL AND WORLD JEWRY,
	AND MAKING INVESTMENTS IN JEWISH LIFE, FOR TODAY AND THE NEXT
	GENERATION.
_	
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	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?
	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 \$3,763,961. including grants of \$2,649,271.) (Revenue \$74,217.
	COMMUNITY SERVICES: THE FEDERATION PROVIDES PROGRAMS AND SERVICES THAT
	SUPPORT LOCAL ORGANIZATIONS AND THE COMMUNITY AT LARGE. THE FEDERATION
	THROUGH ADVOCACY AND COALITION BUILDING, ADVOCATES FOR MORE EFFECTIVE
	POLICIES. THE GOVERNMENT AND COMMUNITY AFFAIRS TEAM EDUCATES
	LEGISLATORS ABOUT TOP PRIORITIES AND SUPPORTS THE NEEDS AND WORK OF OUR
	LOCAL JEWISH AGENCIES. THE JEWISH COMMUNITY RELATIONS COUNCIL (JCRC) OF
	THE FEDERATION BRINGS TOGETHER AND MOBILIZES THE LOCAL JEWISH COMMUNITY
	ON CRITICAL ISSUES AMPLIFYING OUR COLLECTIVE VOICE FOR INSTITUTIONAL
	MEMBERS AND INDIVIDUAL LEADERS. THE JCRC FOSTERS MEANINGFUL
	RELATIONSHIPS AMONG DIVERSE ETHNIC, RACIAL, RELIGIOUS, AND INTEREST
	GROUPS; BUILDS COALITIONS BASED ON MUTUAL AREAS FOR ANTISEMITISM.
	RACISM, AND CIVIL RIGHTS; AND EDUCATES AND ADVOCATES TO ADVANCE JEWISH
4b	(Code:) (Expenses \$ 2,031,410. including grants of \$ 825,449.) (Revenue \$ 149,056.
40	INVESTMENTS IN JEWISH LIFE: THE FEDERATION OFFERS PROGRAMMING TO
	INDIVIDUALS AND FAMILIES, PROVIDING EASY ENTRY POINTS TO JEWISH LIFE,
	AS WELL AS LEADERSHIP DEVELOPMENT. THE FEDERATION DOES THIS THROUGH
	PROGRAMS AND EXPERIENCES THAT PROVIDE OPPORTUNITIES WHERE COMMUNITY
	MEMBERS CAN MAKE PERSON-TO-PERSON CONNECTIONS WITHIN THEIR LOCAL
	COMMUNITIES.
	THESE PROGRAM INVESTMENTS INCLUDE:
	- PJ LIBRARY AND PJ OUR WAY, IN PARTNERSHIP WITH THE HAROLD GRINSPOON
	FOUNDATION, PROVIDE YOUNG FAMILIES BOOKS FREE OF CHARGE TO FOSTER
	JEWISH INVOLVEMENT AND CONNECTION. THROUGH PJ PROGRAMMING, FAMILIES CAN
	MEET ONE ANOTHER TO FORM CONNECTIONS THROUGH FUN AND WELCOMING
	IN-PERSON AND VIRTUAL EXPERIENCES.
4c	(Code:) (Expenses \$1,044,526. including grants of \$712,054.) (Revenue \$33,000.)
	ISRAEL AND WORLD JEWRY: THE PROJECTS THE FEDERATION FUNDS OVERSEAS
	PROVIDE EDUCATION, FOOD FOR THE HUNGRY, HEALTH CARE FOR THE SICK, AND
	SUPPORT FOR ISRAELI IMMIGRANTS IN CRISIS. THROUGH FUNDING OF THE JEWISH
	AGENCY FOR ISRAEL (JAFI), THE AMERICAN JEWISH JOINT DISTRIBUTION
	COMMITTEE (JDC), AMERICAN FRIENDS OF LEKET ISRAEL, THE ETHIOPIAN
	NATIONAL PROJECT (ENP), TECH-CAREER, SHAHARIT, YEMEN ORDE/IMPACT
	ISRAEL, AND SELAH, THE FEDERATION SUPPORTS THE GLOBAL JEWISH COMMUNITY.
	THE FEDERATION HELPS AREA COMMUNITY MEMBERS MAKE MEANINGFUL CONNECTIONS
	TO ISRAEL THROUGH ITS ISRAELI EMISSARIES PROGRAM, TEEN ISRAEL
	SCHOLARSHIPS, THE HONEYMOON ISRAEL SEATTLE PROGRAM, AND LECTURES ON
	ISRAEL AND AMERICAN JEWRY IN THE PUGET SOUND REGION.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
46	Total program service expenses 6,839,897.
<u> </u>	. can program outries appointed #

Form 990 (2021) JEWISH FEDERATION OF GREATER SEATTLE Part IV Checklist of Required Schedules

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

Form 990 (2021) JEWISH FEDERATION OF GREATER SEATTLE

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	Х	
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	Х	
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		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, 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		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 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		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00 -		х
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		x
20	"Yes," complete Schedule L, Part IV	29	Х	
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30		30		x
31	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	-01		
<b>52</b>	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- OZ		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
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	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	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		х
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		х
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		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

O21) JEWISH FEDERATION OF GREATER SEATTLE

Statements Regarding Other IRS Filings and Tax Compliance (continued) Form 990 (2021) **Part V** Sta

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 27			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	_	77	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4-		x
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country	4a		
b	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		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	_		х
0	sponsoring organization have excess business holdings at any time during the year?	8		Α.
9 a	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?	9a		х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		х
10	Section 501(c)(7) organizations. Enter:	0.0		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.			
D	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			
_	Enter the amount of reserves on hand  13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2021)

JEWISH FEDERATION OF GREATER SEATTLE

Part VI

Governance, Management, and Disclosure.

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶WA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JEAN CALLAHAN - 206-443-5400			
	300 LENORA STREET PMB 6074 SEATTLE WA 98121			

Form 990 (2021)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Check this box if neither the organization nei	(B)	(C)						(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both officer and a director/truste			s both	an	compensation	compensation	amount of	
	week		cer an	id a d	irecto	r/trus	tee)	from	from related	other	
	(list any	director						the	organizations (W-2/1099-MISC/	compensation from the	
	hours for related	eord	stee			sated		organization (W-2/1099-MISC/	1099-NEC)	organization	
	organizations	truste	al trus		yee	mper		1099-NEC)	1000 (120)	and related	
	below	Individual trustee or	Institutional trustee	ъ	Key employee	Highest compensated employee	Jer.	,		organizations	
	line)	Indiv	Instit	Officer	Key 6	High emp	Former				
(1) NANCY GREER	60.00										
PRESIDENT & CEO	1.00			Х				249,869.	0.	41,408.	
(2) SAMUEL KLEIN	40.00										
DIRECTOR OF JEWISH ENGAGEMENT						Х		112,396.	0.	54,345.	
(3) JEAN CALLAHAN	40.00										
DIRECTOR OF FINANCE						Х		117,371.	0.	8,646.	
(4) MAXIMA PATASHNIK	40.00										
DIRECTOR OF JCRC & GOV AFFAIRS						Х		104,208.	0.	8,223.	
(5) DAVID ISENBERG	5.00										
BOARD CHAIR		Х		Х				0.	0.	0.	
(6) CARL BIANCO	2.00										
VICE CHAIR/PERSONNEL COMMITTEE		Х		Х				0.	0.	0.	
(7) LISA BRASHEM	2.00										
VICE CHAIR/JEWISH PUGET SOUND CHAIR		Х		Х				0.	0.	0.	
(8) ROBERT SPITZER	1.00										
VICE CHAIR		Х		Х				0.	0.	0.	
(9) DAVID STIEFEL	2.00										
VICE CHAIR/FOUNDATION CHAIR		Х		Х				0.	0.	0.	
(10) KEN RUDEE	1.00										
AT-LARGE BOARD MEMBER		Х						0.	0.	0.	
(11) LINDA CLIFTON	1.00										
AT-LARGE BOARD MEMBER		Х						0.	0.	0.	
(12) SARAH BODEN	2.00	-						_	_	_	
IMMEDIATE PAST BOARD CHAIR/NOM COMM		Х		Х				0.	0.	0.	
(13) HART COLE	1.00							_	_	_	
SECRETARY		Х		Х				0.	0.	0.	
(14) ALLIX DEGRAFF	2.00									•	
AT-LARGE BOARD MEMBER/SIF CHAIR		Х						0.	0.	0.	
(15) JONATHAN DUNN	1.00								_	_	
AT-LARGE BOARD MEMBER	1 00	Х						0.	0.	0.	
(16) MARLA DUNN	1.00								_	_	
AT-LARGE BOARD MEMBER	2.00	Х	$\vdash$		-			0.	0.	0.	
(17) JOCELYN ISAACS	2.00								^	_	
AT-LARGE BOARD MEMBER/AUDIT CHAIR	<u> </u>	Х						0.	0.	0. - 000 (222.4)	

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

Section A. Officers, Directors, Trus		oloy	ees,			ghes	st Co		' '			
(A)	(B)			Pos	C) ition	,		(D)	(E)		(F)	
Name and title	Average hours per		not c	heck	more	than		Reportable	Reportable	1	stimate	
	week	offi	, unle cer ar	ss per nd a di	rson i irecto	is botl or/trus	n an tee)	compensation from	compensation from related	ar	nount o other	OT
	(list any	tor						the	organizations	com	npensa	ition
	hours for	direc				, p		organization	(W-2/1099-MISC/	1	rom the	
	related	tee or	trustee			ensate		(W-2/1099-MISC/	1099-NEC)	orç	ganizati	ion
	organizations	al trus	nal tr		oyee	om p		1099-NEC)		an	d relate	ed
	below line)	Individual trustee or director	In stit utio nal	Officer	key employee	Highest compensated employee	Former			orga	anizatio	ons
(18) WILLIAM MOWAT	5.00	Ĕ	Ë	₩	Α.	를 '등	요			<del>                                     </del>		
JCRC CHAIR	3.00	x						0.	0.			0.
(19) PAUL NACAMULI	2.00	A				$\vdash$		· · ·	•	$\vdash$		
TREASURER/ FISCAL MANAGEMENT CHAIR	2.00	x		x				0.	0.			0.
(20) GABRIEL SCHERZER	2.00	<del></del> -		<del></del>		$\vdash$				<del>                                     </del>		
ISRAEL & OVERSEAS CHAIR		х						0.	0.			0.
(21) BRAD SMITH	1.00											
AT-LARGE BOARD MEMBER		х						0.	0.			0.
(22) DANIEL STEIN	1.00											
AT-LARGE BOARD MEMBER		х						0.	0.			0.
(23) CAROL STOCKTON	1.00											
AT-LARGE BOARD MEMBER		Х						0.	0.			0.
(24) CANTOR DAVID SERKIN-POOLE	1.00											
AT-LARGE BOARD MEMBER		Х						0.	0.	Ь_		0.
(25) JEFF SLOTNICK	1.00											
AT-LARGE BOARD MEMBER		Х				_		0.	0.	<u> </u>		0.
1b Subtotal							<b>•</b>	583,844.	0.	<del> </del>	112,	622.
c Total from continuation sheets to Part VI	I. Section A							0.	0.			0.
d Total (add lines 1b and 1c)							<b>•</b>	583,844.	0.		112,	622.
2 Total number of individuals (including but n							o re	ceived more than \$100,	,000 of reportable			
compensation from the organization												4
											Yes	No
3 Did the organization list any former officer,	director, trust	ee, ł	кеу е	empl	loye	e, or	higl	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for s	uch individual									3	$\Box$	Х
4 For any individual listed on line 1a, is the su	•							•	•			
and related organizations greater than \$150	),000? If "Yes,	" co	mple	ete S	Sche	edule	J fo	or such individual		4	Х	
5 Did any person listed on line 1a receive or a	accrue comper	nsati	on fi	om	any	unre	elate	d organization or individ	dual for services			
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch ı	oers	on				5		Х
Section B. Independent Contractors												
1 Complete this table for your five highest co	•	•							•	ition fr	mc	
the organization. Report compensation for	the calendar y	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.			

(A)	(B)	(C)
Name and business address	Description of services	Compensation
SEI		
ONE FREEDOM DR, OAKS, PA 19456	INVESTMENT MANAGEMENT	167,872.
REN, 8910 PURDUE RD, STE 500,		
INDIANAPOLIS, IN 46268	ENDOWMENT PLATFORM SERVICE	156,520.
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

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

		Check if Schedule O	contains	s a response	or note to any line	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
							lunction revenue	business revenue	sections 512 - 514
Siδ	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b								
ဗ် ရို		Fundraising events			98,234.				
ffs,					529,830.				
ij gi		Related organizations			325,030.				
ns, Sim		Government grants (contr							
atio er 9	Ť	All other contributions, gifts,			4 450 700				
년 된		similar amounts not included		1f	4,450,789.				
ont od (	g				575,267.	5 050 050			
<u>8 0</u>	h	Total. Add lines 1a-1f				5,078,853.			
					Business Code				
ė	2 a				900099	192,680.			
e Ķ	b	FOUNDATION ADMIN FE	ES		900099	63,593.	63,593.		
S	С								
am	d								
Program Service Revenue	е								
Ŗ	f	All other program service	revenue						
	g	Total. Add lines 2a-2f				256,273.			
	3	Investment income (includ							
		other similar amounts)				1,850,794.		10,901.	1,839,893.
	4	Income from investment of			i i			·	
	5	Royalties							
	Ū	rioyanico		(i) Real	(ii) Personal				
	6 2	Gross rents	6a	(1) 1.104.	(1) 1 01001141				
	b		6b						
	С.	Rental income or (loss)	6c						
		Net rental income or (loss)							
	7 a	Gross amount from sales of	I <u>⊢</u> `	i) Securities	(ii) Other				
		assets other than inventory	7a 7	7,815,249.					
	b	Less: cost or other basis							
e		and sales expenses	7b	711,733.					
l en	С	Gain or (loss)	7c 7	7,103,516.	-2,980.				
ther Revenue	d	Net gain or (loss)		<u></u>	<b>)</b>	7,100,536.			7,100,536.
ē		Gross income from fundraising							
₹		including \$	98,23	4. of					
		contributions reported on	line 1c)	. See					
		Part IV, line 18		8a	0.				
	b	Less: direct expenses		I	18,802.				
		Net income or (loss) from			<b></b>	-18,802.			-18,802.
		Gross income from gamin		- —					
		Part IV, line 19							
	b	Less: direct expenses		I					
		Net income or (loss) from			<b>•</b>				
		Gross sales of inventory, I							
		and allowances							
	h	Less: cost of goods sold							
		Net income or (loss) from							
$\rightarrow$		140E INCOME OF (1033) HOME	caics UI	mivernory	Business Code				
Sn.	11 a	TAX REFUND (990T)			900099	5,338.			5,338.
e Te	ıı a b			_	900099	231.			231.
Miscellaneous Revenue		•				231,			
Sce	C C								
Ξ		All other revenue				5,569.			
		Total Add lines 11a-11d			·····	14,273,223.	256,273.	10,901.	8,927,196.
	12	<b>Total revenue</b> . See instruction	лιѕ		🚩 l	1=,413,443.	1 430,4/3.	1 10,301.	U,JZ1,1JU.

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

Secu	on 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a respons			ipiete Column (A).	
Do i	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C)	( <b>D</b> ) Fundraising
	8b, 9b, and 10b of Part VIII.	rotal expenses	expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	2,491,542.	2,491,542.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	341,581.	341,581.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	1,353,651.	1,353,651.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	298,560.	149,280.	44,784.	104,496.
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	1,696,114.	1,205,483.	145,763.	344,868.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	68,712.	51,762.	5,798.	11,152.
9	Other employee benefits	176,688.	106,243.	31,266.	39,179.
10	Payroll taxes	133,665.	90,861.	12,918.	29,886.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	749.	466.	273.	10.
С	Accounting	75,542.	46,968.	27,540.	1,034.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	166,014.	166,014.		
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	96,055.	59,722.	35,018.	1,315.
12	Advertising and promotion	4,544.	2,381.	2,113.	50.
13	Office expenses	98,559.	35,733.	20,925.	41,901.
14	Information technology	87,514.	60,540.	9,974.	17,000.
15	Royalties				
16	Occupancy	173,501.	117,981.	19,085.	36,435.
17	Travel	91,042.	83,068.	4,057.	3,917.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	157,428.	139,459.	13,630.	4,339.
20	Interest				
21	Payments to affiliates	40.000	40.40	2 122	
22	Depreciation, depletion, and amortization	19,363.	13,167.	2,130.	4,066.
23	Insurance	25,124.	12,002.	9,091.	4,031.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount list line 24e expenses on Sebadula (A).				
а	amount, list line 24e expenses on Schedule 0.) ENDOWMENT ADMIN FEES	138,307.	138,307.		
a b	DUES & SUBSCRIPTIONS	106,947.	104,078.	2,809.	60.
	TAXES & LICENSES	11,424.	7,808.	1,282.	2,334.
d		,,	.,		-, <b>-</b>
	All other expenses	69,559.	61,800.	7,759.	
25	Total functional expenses. Add lines 1 through 24e	7,882,185.	6,839,897.	396,215.	646,073.
26	Joint costs. Complete this line only if the organization	, ,	, ,	, ,	,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	F	<u>l</u>			Form 990 (202

Form **990** (2021)

# Form 990 (2021) Part X Balance Sheet

ı a	ILΑ	Check if Schedule O contains a response or	note to an	v line in this Part X			
				,	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			4,748,019.	1	2,577,965.
	2	Savings and temporary cash investments	4,950,294.	2	5,459,122.		
	3	Pledges and grants receivable, net	1,017,617.	3	834,175.		
	4	Accounts receivable, net		58,421.	4	41,684.	
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons descri	tion 4958(c)(3)(B)		6		
S	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
As	9	Prepaid expenses and deferred charges			185,036.	9	84,974.
		Land, buildings, and equipment: cost or other			·		·
		basis. Complete Part VI of Schedule D	1	595,475.			
	b	Less: accumulated depreciation		378,348.	234,847.	10c	217,127.
	11	Investments - publicly traded securities		'	77,959,554.	11	67,505,851.
	12	Investments - other securities. See Part IV, lin			173,179.	12	139,821.
	13	Investments - program-related. See Part IV, li		, -	13	<u> </u>	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	4,597,195.	15	4,334,509.		
	16	Total assets. Add lines 1 through 15 (must e		1	93,924,162.	16	81,195,228.
	17	Accounts payable and accrued expenses			254,500.	17	289,446.
	18	Grants payable	1,082,944.	18	1,312,073.		
	19	Deferred revenue			, , .	19	, , ,
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple		1	6,874,951.	21	5,931,113.
	22	Loans and other payables to any current or f					
Liabilities		trustee, key employee, creator or founder, su					
i≣		controlled entity or family member of any of t		22			
Lia	23	Secured mortgages and notes payable to un		23			
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
	25	parties, and other liabilities not included on li					
		of Schedule D	1103 17 24)	. Complete Fait X	1,297,922.	25	1,005,365.
	26			·····	9,510,317.	26	8,537,997.
	20	Organizations that follow FASB ASC 958,		a <b>x</b>	-,,	20	-,,
Se		and complete lines 27, 28, 32, and 33.	oneck ner				
Š	27				62,065,220.	27	52,574,382.
sala	28	Net assets with donor restrictions			22,348,625.	28	20,082,849.
P	20	Organizations that do not follow FASB AS				20	
F		and complete lines 29 through 33.	ck liefe				
<u></u>	29	Capital stock or trust principal, or current fur	nde			29	
ets	30	Paid-in or capital surplus, or land, building, o				30	
\SS.	31	Retained earnings, endowment, accumulated			31		
Net Assets or Fund Balances	32				84,413,845.	32	72,657,231.
Ž		Total liabilities and not assets/fund balances			93,924,162.	33	81,195,228.
	33	Total liabilities and net assets/fund balances			55,524,102.	<b>ა</b> ა	51,193,220. Farm <b>990</b> (2001

Form **990** (2021)

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Pai	T XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	14	273,	223.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	7	882,	185.		
3	Revenue less expenses. Subtract line 2 from line 1						
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4						
5							
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9		209,	264.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	72	657,	231.		
Pai	t XII Financial Statements and Reporting						
	Check 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: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	Separate basis  X Consolidated basis  Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit					
	Act and OMB Circular A-133?		3a		х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				
			Form	990	(2021)		

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **Employer identification number** JEWISH FEDERATION OF GREATER SEATTLE 91-0575950 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	13,425,100.	4,206,644.	8,086,094.	4,831,979.	5,078,853.	35,628,670.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	13,425,100.	4,206,644.	8,086,094.	4,831,979.	5,078,853.	35,628,670.
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)						9,704,635.
6	Public support. Subtract line 5 from line 4.						25,924,035.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	13,425,100.	4,206,644.	8,086,094.	4,831,979.	5,078,853.	35,628,670.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2,947,113.	3,888,529.	3,036,533.	2,438,635.	1,839,893.	14,150,703.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	435,394.		2,768.			438,162.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	4,039.	1,429.	713.		5,569.	11,750.
11	Total support. Add lines 7 through 10						50,229,285.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	1,374,737.
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					<b>&gt;</b>
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2021 (li	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	51.61 %
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	50.20 %
16a	33 1/3% support test - 2021. If the o	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2020. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization quali	ifies as a publicly s	upported organiza	tion			▶□
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pul	olicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets th	ne facts-and-circum	stances test, chec	k this box and st	<b>op here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circu	ımstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	<b>&gt;</b>
18	Private foundation. If the organizatio	n did not check a l	oox on line 13, 16a	ı, 16b, 17a, or 17b	, check this box a	nd see instructions	

# Schedule A (Form 990) 2021 JEWISH FEDERATION OF GREATER SEATTLE Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to rexpended on its behalf						
<b>5</b> T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
<b>b</b> U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
<b>11</b> N a	dd lines 10a and 10b						
<b>12</b> C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						<b>&gt;</b>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.1	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
За		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
٥.		
9b		
00		
9с		
46		
10a		
40h		
10b		

Pa	t IV Supporting Organizations (continued)			J
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
0	supported organizations played in this regard.	3		
Sec	tion 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	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	l ' I	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	<b>~</b> :		
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01		
	of its supported organizations? If "Yes " describe in <b>Part VI</b> the role played by the organization in this regard	3b		l

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	izations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.					
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors					
	(explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
_3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,					
	see instructions).	4				
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
_6	Multiply line 5 by 0.035.	6				
_7_	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functional	ally integrate	d Type III supporting orga	nization (see		
	instructions).					

Schedule A (Form 990) 2021

Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations _{(continu}	ed)					
Secti	ection D - Distributions Current Year								
1	Amounts paid to supported organizations to accomplish exer		1						
2	Amounts paid to perform activity that directly furthers exemp								
	organizations, in excess of income from activity		2						
3	Administrative expenses paid to accomplish exempt purpose	3	3						
4	Amounts paid to acquire exempt-use assets			4					
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5					
6	Other distributions (describe in Part VI). See instructions.			6					
7	Total annual distributions. Add lines 1 through 6.			7					
8	Distributions to attentive supported organizations to which the	ne organization is responsive							
	(provide details in Part VI). See instructions.			8					
9	Distributable amount for 2021 from Section C, line 6			9					
10	Line 8 amount divided by line 9 amount	T		10					
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	s	(iii) Distributable Amount for 2021				
_1_	Distributable amount for 2021 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2021 (reason-								
	able cause required - explain in Part VI). See instructions.								
3	Excess distributions carryover, if any, to 2021								
<u>a</u>	From 2016								
b	From 2017								
<u>C</u>	From 2018								
<u>d</u>	From 2019								
	From 2020								
	Total of lines 3a through 3e								
	Applied to underdistributions of prior years								
<u>h</u>	Applied to 2021 distributable amount								
<u> </u>	Carryover from 2016 not applied (see instructions)								
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2021 from Section D,								
	line 7: \$								
	Applied to underdistributions of prior years								
	Applied to 2021 distributable amount								
	Remainder. Subtract lines 4a and 4b from line 4.								
5	Remaining underdistributions for years prior to 2021, if								
	any. Subtract lines 3g and 4a from line 2. For result greater								
	than zero, explain in <b>Part VI.</b> See instructions.  Remaining underdistributions for 2021. Subtract lines 3h								
6	S .								
	and 4b from line 1. For result greater than zero, explain in								
7	Part VI. See instructions.  Excess distributions carryover to 2022. Add lines 3j								
′	•								
8	and 4c. Breakdown of line 7:								
	Excess from 2017								
	Excess from 2018								
	Excess from 2019								
	Excess from 2020								
	Excess from 2021								

Schedule A (Form 990) 2021

Tag	<u> </u>
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.)	
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:	
REFUNDS & REIMBURSEMENTS	
2017 AMOUNT: \$ 3,914.	
·	
2019 AMOUNT: \$ 713.	
2021 AMOUNT: \$ 5,338.	
OTHER INCOME	
2017 AMOUNT: \$ 125.	
2021 AMOUNT: \$ 231.	

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Schedule B (Form 990) (2021)

Employer identification number

JEWI	SH FEDERATION OF GREATER SEATTLE	91-0575950					
Organization type (check one	e):						
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization						
J	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
527 political organization							
Form 990-PF	501(c)(3) exempt private foundation						
1	4947(a)(1) nonexempt charitable trust treated as a private foundation						
J	501(c)(3) taxable private foundation						
• •	covered by the <b>General Rule</b> or a <b>Special Rule.</b> ), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	le. See instructions.					
General Rule							
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ne contributor. Complete Parts I and II. See instructions for determining a contributor's						
Special Rules							
sections 509(a)(1) ar contributor, during the	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must nswer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify nat it doesn't meet the filing requirements of Schedule B (Form 990).							

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

Name of organization

Employer identification number

JEWISH FEDERATION OF GREATER SEATTLE

91-0575950

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$581,783.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$200,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$478,518.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$300,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$162,563.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$150,200.	Person X Payroll

Name of organization

Employer identification number

JEWISH FEDERATION OF GREATER SEATTLE

91-0575950

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

JEWISH FEDERATION OF GREATER SEATTLE

91-0575950

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
	MARKETABLE SECURITIES		
5			
			07/27/21
		\$132,657.	07/27/21
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
	MARKETABLE SECURITIES		
6			
			12/16/21
_			
(a)	<b></b>	(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
		<u> </u>	
		\$	
(a)		(0)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I			
		\$	
(a)		(a)	
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
raill			
		\$	
(a)		(0)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I		,,	

**Employer identification number** 

Name of organization

JEWISH FEDERATION OF GREATER SEATTLE 91-0575950 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

## SCHEDULE C

(Form 990)

Political Campaign and Lobbying Activities

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

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

Part I-A	Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.						
2 Political	campaign activity expendit	ation's direct and indirect political ures gn activities		▶\$			
Part I-B	Complete if the org	anization is exempt under	section 501(c)(3				
1 Enter the	amount of any excise tax	incurred by the organization under	section 4955	▶\$			
		incurred by organization managers					
		n 4955 tax, did it file Form 4720 fo					
Part I-C	describe in Part IV.  Complete if the org	anization is exempt under	section 501(c), e	except section 501(c)	(3)		
		by the filing organization for secti					
	• •	ization's funds contributed to othe	· · · · · · · · · · · · · · · · · · ·	***************************************			
			•				
		. Add lines 1 and 2. Enter here and					
line 17b				▶\$			
		1120-POL for this year?					
made par contribut	yments. For each organizations received that were pro	nployer identification number (EIN) tion listed, enter the amount paid to omptly and directly delivered to a sadditional space is needed, provid	rom the filing organiza separate political orgar	tion's funds. Also enter the nization, such as a separate	amount of political		
	(a) Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0		

Schedule C (Form		EDERATION OF GREATER SEATTLE		)575950	Page 2
	omplete if the organizatio ection 501(h)).	n is exempt under section 501(c)(3) and file	d Form 5768 (el	ection und	der
A Check ► □  B Check ► □	expenses, and share of exces	gs to an affiliated group (and list in Part IV each affiliated solutions in Section 2015).  Seed box A and "limited control" provisions apply.	group member's nam	ne, address, I	EIN,
	Limits on Lobb	oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliat tota	• .
1a Total lobbyi	ng expenditures to influence publ	lic opinion (grassroots lobbying)			
<b>b</b> Total lobbyi	ng expenditures to influence a leg	gislative body (direct lobbying)			
c Total lobbyi	ng expenditures (add lines 1a and	d 1b)			
e Total exemp	ot purpose expenditures (add line	s 1c and 1d)			
		unt from the following table in both columns.			
If the amount	t on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
Not over \$5		20% of the amount on line 1e.			
	000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.			
Over \$1,000	0,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.			
· , ,	0,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.			
Over \$17,00	00,000	\$1,000,000.			
g Grassroots	nontaxable amount (enter 25% of	line 1f)			
h Subtract line	e 1g from line 1a. If zero or less, e	enter -0-			
i Subtract line	e 1f from line 1c. If zero or less, e	nter -0-			
j If there is ar	n amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720			
reporting se	ection 4911 tax for this year?			Yes	No
(	Some organizations that made	4-Year Averaging Period Under Section 501(h) a section 501(h) election do not have to complete all o the separate instructions for lines 2a through 2f.)	f the five columns b	elow.	

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	( <b>d)</b> 2021	(e) Total			
<ul><li>2a Lobbying nontaxable amount</li><li>b Lobbying ceiling amount</li><li>(150% of line 2a, column(e))</li></ul>								
c Total lobbying expenditures								
d Grassroots nontaxable amount								
e Grassroots ceiling amount (150% of line 2d, column (e))								
f Grassroots lobbying expenditures								

Schedule C (Form 990) 2021

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

For 6	For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		o)
	e lobbying activity.	Yes	No		ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?	X			
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х	v		
	Media advertisements?	Х	X		1 100
	Mailings to members, legislators, or the public?	X			4,489. 712.
	Publications, or published or broadcast statements?	Λ	x		712.
	Grants to other organizations for lobbying purposes?  Direct contact with legislators, their staffs, government officials, or a legislative body?	x			92,225.
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X			2,449.
			х		-,
-	Other activities?  Total. Add lines 1c through 1i				99,875.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5), or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section		• •		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	'No" OR	(b) Part I	II-A, line	3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	al			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
С	Total		2c		
3			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
_	expenditure next year?				
5 Dai	Taxable amount of lobbying and political expenditures. See instructions  t IV Supplemental Information		5		
			A 11 - 4	10.0	
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	·A, lines 1 a	nd 2 (See	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information. TII-B, LINE 1, LOBBYING ACTIVITIES:				
FARI	TI-B, BINE I, BOBBIING ACTIVITIES:				
∆DW(	OCATE ON POLICY ISSUES OF TOP CONCERN TO THE JEWISH COMMUNITY,				
	CONTROL ON TODAY TO THE COMMON TO				
TNCI	UDING HUMAN AND CIVIL RIGHTS, SOCIAL SERVICES, AND COMBATING				
	321.0 1.01.11 11.0 01.12 11.01.12, 2001.12 22.1.120.2, 11.12 03.12.11				
ANTI	-SEMITISM AS WELL AS ON BEHALF OF LOCAL JEWISH AGENCIES. WE				
ADVO	CATE PRIMARILY AT THE STATE LEVEL AND DO NOT ADVOCATE FOR OR				
AGA]	NST CANDIDATES - ONLY ISSUES.				

### 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

Name of the organization

**Employer identification number** 

JEWISH FEDERATION OF GREATER SEATTLE 91-0575950 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 59 78 Total number at end of year ..... 1,937,175, 665,295. Aggregate value of contributions to (during year) 2 1,757,622. 761,824. 3 Aggregate value of grants from (during year) 14,508,432. Aggregate value at end of year 47,677,422. 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB 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 FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Pai	rt III   Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Otl	ner Si	milar As	sets (c	ontin	ued)	
3	Using the organization's acquisition, accession	on, and other record	s, check any of the f	ollowing that mak	e signifi	icant use o	f its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or exc	hange program						
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explair	n how they further th	e organization's e	xempt p	purpose in	Part XIII.			
5	During the year, did the organization solicit or	r receive donations o	of art, historical treas	sures, or other sim	ilar asse	ets				
	to be sold to raise funds rather than to be ma							es		No
Pai	rt IV Escrow and Custodial Arrang		ete if the organizatio	n answered "Yes"	on For	m 990, Par	t IV, line	9, or		
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for contributions	s or other assets n	ot inclu	ıded				
	on Form 990, Part X?						Y	es	Х	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:		_					
							An	nount		
С	Beginning balance					1c				
d	J ,					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo				-		X Y	es		No
	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on Part >	(III				X	
Pai	rt V Endowment Funds. Complete in					Thusausana	haali (-)			
		(a) Current year	(b) Prior year	(c) Two years bac	+`-	Three years	``		years b	
1a	Beginning of year balance	9,920,845.	7,792,893.			7,728,4			839,9	
b	Contributions	82,271.	172,615.		_	136,8			623,7	
С.	Net investment earnings, gains, and losses	-1,362,810.		-		394,5			581,1	
d	Grants or scholarships	418,324.	380,335.	356,333	٠.	342,5	90.		316,4	:11.
е	Other expenditures for facilities									
_	and programs									
f	Administrative expenses	8,221,982.	9,920,845.	7,792,893	_	7,917,2	70	7	728,4	102
g	End of year balance				٠١	1,311,2	. / 3 •	<u>',</u>	720,4	:03.
2	Provide the estimated percentage of the curr	ent year end balance 95.0700		) neid as:						
a	Board designated or quasi-endowment ►  Permanent endowment ► 3.9230	%	%							
b										
С	Term endowment ► 1.0070 or The percentages on lines 2a, 2b, and 2c should be a should be									
22	Are there endowment funds not in the posses	•	tion that are hold an	nd administered fo	r tha ar	raanization				
Ja	by:	ssion of the organiza	ition that are neid ar	ia administerea 10	i lile oi	gariizatiori		Γ	Yes	No
	(i) Unrelated organizations						[a	a(i)		x
	(ii) Related organizations							a(ii)		X
h	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	ed on Schedule R?				<u> </u>	3b		
4	Describe in Part XIII the intended uses of the							00		
	rt VI Land, Buildings, and Equipm		William Tarido.							
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part	X, line	10.				
	Description of property	(a) Cost or o	ther (b) Cost	or other (c	:) Accur	mulated	(d)	Book	value	
	y	basis (investr		(other)	deprec		(-,			
1a	Land									
b										
С	Leasehold improvements			167,144.		167,144.				0.
d				236,331.		211,204.			25,1	27.
	Other			192,000.					192,0	00.
	I. Add lines 1a through 1e. (Column (d) must ea		X. column (B). line 10	0c.)	<u></u>				217,1	27.
			· · · · · · · · · · · · · · · · · · ·	-					000\	

Schedule D (Form 990) 2021 JEWISH FEDERATION	ON OF GREATER SEATTL	E 93	1-0575950	Page \$
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	d-of-year market	value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII Investments - Program Related.		44 0 5 000 5 1 1 1 1 1 0		
Complete if the organization answered "Yes"				
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	1-of-year market	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
Table (Oal (b) reveal are all Farms 000 Port V and (D) line 10 )				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.	•			
Complete if the organization answered "Yes"	" on Form 990 Part IV line	11d See Form 990 Part X line 15		
	) Description	11a. 366 1 6111 666, 1 are x, iii 6 16.	(b) Book	value
(1) BENEFICIAL INTEREST IN CHARITABLE LEA	, ·		<del>- ' '</del>	334,509
(2)			-,	
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lir	ne 15 )	•	4,	334,509.
Part X Other Liabilities.	10 10.,			
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) LIABILITY UNDER SPLIT INTEREST AGREEM	MENT		1,0	005,365
(3)				
(4)				
(5)				
(6)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

1,005,365.

(7) (8) (9)

Par	t XI Reconciliation of Revenue per Audited Financial S		e 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:	1 1		
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
_5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line	12.)	5	
Par	t XII Reconciliation of Expenses per Audited Financial S	Statements With Expens	ses 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:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line	e 18.)	5	
Par	t XIII Supplemental Information.	•		
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	nd 4; Part IV, lines 1b and 2b; P	art 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	e any additional information.		
PART	IV, LINE 2B:			
GENE	RALLY ACCEPTED ACCOUNTING PRINCIPLES (GAAP) REQUIRE THA	AT IF A		
NOT-	FOR-PROFIT ORGANIZATION ESTABLISHES A DESIGNATED FUND A	AT A FEDERATED		
FUND	RAISING ORGANIZATION WITH ITS OWN FUNDS AND SPECIFIES 1	ITSELF OR ITS		
AFFI	LIATE AS THE BENEFICIARY OF THAT DESIGNATED FUND, THE F	FEDERATED		
FUND	RAISING ORGANIZATION MUST ACCOUNT FOR THE TRANSFER OF S	SUCH ASSETS AS		
IF I	T IS HOLDING THE FUNDS AS AN AGENT OF THE DONOR. ACCORD	DINGLY, THE		
TRAN	SFER IS INCLUDED IN THE FEDERATION'S ASSETS AND AN OFFS	SETTING		
LIAB	ILITY IS CREATED IN AN AMOUNT EQUAL TO THE PRESENT VALU	JE OF FUTURE		
PAYM	ENTS EXPECTED TO BE MADE TO THE DESIGNATED BENEFICIARY.	•		

# SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

### **Statement of Activities Outside the United States**

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

➤ Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

**Employer identification number** 

JEWISH FEDERATION OF GREATER SEATTLE 91-0575950 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1	For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of its gra		
	the grantees' eligibility for	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assistance? X	Yes No
•	F	die de Dest Vale				.1. 11
2	United States.	ribe in Part V the	e organization's p	procedures for monitoring the use of its	s grants and other assistance outsi	de the
3		aa fallawina Dart	L line 2 table or	n be duplicated if additional space is r	acadad )	
<u> </u>	(a) Region	(b) Number of offices in the region	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service,	(f) Total expenditures for and investments in the region
					HONEYMOON ISRAEL SENDS	
					PUGET SOUND YOUNG ADULT	
MIDI	OLE EAST AND				COUPLES TO TRAVEL TO	
NOR!	TH AFRICA	0	0	PROGRAM SERVICES	ISRAEL IN ORDER TO	70,000.
	DLE EAST AND TH AFRICA	0	0	GRANTS TO RECIPIENTS IN THE REGION	GRANTS TO RECIPIENTS IN THE REGION	872,636.
	SIA AND GHBORING STATES	0	0	GRANTS TO RECIPIENTS	GRANTS TO RECIPIENTS IN THE REGION	475,515.
	FRAL AMERICA AND CARIBBEAN	0	0	GRANTS TO RECIPIENTS IN THE REGION	GRANTS TO RECIPIENTS IN THE REGION	5,500.
3 2	Subtotal	0	0			1,423,651.
	Total from continuation sheets to Part I	0	0			0.
r	Totals (add lines 3a					ļ
Ü	and 3b)	0	0			1,423,651.

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

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		MIDDLE EAST AND						
		NORTH AFRICA	PROGRAM SUPPORT	10,000.	WIRE	0.		
		MIDDLE EAST AND						
			PROGRAM SUPPORT	25,000.	WIRE	0.		
		RUSSIA AND						
		NEIGHBORING STATES	PROGRAM SUPPORT	132,000.	MIDE	0.		
		DIAILD	I KOGKAH BUITOKI	132,000.	WIKE	0.		
		MIDDLE EAST AND						
		NORTH AFRICA	PROGRAM SUPPORT	12,000.	WIRE	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	PROGRAM SUPPORT	5,500.	WIRE	0.		
		MIDDLE EAST AND						
			PROGRAM SUPPORT	25,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	PROGRAM SUPPORT	80,000.	MIDE	0.		
		NORTH AFRICA	I KOGKAH BUITOKI	00,000.	WIKE	0.		
		MIDDLE EAST AND						
		NORTH AFRICA	PROGRAM SUPPORT	655,000.	WIRE	0.		

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

.. **>** ______

3 Enter total number of other organizations or entities .

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the l	Jnited States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING						
			PROGRAM SUPPORT	343,515.	WIRE	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash assistance noncash assistance SCHOLARSHIPS FOR JEWISH EDUCATION, INTERNATIONAL CAMPS, PROFESSIONAL MIDDLE EAST AND DEVELOPMENT AWARDS AND 65,636. CHECK NORTH AFRICA 27 0.

Page 4

# Schedule F (Form 990) 2021 Part IV Foreign Forms

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

Schedule F (Form 990) 2021

Page 5

### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of

investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
PART I, LINE 2:
JEWISH FEDERATION OF GREATER SEATTLE (JFGS) VERIFIES THAT ALL
ORGANIZATIONS APPLYING FOR GRANTS HAVE A CURRENT 501(C)(3) STATUS WITH
THE IRS. IN CERTAIN CASES, JFGS REQUIRES PERIODIC REPORTING FROM THE
GRANTEE ON THE PROGRESS OF ESSENTIAL PROGRAMS AND PROJECTS.
PART I, LINE 3:
THE ORGANIZATION USES THE ACCRUAL METHOD OF ACCOUNTING TO ACCOUNT FOR
EXPENDITURES.
PART I, LINE 3, COLUMN (E):
REGION: MIDDLE EAST AND NORTH AFRICA
(E) SPECIFIC TYPES OF SERVICES IN REGION: HONEYMOON ISRAEL SENDS PUGET
SOUND YOUNG ADULT COUPLES TO TRAVEL TO ISRAEL IN ORDER TO DEEPEN THEIR
JEWISH IDENTITY.
PART III, COLUMN (A):
REGION: MIDDLE EAST AND NORTH AFRICA
(A) TYPE OF GRANT OR ASSISTANCE: SCHOLARSHIPS FOR JEWISH EDUCATION,
INTERNATIONAL CAMPS, PROFESSIONAL DEVELOPMENT AWARDS AND PROGRAMS.

# SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization Employer identification number JEWISH FEDERATION OF GREATER SEATTLE 91-0575950 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С g In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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 NONE (add col. (a) through CONNECTIONS 2022 col. (c)) (event type) (total number) (event type) 98,234 98,234. 1 Gross receipts 2 Less: Contributions 98,234 98,234. **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs ..... 7 Food and beverages 3,600. 3,600. 8 Entertainment 15,202. 15,202. 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 18,802. -18,802. 11 Net income summary. Subtract line 10 from line 3, column (d) 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. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses % Yes Yes Yes 6 Volunteer labor 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? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sch	edule G (Form 990) 2021 SEWISH FEDERATION OF GREATER SEATTLE 91-0	05/5950	J	Page 3
11	Does the organization conduct gaming activities with nonmembers?	7	Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🔲 🔻	Yes	☐ No
b	o 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			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	s the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	. 🔲 🕯	Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	ırt III, line	es 9, 9	∂b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

132083 10-21-21 Schedule G (Form 990) 2021

Schedule G	(Form 990) JEWISH FEDERATION OF GREATER SEATTLE	91-0575950	Page 4
Part IV	(Form 990) JEWISH FEDERATION OF GREATER SEATTLE  Supplemental Information (continued)		

#### SCHEDULE I (Form 990)

Department of the Treasury

# **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.

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

Internal Revenue Service Inspection ► Go to www.irs.gov/Form990 for the latest information. Name of the organization **Employer identification number** 91-0575950 JEWISH FEDERATION OF GREATER SEATTLE Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 1 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) AMERICA GIVES P.O. BOX 3263 26-3383926 501(C)(3) WASHINGTON, DC 20010 20,000. 0 OPERATIONS SUPPORT AMERICAN FRIENDS OF ITIM C/O KJ TECHNOLOGY, 247 WEST 36TH STREET, 5TH FLOOR - NEW YORK, NY 10018-7837 26-2249073 501(C)(3) 0 OPERATIONS SUPPORT 25,000 AMERICAN FRIENDS OF LEKET ISRAEL INC. - P.O. BOX 2090 - TEANECK, NJ 07666-1490 20-8202424 501(C)(3) 10,000 0 OPERATIONS SUPPORT AMERICAN ISRAEL EDUCATION FOUNDATION - 251 H ST NW -52-1623781 501(C)(3) OPERATIONS SUPPORT WASHINGTON DC 20001 58 840 0. AMERICAN JEWISH COMMITTEE MAIL CODE: 6760 P.O. BOX 7247 PHILADELPHIA, PA 19170-0001 13-5563393 501(C)(3) 5 690 OPERATIONS SUPPORT 0. AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE INC - 220 E 42ND ST, STE 400 - NEW YORK, NY 10017 13-1656634 501(C)(3) 134 084 0 OPERATIONS SUPPORT 71. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 0. Enter total number of other organizations listed in the line 1 table

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
AMERICAN RED CROSS								
PO BOX 37839								
BOONE, IA 50037-0839	53-0196605	501(C )(3)	6,500.	0.			OPERATIONS SUPPORT	
AMERICAN SOCIETY FOR TECHNION	00 0120000		,,,,,,,	•				
ISRAEL INSTITUTE OF TECHNOLOGY -								
55 EAST 59TH ST - NEW YORK, NY								
10022-1112	13-0434195	501(C )(3)	98,740.	0.			OPERATIONS SUPPORT	
ANTI-DEFAMATION LEAGUE								
605 THIRD AVENUE								
NEW YORK, NY 10158-3650	13-1818723	501(C )(3)	28,000.	0.			OPERATIONS SUPPORT	
NEW TORK, NI 10130-3030	13-1010723	501(0 /(3/	20,000.	0.			OFERRITONS SOFFORT	
BROTHERS FOR LIFE								
270 SOUTH HANFORD ST, #207								
SEATTLE, WA 98134	91-2105756	501(C )(3)	6,800.	0.			OPERATIONS SUPPORT	
			1,555					
CANCER LIFELINE OF KING COUNTY								
6522 FREMONT AVE N								
SEATTLE, WA 98103-5358	91-6182951	501(C )(3)	10,000.	0.			OPERATIONS SUPPORT	
CHABAD-LUBAVITCH OF GREATER								
SEATTLE - 3327 NE 125TH ST SUITE								
101 - SEATTLE, WA 98125-4587	23-7416988	501(C )(3)	22,000.	0.			OPERATIONS SUPPORT	
auti poem and morem tradital advend								
CHILDREN AND YOUTH JUSTICE CENTER								
300 ELLIOTT AVE W, SUITE 360	20 4457240	E01/G \/2\	6 000	_			DDDD A MITONIA GUIDDOD M	
SEATTLE, WA 98119	20-4457248	501(C )(3)	6,000.	0.			OPERATIONS SUPPORT	
COLLEGE SUCCESS FOUNDATION								
15500 SE 30TH PL SUITE 200								
BELLEVUE, WA 98007-6347	91-2036088	501(C )(3)	7,400.	0.			OPERATIONS SUPPORT	
DEBET 10E, NO 70001-0341	J1 2030008	201(0 )(3)	7,400.	0.			DITUNITORS BOLLOWI	
CONGREGATION BETH SHALOM								
6800 35TH AVE NE								
SEATTLE, WA 98115	91-0830546	501(C )(3)	16,700.	0.			OPERATIONS SUPPORT	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CONGREGATION BIKUR CHOLIM								
MACHZIKAY HADATH - 5145 S MORGAN								
ST - SEATTLE, WA 98118-2901	91-0570858	501(C )(3)	7,053.	0.			OPERATIONS SUPPORT	
CONGREGATION EZRA BESSAROTH								
5412 WILSON AVE S								
SEATTLE, WA 98118-2522	91-0246244	501(C )(3)	31,186.	0.			OPERATIONS SUPPORT	
DESERT CANCER FOUNDATION								
74091 LARREA STREET								
PALM DESERT, CA 92260-4466	33-0648823	501(C )(3)	8,766.	0.			OPERATIONS SUPPORT	
			, -					
DOCTORS WITHOUT BORDERS USA INC.								
P.O. BOX 5030								
HAGERSTOWN, MD 21741-5030	13-3433452	501(C )(3)	6,000.	0.			OPERATIONS SUPPORT	
DOWN SYNDROME COMMUNITY								
4746 11TH AVE NE, SUITE 102 SEATTLE, WA 98105	91-1565600	501(C )(3)	8,500.	0.			OPERATIONS SUPPORT	
SEATTLE, WA 90103	31-1303000	501(0 )(3)	8,300.	0.			OFERALIONS SOFFORT	
DREAMCOAT INITIATIVE								
23128 75TH AVE W								
EDMONDS, WA 98026-8517	85-2059022	501(C )(3)	7,000.	0.			OPERATIONS SUPPORT	
FARESTART								
700 VIRGINIA STREET SEATTLE, WA 98101-1216	91-1546757	501/C \/3\	5,500.	0.			OPERATIONS SUPPORT	
SEATTLE, WA 90101-1210	91-1540757	501(0 )(3)	3,300.	0.			OFERALIONS SUFFORI	
FRIENDS OF YAD SARAH								
445 PARK AVENUE, SUITE 1702								
NEW YORK, NY 10022	13-3106175	501(C )(3)	20,000.	0.			OPERATIONS SUPPORT	
GRAYS HARBOR YMCA								
2500 SIMPSON AVE	01 1004000	E01/G \/3\	10.000	_			ODEDA MIONG GUDDOD	
HOQUIAM, WA 98550-3937	91-1984900	bot(c )(3)	10,000.	0.			OPERATIONS SUPPORT	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
HEBREW FREE LOAN ASSOCIATION								
PO BOX 141								
MERCER ISLAND, WA 98040-0141	91-6035624	501(C )(3)	6,005.	0.			OPERATIONS SUPPORT	
HERZL-NER TAMID CONGREGATION								
3700 E MERCER WAY								
MERCER ISLAND, WA 98040-3804	91-0254210	501(C )(3)	59,488.	0.			OPERATIONS SUPPORT	
HIAS								
PO BOX 97077				_				
WASHINGTON, DC 20090-7077	13-5633307	501(C)(3)	9,645.	0.			OPERATIONS SUPPORT	
HILLEL FOUNDATION FOR JEWISH LIFE								
AT UW - 4745 17TH AVENUE NE -								
SEATTLE, WA 98105-4210	91-6067231	501(C )(3)	64,562.	0.			OPERATIONS SUPPORT	
	31 0007231	301(0 )(3)	01,302.	•			DILIMITIONS BOTTON	
HILLEL OF WESTERN WASHINGTON								
UNIVERSITY - PO BOX 29058 -								
BELLINGHAM, WA 98228	91-1985903	501(C)(3)	7,000.	0.			OPERATIONS SUPPORT	
,			,					
HILLEL: THE FOUNDATION FOR JEWISH								
CAMPUS LIFE - 800 EIGHTH STREET,								
NW - WASHINGTON, DC 20001	52-1844823	501(C )(3)	10,000.	0.			OPERATIONS SUPPORT	
HOLOCAUST CENTER FOR HUMANITY								
2045 2ND AVE				_				
SEATTLE, WA 98121-2205	91-1464233	501(C)(3)	62,470.	0.			OPERATIONS SUPPORT	
HUALALAI OHANA FOUNDATION								
PO BOX 5227								
KAILUA KONA, HI 96745	81-0570716	501(C )(3)	10,000.	0.			OPERATIONS SUPPORT	
	31 33/0/10		10,000.	0.			PILICITORS BOITORI	
INSTITUTE FOR JEWISH IDEAS AND								
IDEALS - 2 WEST 70TH ST - NEW								
YORK, NY 10023-4601	26-0633946	501(C )(3)	15,000.	0.			OPERATIONS SUPPORT	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
INTERNATIONAL RESCUE COMMITTEE,								
INC P.O. BOX 6068 - ALBERT LEA,								
MN 56007-9847	13-5660870	501(C )(3)	5,100.	0.			OPERATIONS SUPPORT	
ISLAMORADA COMMUNITY ENTERTAINMENT								
INC - 111 INDIAN MOUND TRAIL -								
TAVERNIER, FL 33070	59-3814758	501(C )(3)	13,000.	0.			OPERATIONS SUPPORT	
JEWCER COMMUNITY FUNDING								
4647 KINGSWELL AVE								
LOS ANGELES, CA 90027	47-4096632	501(C)(3)	10,000.	0.			OPERATIONS SUPPORT	
,			, ·					
JEWISH DAY SCHOOL OF METROPOLITAN								
SEATTLE - 15749 NE 4TH STREET -								
BELLEVUE, WA 98008-4317	91-1085790	501(C )(3)	66,310.	0.			OPERATIONS SUPPORT	
JEWISH FAMILY SERVICE								
1601 16TH AVE SEATTLE, WA 98122-4000	91-0565537	501/C \/3\	407,007.	0.			OPERATIONS SUPPORT	
SEATTLE, WA 90122-4000	91-0363337	501(C )(3)	407,007.	0.			OPERATIONS SUPPORT	
KIDS CO.								
2208 NW MARKET ST., #510								
SEATTLE, WA 98107-4098	91-1450148	501(C )(3)	10,000.	0.			OPERATIONS SUPPORT	
MAYDAY FOUNDATION								
3403 STEAMBOAT ISLAND RD NW #337								
OLYMPIA, WA 98502	82-3914026	501(C )(3)	18,097.	0.			OPERATIONS SUPPORT	
MENN GUEN MENDEL GENERAL GUENE								
MENACHEM MENDEL SEATTLE CHEDER								
8511 15TH AVE NE SEATTLE, WA 98115	91-1962749	501(C )(3)	15,640.	0.			OPERATIONS SUPPORT	
DESCRIPTION, NA POLITO	71 1902/49	201(0 )(3)	13,040.	0.			SITURITORD BOLLOKI	
MINYAN OHR CHADASH								
6721 51ST AVE S.								
SEATTLE, WA 98118	46-2975044	501(C )(3)	12,000.	0.			OPERATIONS SUPPORT	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
26-2599786	501(C )(3)	7,000.	0.			OPERATIONS SUPPORT		
34-1690546	501(C )(3)	10,000.	0.			OPERATIONS SUPPORT		
04.0607700	E01/G \/2\	6 150						
94-2607722	501(C )(3)	6,150.	0.			OPERATIONS SUPPORT		
91-1702331	501(C )(3)	6,800.	0.			OPERATIONS SUPPORT		
91-0826037	501(C )(3)	23,490.	0.			OPERATIONS SUPPORT		
91-1045815	501(C )(3)	59,315.	0.			OPERATIONS SUPPORT		
N 20 2020211	E01/C \/2\	47.000	0			ODED AUTONG GUDDODU		
30-3829311	DOT(C )(3)	47,080.	0.			OPERATIONS SUPPORT		
91-0791552	501(C )(3)	21,000.	0.			OPERATIONS SUPPORT		
13-1644147	501(C)(3)	5.113.	0.			OPERATIONS SUPPORT		
	(b) EIN  26-2599786  34-1690546  94-2607722  91-1702331  91-0826037  91-1045815	(c) IRC section if applicable  26-2599786 501(C)(3)  34-1690546 501(C)(3)  94-2607722 501(C)(3)  91-1702331 501(C)(3)  91-0826037 501(C)(3)	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (26-2599786 501(C)(3) 7,000.  34-1690546 501(C)(3) 10,000.  94-2607722 501(C)(3) 6,150.  91-1702331 501(C)(3) 6,800.  91-0826037 501(C)(3) 23,490.  91-1045815 501(C)(3) 59,315.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (e) Amount of cash grant (e) Amount of noncash assistance (e) Amount of noncash assistance (e) Amount of noncash assistance (e) Amount of cash grant (e) Amount of noncash assistance (e) Amount of noncash assistance (e) Amount of cash grant (e) Amount of noncash assistance (e) Amount of noncash assis	(b) EIN         (c) IRC section if applicable         (d) Amount of cash grant         (e) Amount of noncash assistance         (f) Method of valuation (book, FMV, appraisal, other)           26-2599786         501(C)(3)         7,000.         0.           34-1690546         501(C)(3)         10,000.         0.           91-1702331         501(C)(3)         6,800.         0.           91-0826037         501(C)(3)         23,490.         0.           91-1045815         501(C)(3)         59,315.         0.           8         38-3829311         501(C)(3)         47,080.         0.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (e)		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
SEATTLE HEBREW ACADEMY								
1617 INTERLAKEN DR. E.								
SEATTLE, WA 98112-3499	91-0581660	501(C)(3)	67,048.	0.			OPERATIONS SUPPORT	
SEATTLE JEWISH COMMUNITY SCHOOL								
7217 WOODLAWN AVE NE SEATTLE, WA 98115	91-1484966	501(C )(3)	20,950.	0.			OPERATIONS SUPPORT	
EMITTED, WIT SOLIS	31 1404300	501(0 /(5/	20,330.	· ·			DIEMITIONS SOTTON	
SEATTLE SEPHARDIC NETWORK								
1218 3RD AVE W								
SEATTLE, WA 98119	47-5384364	501(C )(3)	5,500.	0.			OPERATIONS SUPPORT	
SEATTLE THEATRE GROUP								
911 PINE ST								
SEATTLE, WA 98101	94-3130227	501(C)(3)	6,100.	0.			OPERATIONS SUPPORT	
SIERRA CLUB FOUNDATION								
2101 WEBSTER STREET SUITE 1250								
OAKLAND, CA 94612-3050	94-6069890	501(C )(3)	7,500.	0.			OPERATIONS SUPPORT	
CINDIND, CIT STOLE SOCI	31 0003030	501(6 )(5)	7,300.	•			or marriage barrant	
STANDWITHUS NORTHWEST								
1907 E. HIGHLAND DR. #7								
SEATTLE, WA 98112-3546	01-0566033	501(C )(3)	25,000.	0.			OPERATIONS SUPPORT	
STROUM JEWISH COMMUNITY CENTER								
3801 E MERCER WAY								
MERCER ISLAND, WA 98040-3805	90-0953408	501(C)(3)	77,057.	0.			OPERATIONS SUPPORT	
TEMPLE BETH HATFILOH								
201 8TH AVE SE								
OLYMPIA, WA 98501-1305	91-6032512	501(C )(3)	11,760.	0.			OPERATIONS SUPPORT	
	71 0032312	501(0 /(3/	11,700.	0.			SITURITOND BOLLOKI	
TEMPLE B'NAI TORAH								
15727 NE 4TH STREET								
BELLEVUE, WA 98008-4317	91-0848001	501(C)(3)	7,500.	0.			OPERATIONS SUPPORT	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TEMPLE DE HIRSCH SINAI									
1511 E PIKE ST									
SEATTLE, WA 98122-4127	91-0437430	501(C )(3)	34,956.	0.			OPERATIONS SUPPORT		
THE FRIENDSHIP CIRCLE OF	31 0437430	301(0 /(3/	34,550.	••			DIEMITOND BOTTON		
WASHINGTON - 2737 77TH AVE. SE									
SUITE 101 - MERCER ISLAND, WA									
98040-2831	91-2173196	501(C)(3)	21,500.	0.			OPERATIONS SUPPORT		
			,						
THE JEWISH FEDERATIONS OF NORTH									
AMERICA INC 25 BROADWAY, SUITE									
1700 - NEW YORK, NY 10004-1015	13-1624240	501(C )(3)	137,371.	0.			OPERATIONS SUPPORT		
THE KLINE GALLAND CENTER									
7500 SEWARD PARK AVE S									
SEATTLE, WA 98118-4247	91-1154904	501(C)(3)	67,795.	0.			OPERATIONS SUPPORT		
-1									
T'RUAH									
266 WEST 37TH STREET, SUITE 803	45 0464545	E01/G \/3\	10 000	0			ODERAMIONA GURDODA		
NEW YORK, NY 10018	45-0464545	501(C )(3)	10,000.	0.			OPERATIONS SUPPORT		
TRYBAL GATHERINGS									
1867 BEACON ST, APT 2									
BROOKLINE, MA 02445	82-2536308	501(C)(3)	7,500.	0.			OPERATIONS SUPPORT		
	02 200000	552(5 )(5)	,,,,,,,,	•					
UNITED WAY OF KING COUNTY									
720 SECOND AVENUE									
SEATTLE, WA 98104-1702	91-0565555	501(C)(3)	71,870.	0.			OPERATIONS SUPPORT		
UNIVERSITY OF WASHINGTON									
FOUNDATION - 4333 BROOKLYN AVE									
N.E. BOX 359505 - SEATTLE, WA									
98195-9505	94-3079432	501(C )(3)	42,215.	0.			OPERATIONS SUPPORT		
URJ CAMP KALSMAN									
11410 NE 124TH ST, #622									
KIRKLAND, WA 98034	13-1663143	501(C)(3)	7,500.	0.			OPERATIONS SUPPORT		

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	ı uğ
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASHINGTON STATE JEWISH HISTORICAL							
SOCIETY - 3801 E MERCER WAY -							
ERCER ISLAND, WA 98040	91-1099052	501(C )(3)	23,525.	0.			OPERATIONS SUPPORT
WOODSTOCK LAND CONSERVANCY INC							
PO BOX 864							
NOODSTOCK, NY 12498	22-2950482	501(C)(3)	10,000.	0.			OPERATIONS SUPPORT

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS FOR JEWISH EDUCATION, DOMESTIC CAMPS, PROFESSIONAL DEVELOPMENT AWARDS AND ISRAEL PROGRAMS.	305	341,581.	0.		
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	ne 2; Part III, column	(b); and any other ac	dditional information.	
JEWISH FEDERATION OF GREATER SEATTLE (JFGS) VERIFIE	ES THAT ALL C	ORGANIZATIONS			
APPLYING FOR GRANTS HAVE A CURRENT 501(C)(3) STATUS	S WITH THE IF	RS. IN			
CERTAIN CASES, JFGS REQUIRES PERIODIC REPORTING FRO	OM THE GRANTE	EE ON THE			
PROGRESS OF ESSENTIAL PROGRAMS AND PROJECTS.					
PART II:					
AMOUNTS INCLUDE GRANTS FROM DONOR ADVISED FUNDS, THE	HE FEDERATION	1's			
ENDOWMENT FUNDS AND THE COMMUNITY CAMPAIGN.					

### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

JEWISH FEDERATION OF GREATER SEATTLE

Employer identification number 91-0575950

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

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

Schedule J (Form 990) 2021

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base (ii) Bonus & (iii) Other compensation incentive reportable compensation compensatior		(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) NANCY GREER	(i)	242,201.	5,000.	2,668.	10,928.	30,480.	291,277.	0,
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0,	0,
(2) SAMUEL KLEIN	(i)	111,396.	1,000.	0.	3,781.	50,564.	166,741.	0.
DIRECTOR OF JEWISH ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.
PART I, LINE 1A:
RABBI SAMUEL KLEIN RECEIVES A PARSONAGE ALLOWANCE THAT IS TREATED AS
NON-TAXABLE COMPENSATION.
PART I, LINE 7:
THE BOARD AWARDED THE PRESIDENT AND CEO A DISCRETIONARY BONUS BASED ON HER
CONTRACT AND OUTSTANDING PERFORMANCE. THE PRESIDENT AND CEO AWARDED ALL
EMPLOYEES A DISCRETIONARY \$1,000 BONUS WITH THE BOARD CHAIR APPROVAL.

### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Employer identification number JEWISH FEDERATION OF GREATER SEATTLE 91-0575950

Fai		Types	of Property								
				(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribu amounts reported Form 990, Part VIII, I	l on	(d) Method of de noncash contribu		_	3
1	Art -	Works of	art								
2			treasures								
			interests								
4			plications								
5			ousehold goods								
6			vehicles								
7			nes								
8			perty								
9			olicly traded	Х	31	575	267.	NET PROCEEDS			
10			sely held stock				,				
11			tnership, LLC, or								
••											
12			scellaneous								
13			ervation contribution -								
13		oric structu									
14			ervation contribution - Other								
15											
16			esidential ommercial								
17			ther								
18											
19			· · · · · · · · · · · · · · · · · · ·								
20			dical supplies								
21			and a dephilos								
22			cts								
23			imens								
24			artifacts								
25		er 🕨 (	)								
26		er 🕨 (	)								
20 27		er 🕨 (	)								
21 28		er 🕨 (	,								
<u>29</u>			ms 8283 received by the organiz	ration during	the tax vear for co	ontributions					
			rganization completed Form 828	-	•		29			0	
			. gaa	20, 1 4.1 1, 2						Yes	No
30a	Durir	ng the vea	r, did the organization receive by	/ contributio	n any property rep	orted in Part I. lines 1	throug	h 28. that it			-110
		•	at least three years from the date			•	•	·			
			ses for the entire holding period?						30a		Х
b			be the arrangement in Part II.								
31		,	nization have a gift acceptance p	olicy that re	quires the review o	of any nonstandard co	ontribut	ions?	31	х	
		-	nization hire or use third parties of	•	•	•					
		ributions?	•	,	9	, ,			32a		Х
b			be in Part II.								
33		•	ion didn't report an amount in co	olumn (c) for	a type of property	for which column (a)	is chec	ked,			
		ribe in Par	•					·			

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

Schedule M (Form 990) 2021

### SCHEDULE O (Form 990)

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

JEWISH FEDERATION OF GREATER SEATTLE

Employer identification number 91-0575950

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: STRENGTHENING CONNECTIONS TO ISRAEL AND WORLD JEWRY. AND MAKING INVESTMENTS IN JEWISH LIFE, FOR TODAY AND THE NEXT GENERATION. FORM 990, PART I, LINE 6: VOLUNTEERS SERVED ON THE BOARD OF DIRECTORS, VARIOUS COMMITTEES AND ASSISTED WITH PROGRAMS AND FUNDRAISING. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: CONCERNS IN THE PUBLIC ARENA. THE FEDERATION SERVES AS THE HUB OF SAFE WASHINGTON, A PROGRAM THAT LEVERAGES ITS STRONG RELATIONSHIPS WITH LAW ENFORCEMENT AGENCIES TO ALERT THE PARTICIPATING ORGANIZATIONS TO THREATS AND OFFER PREPAREDNESS RESOURCES AND TRAINING. FREE OF CHARGE. THE JEWISH COMMUNITY FOUNDATION OF GREATER SEATTLE (THE FOUNDATION). A PROGRAM OF THE FEDERATION IS SEATTLE'S JEWISH COMMUNITY FOUNDATION. AS A PARTNER TO PHILANTHROPISTS AND JEWISH COMMUNAL ORGANIZATIONS. THE FOUNDATION OFFERS SEVERAL DIFFERENT TYPES OF FUNDS, INCLUDING DONOR ADVISED, SPECIAL PURPOSE, AGENCY CUSTODIAL, AND SCHOLARSHIP FUNDS. THE FOUNDATION CURRENTLY ADMINISTERS SEPARATE FUNDS FOR THE COMMUNITY AND THE FEDERATION. THESE FUNDS SUPPORT JEWISH AND SECULAR ORGANIZATIONS DISTRIBUTING GRANTS AND ALLOCATIONS IN THE PUGET SOUND REGION, THE U.S., AND OVERSEAS. ANOTHER FEDERATION INITIATIVE, LIFE & LEGACY, IS A PARTNERSHIP WITH THE HAROLD GRINSPOON FOUNDATION THROUGH WHICH THE FEDERATION SUPPORTS JEWISH ORGANIZATIONS AS THEY IMPLEMENT THEIR LEGACY SUSTAINABILITY PLANS AND MORE FULLY INTEGRATE AFTER-LIFETIME GIVING INTO THEIR PHILANTHROPIC CULTURES. THE FEDERATION ALSO PROVIDES GRANTS

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

Name of the organization  JEWISH FEDERATION OF GREATER SEATTLE	Employer identification number 91-0575950
TO LOCAL ORGANIZATIONS AND SYNAGOGUES THROUGH ITS SPECIAL INITIATIVES	
FUND. GRANTS INCLUDE 1) IGNITION GRANTS FOR NEW, ONE TIME, OR PILOT	
PROJECTS; 2) SMALL AGENCY SUSTAINABILITY GRANTS, PROVIDING OPERATIONAL	
SUPPORT FOR SMALL JEWISH AGENCIES; AND 3) WOMEN'S ENDOWMENT FUND	
GRANTS, SUPPORTING PROGRAMS EMPOWERING AND IMPROVING THE LIVES OF WOMEN	
AND GIRLS IN OUR REGION.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:	
- RESET AND REFRESH, A FEDERATION-DEVELOPED PROGRAM OFFERING YOUNG	
COUPLES IN MIXED-HERITAGE RELATIONSHIPS THE OPPORTUNITY TO LEARN WITH	
AND SOCIALIZE WITH THEIR PEERS.	
- NEED-BASED SCHOLARSHIPS AND ONE HAPPY CAMPER INCENTIVE GRANTS TO AID	
FAMILIES IN SENDING THEIR CHILDREN TO JEWISH OVERNIGHT SUMMER CAMP.	
- TUITION ASSISTANCE TO FAMILIES WHO WANT TO SEND THEIR CHILDREN TO	
JEWISH DAY SCHOOL.	
- THE CARDOZO SOCIETY, AN AFFINITY GROUP FOR LEGAL PROFESSIONALS AND	
STUDENTS. CARDOZO PROGRAMS INCLUDE CONTINUING EDUCATION COURSES, PRO	
BONO INITIATIVES, JUDICIAL CANDIDATE RATINGS, AND NETWORKING	
OPPORTUNITIES.	
- LEADERSHIP DEVELOPMENT OPPORTUNITIES IN JEWISH PUGET SOUND THROUGH	
THE NATIONAL YOUNG LEADERSHIP CABINET (NYLC), THE WEXNER HERITAGE	
PROGRAM, THE SEATTLE NOWGEN GIVING CIRCLE, THE COURAGEOUS LEADERSHIP	
INITIATIVE (CLI), AND THE NEWLY CREATED COURAGEOUS LEADERSHIP INCUBATOR	
(INCUBATOR). INCUBATOR IS A SHARED LEARNING AND MENTORING PROGRAM IN	
WHICH A COHORT OF UP-AND-COMING LEADERS DEEPEN THEIR UNDERSTANDING OF	
OPPORTUNITIES AND CHALLENGES FACING JEWISH LIFE. AS PART OF THE	
EXPERIENCE, INCUBATOR PARTICIPANTS SERVE AS NON-VOTING MEMBERS ON	
BOARDS OF LOCAL JEWISH ORGANIZATIONS. THE FEDERATION BROUGHT THE CLI	

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

**Employer identification number** Name of the organization 91-0575950 JEWISH FEDERATION OF GREATER SEATTLE AND INCUBATOR PROGRAMS TO OUR COMMUNITY IN PARTNERSHIP WITH THE SHALOM HARTMAN INSTITUTE OF NORTH AMERICA. FORM 990, PART VI, SECTION A, LINE 2: JONATHAN DUNN AND MARLA DUNN HAVE A FAMILY RELATIONSHIP. FORM 990, PART VI, SECTION A, LINE 6: A MEMBER SHALL BE ANY JEW OR ANYONE ASSOCIATED WITH THE JEWISH COMMUNITY AND WHO MAKES A GIFT TO THE JEWISH FEDERATION OF GREATER SEATTLE. PERSON SHALL BE A MEMBER FROM THE DATE THE PLEDGE IS ACCEPTED AND THROUGHOUT THE CALENDAR YEAR SUCCEEDING THE CAMPAIGN YEAR FOR WHICH THE PLEDGE IS MADE. MEMBERS VOTE ANNUALLY AT THE ANNUAL MEMBERSHIP MEETING TO ELECT OFFICERS AND THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS VOTE ANNUALLY AT THE ANNUAL MEMBERSHIP MEETING TO ELECT OFFICERS AND THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7B: MEMBERS VOTE ANNUALLY AT THE ANNUAL MEMBERSHIP MEETING TO ELECT OFFICERS AND THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE OF THE BOARD HAS THE ABILITY TO EXERCISE ALL THE POWERS AND AUTHORITIES OF THE BOARD OF DIRECTORS IN EMERGENCIES OR WHEN THE CHAIR OF THE BOARD DEEMS IT IMPRACTICAL TO CALL A SPECIAL MEETING OF THE BOARD OF DIRECTORS. EXECUTIVE COMMITTEE ALSO HANDLES ANY MATTERS DEEMED HIGHLY SENSITIVE OR THOSE REQUIRING A HIGH DEGREE OF CONFIDENTIALITY.

Schedule O (Form 990) 2021 Page 2

Name of the organization **Employer identification number** 91-0575950 JEWISH FEDERATION OF GREATER SEATTLE A DRAFT OF THE FORM 990 IS PRESENTED TO, AND REVIEWED BY, THE AUDIT COMMITTEE AND THE FISCAL MANAGEMENT COMMITTEE OF THE BOARD. THE FORM 990 IS THEN FINALIZED AND A COPY WITH SCHEDULE B REDACTED IS PROVIDED TO THE ENTIRE BOARD PRIOR TO FILING WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS AND EXECUTIVE STAFF ARE ASKED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY AND THEY ARE REVIEWED BY THE OFFICE OF THE CEO. CIRCUMSTANCES THAT COULD LEAD TO OR PRESENT A POTENTIAL CONFLICT OF INTEREST ARE BROUGHT TO THE AUDIT COMMITTEE AND THEN TO THE BOARD OF DIRECTORS AS ARE ANY ACTUAL CONFLICTS OF INTEREST. ANY POTENTIAL CONFLICT WOULD BE ADDRESSED BY THE BOARD OF DIRECTORS. IF A CONFLICT DOES EXIST, BOARD MEMBERS ARE ASKED TO RECUSE THEMSELVES FROM THE ROOM AND NOT VOTE ON THE MATTER IN QUESTION. THE BOARD PERIODICALLY RECEIVES TRAINING IN THE AREA OF NON-PROFIT GOVERNANCE. FORM 990, PART VI, SECTION B, LINE 15: THE PERSONNEL COMMITTEE OF THE BOARD REVIEWS AND APPROVES THE CEO COMPENSATION CONTRACT TO ENSURE REASONABLENESS BY COMPARING DATA FROM SIMILAR POSITIONS LOCALLY AND WITHIN THE FEDERATION SYSTEM. THE CEO CONTRACT WAS APPROVED IN 2022 FOR A TWO-YEAR TERM (JULY 1, 2022 - JUNE 30, 2024). FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

#### **SCHEDULE R** (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

JEWISH FEDERATION OF		91-0575950				
Part I Identification of Disregarded Entities. Comple	te if the organization answered "Yes" o	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	<b>(f)</b> Direct controlling entity	
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization ar	nswered "Yes" on Form 990, Pa	rt IV, line 34, becaus	se it had one or more	related tax-exempt	

(a)  Name, address, and EIN  of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	<b>(f)</b> Direct controlling entity	Section 5 contr ent	
				501(c)(3))		Yes	No
DAVID & CATHY HABIB FOUNDATION - 91-2091080	MAKING GRANTS TO				JEWISH FEDERATION		
300 LENORA STREET, PMB 6074	CHARITABLE, RELIGIOUS AND				OF GREATER		
SEATTLE, WA 98121	EDUCATIONAL ORGANIZATIONS.	WASHINGTON	501(C)(3)	11A	SEATTLE	Х	<u> </u>
SAMUEL ISRAEL FOUNDATION - 86-1064950	MAKING GRANTS TO				JEWISH FEDERATION		1
300 LENORA STREET, PMB 6074	CHARITABLE, RELIGIOUS AND				OF GREATER		1
SEATTLE, WA 98121	EDUCATIONAL ORGANIZATIONS.	WASHINGTON	501(C)(3)	11A	SEATTLE	Х	1
JEWISH DAY SCHOOL SUPPORTING FOUNDATION -	PROVIDE FUNDING FOR				JEWISH FEDERATION		 
91-1932440, 300 LENORA STREET, PMB 6074,	MAINTENANCE FOR THE JEWISH				OF GREATER		1
SEATTLE, WA 98121	DAY SCHOOL FACILITY.	WASHINGTON	501(C)(3)	11B	SEATTLE		Х
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

(a) Name, address, and EIN of related organization			(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) (g) Share of total income Share of end-of-year assets		(h) Disproportionate allocations?		(i)  Code V-UBI amount in box 20 of Schedule	(j) General managir partner	(k) Percentage ownership	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

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)	(a) (b)		(c) (d)		(f)	(g)	(h)	(	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	ip controlled entity?	
		country)		ŕ				Yes	No
	_								
CHARITABLE REMAINDER ANNUITY TRUST (1)	INVESTMENT	WA	N/A		N/A	N/A	N/A		х
CHARITABLE REMAINDER UNITRUST (1)	INVESTMENT	WA	N/A		N/A	N/A	N/A		х
	_								
	-								
	-								
	]								

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**b** Gift, grant, or capital contribution to related organization(s)

Х

Yes No

1a

Part V	Transactions With Related Organizations.	Complete if the organization answered	"Yes" on Form 990, Part IV, line 34, 35b, or 36.
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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?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

c (	Gift grant or capital contribution from related organization(s)				1c	Х			
d I	Gift, grant, or capital contribution from related organization(s)  Loans or loan guarantees to or for related organization(s)								
	Loans or loan guarantees by related organization(s)								
-	in the state of th				1e				
f [	Dividends from related organization(s)				1f		Х		
	f Dividends from related organization(s) g Sale of assets to related organization(s)								
h F	h Purchase of assets from related organization(s)								
i E	i Exchange of assets with related organization(s)								
j Lease of facilities, equipment, or other assets to related organization(s)									
-	•								
k L	ease of facilities, equipment, or other assets from related organization(s)				1k		Х		
	I Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
					10		Х		
рF	p Reimbursement paid to related organization(s) for expenses								
q Reimbursement paid by related organization(s) for expenses							Х		
r (	Other transfer of cash or property to related organization(s)				1r		Х		
s (	s Other transfer of cash or property from related organization(s)								
<b>2</b> I	the answer to any of the above is "Yes," see the instructions for information on whether the second section is the second second section of the second secon	ho must complete th	is line, including covered rela	tionships and transaction thresholds.					
	(a)	(b)	(c)	(d)					
	Name of related organization Transaction Amount involved Method of determining amount								
		type (a-s)							
(1)									
(2)									
<b></b>									
(3)									
7.4\									
(4)									
(E)									
(5)									
(e)									
<b>(6)</b> 132163 1	14 17 04	I		Schedule	D (Eor	n 000\	2021		
132 103	H-1/-21			Scriedule	וז (ו־טוו	11 990)	2021		

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat allocatio	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) Percentage ownership