** PUBLIC DISCLOSURE COPY **

(Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

Open to Public Inspection

OMB No. 1545-0047

| Α | For the | e 2019 calendar year, or tax year beginning JUI | L 1, 2019 and | ending J | UN 30, 2020 | | | | | | | | |
|--------------------------------|-----------------------|---|--|---------------------------------|--------------------|-------------|-----------------------------|--|--|--|--|--|--|
| В | Check if applicabl | C Name of organization JEWISH FEDERATION OF GREATER | | | D Employer | identific | cation number | | | | | | |
| | Addre | ATLANTA, INC. | | | | | | | | | | | |
| | Name chang | | | | 58-1021791 | | | | | | | | |
| | Initial return | | and street (or P.O. box if mail is not delivered to street address) Room/suite | | | | | | | | | | |
| | Final return | 1440 CDDING CODEED NW | E Telephone 404-873 | | | | | | | | | | |
| | termin ated | | G Gross receipts | \$ | 62,584,960. | | | | | | | | |
| | Amend | | | | H(a) Is this a | | | | | | | | |
| | Applic | F Name and address of principal officer: ERIC 1 | M ROBBINS | | for subor | | | | | | | | |
| | pendir | SAME AS C ABOVE | | | | | cluded? Yes No | | | | | | |
| T : | Tax-exe | empt status: X 501(c)(3) 501(c) () | ■ (insert no.) 4947(a)(1) | or 527 | 1 ' ' | | list. (see instructions) | | | | | | |
| | | te: > JEWISHATLANTA.ORG | (/ / (/ / / | | H(c) Group ex | | | | | | | | |
| | | | ociation Other | L Year | of formation: 19 | | State of legal domicile: GA | | | | | | |
| | | Summary | | | | | <u> </u> | | | | | | |
| _ | 1 | Briefly describe the organization's mission or most s | significant activities: THE JE | WISH FEDE | RATION OF G | REATER | | | | | | | |
| Governance | | ATLANTA CARES FOR, CONNECTS AND STRENG | | | | | | | | | | | |
| rna | 2 | Check this box 🕨 🔲 if the organization discon | tinued its operations or dispo | sed of more | than 25% of it | s net as | sets. | | | | | | |
| ove. | 1 | Number of voting members of the governing body (I | · | | | 1 1 | 29 | | | | | | |
| Ğ | | Number of independent voting members of the gov | | | | | 29 | | | | | | |
| S S | | Total number of individuals employed in calendar ye | | | | | 93 | | | | | | |
| ij | | | otal number of volunteers (estimate if necessary) | | | | | | | | | | |
| Activities & | | Total unrelated business revenue from Part VIII, colo | | | | | 43,829. | | | | | | |
| ⋖ | | Net unrelated business taxable income from Form 9 | | | | | 0. | | | | | | |
| | | | <u> </u> | Current Year | | | | | | | | | |
| Φ | 8 | Contributions and grants (Part VIII, line 1h) | 46,137 | 7,845. | 44,478,120. | | | | | | | | |
| Revenue | | . (5 .) (11) | | | 92 | 2,875. | 69,103. | | | | | | |
| eve | | | nvestment income (Part VIII, column (A), lines 3, 4, and 7d) | | | | | | | | | | |
| Œ | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, | | | 444 | 1,174. | 484,087. | | | | | | |
| | 1 | Total revenue - add lines 8 through 11 (must equal F | | 49,848 | 3,636. | 46,977,032. | | | | | | | |
| | | Grants and similar amounts paid (Part IX, column (A | | | 148,509 | 9,405. | 33,708,623. | | | | | | |
| | | Benefits paid to or for members (Part IX, column (A) | | 0. | 0. | | | | | | | | |
| S | 1 | Salaries, other compensation, employee benefits (P | | | 5,147 | 7,282. | 6,082,438. | | | | | | |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), lir | | | 11 | L,648. | 0. | | | | | | |
| xbe | b | Total fundraising expenses (Part IX, column (D), line | | | | | | | | | | | |
| Ш | 17 | Other expenses (Part IX, column (A), lines 11a-11d, | 11f-24e) | | 6,015 | 5,310. | 4,093,777. | | | | | | |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX | (, column (A), line 25) | | 159,683 | 3,645. | 43,884,838. | | | | | | |
| | 19 | Revenue less expenses. Subtract line 18 from line 1 | | | -109,835 | 5,009. | 3,092,194. | | | | | | |
| or Ses | | | | Ве | ginning of Curre | nt Year | End of Year | | | | | | |
| sets | 20 | Total assets (Part X, line 16) | | | 330,177,839. | | 335,156,066. | | | | | | |
| t As | 21 | Total liabilities (Part X, line 26) | | | 69,548 | 3,999. | 72,040,600. | | | | | | |
| Net Assets or Fund Balances | 22 | Net assets or fund balances. Subtract line 21 from I | line 20 | | 260,628 | 3,840. | 263,115,466. | | | | | | |
| | art II | Signature Block | | | | | | | | | | | |
| Und | ler pena | lties of perjury, I declare that I have examined this return, i | ncluding accompanying schedule | s and statem | ents, and to the b | est of my | knowledge and belief, it is | | | | | | |
| true | , correc | t, and complete. Declaration of preparer (other than officer |) is based on all information of w | hich preparer | has any knowled | ge. | | | | | | | |
| | | | | | | | | | | | | | |
| Sig | n | Signature of officer | | | Date | | | | | | | | |
| He | re | MARCIE BESKIND, CFO/CAO | | | | | | | | | | | |
| | | Type or print name and title | | | | | | | | | | | |
| | | | Preparer's signature | | | Check | PTIN | | | | | | |
| Pai | | CARLYE W. DOOLEY | 0 | 6/28/21 self-employed P00182765 | | | | | | | | | |
| | parer | Firm's name WINDHAM BRANNON P.C. | | | Firm's | EIN ▶ 5 | 58-1763439 | | | | | | |
| Use | Only | Firm's address > 3630 PEACHTREE ROAD, N.E. | , STE. 600 | | | | | | | | | | |
| | | ATLANTA, GA 30326 | | | Phone | no.404- | -898-2000 | | | | | | |
| Ma | v the IF | RS discuss this return with the preparer shown above | /e? (see instructions) | | | | X Yes No | | | | | | |

| Pa | rt 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 JEWISH FEDERATION OF GREATER ATLANTA CARES FOR, CONNECTS AND |
| | STRENGTHENS OUR JEWISH COMMUNITY THROUGHOUT GREATER ATLANTA, ISRAEL |
| | AND THE WORLD. |
| | |
| 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? Yes X No |
| | If "Yes," describe these changes on Schedule O. |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and |
| | revenue, if any, for each program service reported. |
| 4a | (Code:) (Expenses \$19,843,142. including grants of \$17,620,910.) (Revenue \$ |
| | ENSURING A JEWISH FUTURE: |
| | JEWISH FEDERATION OF GREATER ATLANTA ENSURES A STRONG JEWISH FUTURE BY |
| | HELPING TO INSTILL JEWISH PEOPLE WITH A KNOWLEDGE OF AND PASSION FOR |
| | OUR HERITAGE AND THE JEWISH PEOPLE. WE DO THIS THROUGH A MYRIAD OF |
| | PROGRAMS AND AVENUES INCLUDING: |
| | -PROVIDING JEWISH EDUCATIONAL EXPERIENCES FOR OUR YOUTH, AS WELL AS |
| | ADULTS CONTROL OF THE PROPERTY |
| | -IMMERSIVE EXPERIENCES LIKE JEWISH OVERNIGHT SUMMER CAMP AND PEER |
| | TRIPS TO ISRAEL |
| | -SUPPORTING JEWISH LIFE ON GEORGIA COLLEGE CAMPUSES |
| | -EMBRACING INTERFAITH FAMILIES |
| 41- | -FOSTERING NEW GATEWAYS FOR INVOLVEMENT IN JEWISH LIFE (Code:)(Expenses \$ 11,708,119. including grants of \$ 11,664,560.) (Revenue \$ 69,103.) |
| 4b | (Code:) (Expenses \$ |
| | JEWISH FEDERATION OF GREATER ATLANTA CARES FOR JEWS IN NEED IN ORDER TO |
| | CREATE A SAFETY NET FOR THE MORE THAN 120,000 JEWS IN ATLANTA, AS WELL |
| | AS JEWS WORLDWIDE. WE DO THIS THROUGH A MYRIAD OF PROGRAMS AND AVENUES |
| | INCLUDING: |
| | -ASSISTING SENIORS THROUGH SERVICES LIKE ADULT DAY CARE, |
| | TRANSPORTATION, AFFORDABLE HOUSING, CASE MANAGEMENT, COUNSELING AND |
| | WELLNESS PROGRAMS |
| | -AFTER-SCHOOL PROGRAMS FOR AT-RISK YOUTH |
| | -JOB TRAINING AND COUNSELING FOR FAMILIES IN DISTRESS |
| | -FEEDING THE HUNGRY |
| | -SUPPORTING CAREGIVERS AS THEY CARE FOR A LOVED ONE |
| 4c | (Code:) (Expenses \$7,550,661. including grants of \$207,180.) (Revenue \$ |
| | STRENGTHENING JEWISH COMMUNITY: |
| | JEWISH FEDERATION OF GREATER ATLANTA IS ULTIMATELY FOCUSED ON ONE THING |
| | - STRENGTHENING THE JEWISH COMMUNITY THAT TIES US ALL TOGETHER AND IS |
| | THERE FOR ALL OF US IN A WAY THAT NO SINGLE ORGANIZATION OR INSTITUTION |
| | CAN. WE DO THIS THROUGH A MYRIAD OF PROGRAMS AND AVENUES, INCLUDING: |
| | -IDENTIFYING UNMET AND UNDERSERVED NEEDS WITHIN THE JEWISH COMMUNITY |
| | -WORKING COLLABORATIVELY TO CREATE SOLUTIONS FOR CHALLENGES OUR |
| | COMMUNITY FACES |
| | -TRAINING VOLUNTEER AND PROFESSIONAL LEADERS |
| | -ENCOURAGING JEWISH SOCIAL INNOVATION |
| | -PROVIDING COMMUNITY-WIDE SUPPORT SERVICES IN AN EFFICIENT, |
| | COST-EFFICIENT MANNER |
| 4d | Other program services (Describe on Schedule O.) |
| | (Expenses \$ 154,101. including grants of \$ 4,215,973.) (Revenue \$ 254,252.) Total program service expenses ▶ 39,256,023. |
| <u>4e</u> | |
| | Form 990 (2019 |

Part IV Checklist of Required Schedules

| | | | Yes | No |
|-------------|---|-----|-----|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 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 Revenue Procedure 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 | | x |
| 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 | <u> </u> |
| 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 | | x |
| С | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | Х |
| d | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | x |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | | х |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Х | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 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 |
| 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 | | | v |
| 16 | foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | 15 | | Х |
| 16 | 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 | 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 | | x |
| 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 |
| 20 a | 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 | |

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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 | | 163 | INO | | | | | |
| | 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? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 24b | | | | | | | |
| C | any tax-exempt bonds? | 24c | | | | | | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | | | | | | |
| | 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 | 00 | | x | | | | | |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, | 26 | | | | | | | |
| 21 | 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 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 | | | | | | | | |
| | "Yes," complete Schedule L, Part IV | | | | | | | | |
| | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | | | | | | | | |
| C | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV | 28c | | x | | | | | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | Х | | | | | | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | | | | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | Х | | | | | |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | Х | | | | | |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | | | | | | |
| | Schedule N, Part II | 32 | | Х | | | | | |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | х | | | | | |
| 34 | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | 33 | | | | | | | |
| J-T | 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 | | | | | | | |
| 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 | | | | | | | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | | | | | | |
| 38 | and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> B Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | | | | | | | |
| 30 | | 38 | х | | | | | | |
| Pai | | <u>,</u> | | | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | <u></u> | | | | | | | |
| | | | Yes | No | | | | | |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | | | | | | | |
| b | | | | | | | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 4- | v | | | | | | |
| | DISTRIBUTION WILLIAMS TO DITZE WILLIEUS (| | ι Δ | | | | | | |

58 - 1021791

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

| | | | Yes | No | | | | | | |
|------------|---|-----|-----|----|--|--|--|--|--|--|
| 2 a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | | | | | | |
| | filed for the calendar year ending with or within the year covered by this return | | | | | | | | | |
| 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) | | | | | | | | | |
| 3 a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | Х | | | | | | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | | | | | | | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | | | | | | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | Х | | | | | | |
| b | If "Yes," enter the name of the foreign country | | | | | | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X | | | | | | |
| b | 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 | | | | | | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | 60 | | х | | | | | | |
| h | any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | 6a | | | | | | | | |
| D | | 6b | | | | | | | | |
| 7 | were not tax deductible? Organizations that may receive deductible contributions under section 170(c). | OD | | | | | | | | |
| ' a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | х | | | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | | | | | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | | | | | | | |
| | to file Form 8282? | 7c | | х | | | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | | | | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | х | | | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | Х | | | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | | | | | | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | | | | | | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | | | | | | | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | Х | | | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | X | | | | | | |
| 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: | | | | | | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | | | | | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a | | | | | | | | | |
| a h | Gross income from other sources (Do not net amounts due or paid to other sources against | | | | | | | | | |
| | amounts due or received from them.) | | | | | | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | | | | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | | | | | | | |
| | Note: See the instructions for additional information the organization must report on Schedule O. | | | | | | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | | | | | | |
| | organization is licensed to issue qualified health plans | | | | | | | | | |
| | Enter the amount of reserves on hand | | | | | | | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Х | | | | | | |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | 14b | | | | | | | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | | | | | | | |
| | excess parachute payment(s) during the year? | 15 | | Х | | | | | | |
| | If "Yes," see 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. | | 200 | | | | | | | |

Form 990 (2019) ATLANTA, INC.

58-1021791

Page **6**

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

| | to line da, db, dr. rob below, describe the circumstances, processes, dr. changes dr. schedule d. dee instructions. | | | |
|----------|--|---------|---------|---------|
| | Check if Schedule O contains a response or note to any line in this Part VI | <u></u> | | Х |
| 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 29 | | | |
| 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 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | Х |
| 6 | Did the organization have members or stockholders? | 6 | Х | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | |
| | more members of the governing body? | 7a | Х | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | |
| | persons other than the governing body? | 7b | | Х |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | Х | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Х | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | 37 |
| 800 | 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.) | | V | NI. |
| 40- | Did the expenientian have level shorters broughed by offiliates? | 100 | Yes | No x |
| | Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | 10a | | |
| D | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 110 | 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 in Schedule O the process, if any, used by the organization to review this Form 990. | Ha | | |
| ` | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | х | |
| 12a b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Х | |
| | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | 120 | | |
| · | in 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 | |
| | Other officers or key employees of the organization | 15b | | Х |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | |
| | taxable entity during the year? | 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 ▶GA | | | |
| 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 |) avail | able |
| | 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, an | d finar | ncial | |
| | 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 > | | | |
| | MARCIE BESKIND - 404-873-1661 | | | |
| | 1440 SPRING STREET NW ATLANTA GA 30309-2837 | | | |

Form 990 (2019) ATLANTA, INC. 58-1021791 Page **7**

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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- 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 instructions for the order in which to list the persons above.

| (A) | (B) | | | ((| C) | | | (D) | (E) | (F) |
|-----------------------------------|-------------------|--------------------------------|-----------------------------------|----------|--------------|---------------------------------|--------|----------------------|------------------------------|------------------------|
| Name and title | Average | (do no | | | more | than | | Reportable | Reportable | Estimated |
| | hours per week | | box, unless pe officer and a c | | | | | compensation from | compensation from related | amount of other |
| | (list any | cto | | | | | | the | organizations | compensation |
| | hours for | or dire | | | | ted | | organization | (W-2/1099-MISC) | from the |
| | related | stee | iruste | | a | pensa | | (W-2/1099-MISC) | | organization |
| | organizations | nal tru | ional | | ploye | r com | | | | and related |
| | below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | organizations |
| (1) ABES, LAUREN | 1.00 | | = | 0 | | Ξ 0 | - | | | |
| TRUSTEE AT LARGE | | x | | | | | | 0. | 0. | 0. |
| (2) AROGETI, BETH | 4.00 | | | | | | | | | |
| CAMPAIGN CHAIR (SELECT COMMITTEE) | | х | | | | | | 0. | 0. | 0. |
| (3) BERMAN, JUSTIN | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | х | | | | | | 0. | 0. | 0. |
| (4) BRONFMAN, MATT | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | х | | | | | | 0. | 0. | 0. |
| (5) BROWN, BETH | 4.00 | | | | | | | | | |
| CHAIR, GOVERNANCE | 0.90 | х | | | | | | 0. | 0. | 0. |
| (6) EFFRON, JON | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | Х | | | | | | 0. | 0. | 0. |
| (7) FISHER, DAVID | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | Х | | | | | | 0. | 0. | 0. |
| (8) GALANTI RABINOWITZ, LISA | 4.00 | | | | | | | | | |
| CHAIR, STRATEGIC PLANNING | | Х | | | | | | 0. | 0. | 0. |
| (9) GLAZER, HILLEL | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | Х | | | | | | 0. | 0. | 0. |
| (10) GRIEN, LAUREN | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | Х | | | | | | 0. | 0. | 0. |
| (11) KAGAN SCHWARZ, LORI | 4.00 | | | | | | | | | _ |
| VICE CHAIR | | Х | | | | | | 0. | 0. | 0. |
| (12) KASTIN, AVERY | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | Х | | | | | | 0. | 0. | 0. |
| (13) KATZ, HOWARD | 4.00 | ١ | | | | | | | | • |
| AJF CHAIR | 1 00 | х | | | | | | 0. | 0. | 0. |
| (14) KOPKIN, MARK | 1.00 | ١., | | | | | | | 0 | |
| TRUSTEE AT LARGE | 1 00 | Х | | | | | | 0. | 0. | 0. |
| (15) KUNIANSKY, DEBBIE | 1.00 | x | | | | | | | 0 | _ |
| TRUSTEE AT LARGE (16) LEVEN, ROB | 4 00 | | | | | | | 0. | 0. | 0. |
| (16) LEVEN, ROB SECRETARY | 4.00 | x | | | | | | 0. | 0. | _ |
| (17) LEVINSON, DEBBIE | 4.00 | _ | | \vdash | | | | 0. | 0. | 0. |
| WP PRESIDENT (SELECT COMMITTEE) | 4.00 | x | | | | | | 0. | 0. | 0. |
| 932007 01-20-20 | 1 | | | | | | | 1 0. | · · | Form 990 (2019) |

Form **990** (2019)

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| 101111 990 (2019) | | | | | | | | | | i age 🗨 |
|---|--|--------------------------------|-----------------------|---------|--------------|------------------------------|-------------|--|--|--|
| Part VII Section A. Officers, Directors, Trus | tees, Key Em | ploy | ees | , and | iH b | ghe | st C | ompensated Employe | es (continued) | |
| (A) | (B) | | | ((|) | | | (D) | (E) | (F) |
| Name and title | Average hours per week | рох | not c , unle: | ss pe | more rson | than is bot or/trus | h an | Reportable compensation from | Reportable compensation from related | Estimated amount of other |
| | (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (18) MARKS, JOEL | 4.00 | | | | | | | | | |
| PAST BOARD CHAIR | | х | | | | | | 0. | 0. | 0. |
| (19) PARADIES, BETH | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | х | | | | | | 0. | 0. | 0. |
| (20) ROBINSON, AJ | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | х | | | | | | 0. | 0. | 0. |
| (21) SACKS, JESSICA | 4.00 | | | | | | | | | |
| NEXTGEN CHAIR (SELECT COMMITTEE) | | х | | | | | | 0. | 0. | 0. |
| (22) SATISKY, MARK | 4.00 | | | | | | | | | |
| COMMUNITY IMPACT CHAIR | | х | | | | | | 0. | 0. | 0. |
| (23) SELIG, LINDA | 4.00 | | | | | | | | | |
| COUNCIL OF LIFETIME TRUSTEE REPRESEN | | х | | | | | | 0. | 0. | 0. |
| (24) SHULMAN, MATT | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | Х | | | | | | 0. | 0. | 0. |
| (25) SIMON, MICHELLE | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | Х | | | | | | 0. | 0. | 0. |
| (26) SUNSHINE, STAN | 4.00 | | | | | | | | | |
| TREASURER | | Х | | Х | | | | 0. | 0. | 0. |
| 1b Subtotal | | | | | | | | 0. | 0. | 0. |
| c Total from continuation sheets to Part VI | I, Section A | | | | | | > | 1,102,992. | 0. | 0. |
| d Total (add lines 1b and 1c) | | | | | | | <u> </u> | 1,102,992. | 0. | 0. |

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

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

S

X

Section B. Independent Contractors

Form 000 (2010)

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

| (A) | (B) | (C) |
|---|--------------------------------------|--------------|
| Name and business address | Description of services | Compensation |
| RUSSELL INVESTMENTS, 1301 SECOND AVE, 18TH | | |
| FLOOR, SEATTLE , WA 98101 | INVESTMENT MANAGEMENT | 436,781. |
| PARTNERTEL, INC., C/O COST MANAGEMENT GROUP | | |
| 6478 PUTMAN FORD DRIVE, SUITE 100, WOOSTOCK | INFORMATION TECHNOLOGY | 109,946. |
| KELL PARTNERS, LLC, 5924 SOUTH CONGRESS, | | |
| UNIT 31, AUSTIN , TX 78745 | INFORMATION TECHNOLOGY | 107,227. |
| | | |
| | | |
| | | |
| | | |
| 2 Total number of independent contractors (including but not limited to those I | listed above) who received more than | |

SEE PART VII, SECTION A CONTINUATION SHEETS

\$100,000 of compensation from the organization

Form **990** (2019)

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Form 990 ATLANTA, INC. 58-1021791

| Form 990 ATLANTA, INC. | • | | | | | | | | 58-102179 | 1 |
|--|------------------------|--------------------------------|------------------------|---------|--------------|------------------------------|--------|---------------------------------|--------------------------|--------------------------|
| Part VII Section A. Officers, Directors, Tru | Compensated Employ | rees (continued) | | | | | | | | |
| (A) | (D) | (F) | | | | | | | | |
| Name and title | Average | | (C) Position | | | | | Reportable | (E) Reportable | Estimated |
| | hours | (c | heck | k all | that | арр | ly) | compensation | compensation | amount of |
| | per | | | | | | | from | from related | other |
| | week | | | | | Highest compensated employee | | the | organizations | compensation |
| | (list any hours for | lirect | | | | d emp | | organization (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization |
| | related | 9e or 0 | stee | | | ısateo | | (***2/1099*****100) | | and related |
| | organizations | Individual trustee or director | Institutional trustee | | yee | ышрег | | | | organizations |
| | below | idual | tution | l la | Key employee | est co | ıer | | | 3 |
| | line) | Indiv | Instit | Officer | Key 6 | High | Former | | | |
| (27) TRITT, ERICA | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | х | | | | | | 0. | 0. | 0. |
| (28) ZALIK, HELEN | 1.00 | | | | | | | | | |
| TRUSTEE AT LARGE | | х | | | | | | 0. | 0. | 0. |
| (29) BESKIND, MARCIE | 50.00 | | | | | | | | | |
| CFO/ CHIEF ADMINISTRATIVE OFFICER | | | | x | | | | 148,283. | 0. | 0. |
| (30) ECKOFF, CHRISTY | 50.00 | | | | | | | , | <u> </u> | |
| CHIEF FOUNDATION OFFICER AND MANAGIN | 2.70 | | | x | | | | 82,897. | 0. | 0. |
| (31) MANSBACH, JODI | 50.00 | | | | | | | , . | <u> </u> | |
| CHIEF IMPACT OFFICER | | | | х | | | | 174,380. | 0. | 0. |
| (32) ROBBINS, ERIC | 50.00 | | | | | | | · | | |
| PRESIDENT AND CEO | | | | x | | | | 432,864. | 0. | 0. |
| (33) SILBERMAN, MARK | 50.00 | | | | | | | · | | |
| CHAIR OF THE BOARD | | | | х | | | | 0. | 0. | 0. |
| (34) WARNER, BETH | 50.00 | | | | | | | | | |
| CHIEF PHILANTHROPY OFFICER | | | | х | | | | 145,502. | 0. | 0. |
| (35) KUTNER, RENEE | 50.00 | | | | | | | , | | |
| SENIOR VP OF MARKETING AND LEADERSHI | | | | | | х | | 119,066. | 0. | 0. |
| | | | | | | | | , | <u> </u> | |
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| | <u> </u> | | _ | | | | | | | |
| Total to Dort VII. Costion A. line 4 - | | | | | | | | 1,102,992. | | |
| Total to Part VII, Section A, line 1c | | | | | | | | 1 -, 104, 554. | | |

| Part VIII Statement of Re | evenue |
|---------------------------|--------|

| | | Check if Schedule O contains a response | or note to any lin | e in this Part VIII | | | |
|--|------|--|-------------------------|---------------------|------------------------------------|-------------------------------|---------------------------------|
| | | | | (A) | (B) | (C) | (D) |
| | | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under |
| | | | | | lunction revenue | business revenue | sections 512 - 514 |
| ts ts | 1 a | Federated campaigns 1a | | | | | |
| ran | | Membership dues 1b | | | | | |
| ا ۾ ج | | Fundraising events 1c | | | | | |
| ij je | | Related organizations 1d | | | | | |
| s, G mila | | Government grants (contributions) 1e | 1,006,900. | | | | |
| Sig | | All other contributions, gifts, grants, and | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | • | similar amounts not included above 1f | 43,471,220. | | | | |
| 불리 | | | 16,948,501. | | | | |
| ğΕ | | Noncash contributions included in lines 1a-1f | 10,310,301. | 44,478,120. | | | |
| <u> </u> | n | Total. Add lines 1a-1f | Business Code | 44,470,120. | | | |
| | | EDUCANTON C MDATNING | Business Code 611430 | 60 102 | 60 102 | | |
| ္ခဲ့ | 2 a | EDUCATION & TRAINING | 011430 | 69,103. | 69,103. | | |
| Program Service Revenue | b | | | | | | |
| n S | С | | | | | | |
| Rev Rev | d | | | | | | |
| Š_ | е | | | | | | |
| ۵ | f | All other program service revenue | | | | | |
| \Box | g | Total. Add lines 2a-2f | | 69,103. | | | |
| | 3 | Investment income (including dividends, interest | est, and | | | | |
| | | other similar amounts) | > | 812,089. | | 43,829. | 768,260. |
| | 4 | Income from investment of tax-exempt bond p | roceeds 🕨 | | | | |
| | 5 | Royalties | > | | | | |
| | | (i) Real | (ii) Personal | | | | |
| | 6 a | Gross rents 6a 229,835. | | | | | |
| | | Less: rental expenses 6b 0. | | | | | |
| | | Rental income or (loss) 6c 229,835. | | | | | |
| | | Net rental income or (loss) | • | 229,835. | | | 229,835. |
| | | Gross amount from sales of (i) Securities | (ii) Other | • | | | , |
| | | assets other than inventory 7a 15,232,046. | 1,509,515. | | | | |
| | h | Less: cost or other basis | , , | | | | |
| e l | ~ | and sales expenses 7b 13,853,088. | 1.754.840. | | | | |
| eu | | Gain or (loss) 7c 1,378,958. | | | | | |
| ther Revenue | | A1 | | 1,133,633. | | | 1,133,633. |
| P. | | Gross income from fundraising events (not | | 1,100,000. | | | 1,100,000. |
| 둦 | Оа | | | | | | |
| ١ | | | | | | | |
| | | contributions reported on line 1c). See | | | | | |
| | | Part IV, line 18 8a Less: direct expenses 8b | | | | | |
| | | | | | | | |
| | | Net income or (loss) from fundraising events | | | | | |
| | 9 a | Gross income from gaming activities. See | | | | | |
| | | Part IV, line 19 | | | | | |
| | | Less: direct expenses 9b | | | | | |
| | | Net income or (loss) from gaming activities | | | | | |
| | 10 a | Gross sales of inventory, less returns | | | | | |
| | | and allowances 10a | | | | | |
| | | Less: cost of goods sold 10b | | | | | |
| \blacksquare | С | Net income or (loss) from sales of inventory | | | | | |
| <u>s</u> | | | Business Code | | | | |
| eo e | 11 a | ADMIN. OF FUNDS | 523920 | 254,252. | 254,252. | | |
| Miscellaneous Revenue | b | | | | | | |
|] Sel | С | | | | | | |
| Ξ. | d | All other revenue | | | | | |
| | е | Total. Add lines 11a-11d | > | 254,252. | | | |
| | 12 | Total revenue. See instructions | | 46,977,032. | 323,355. | 43,829. | 2,131,728. |

932009 01-20-20

Form **990** (2019)

Part IX Statement of Functional Expenses

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

| Dο | Check if Schedule O contains a respon- not include amounts reported on lines 6b, | (A) | (B) | (C) | (D) |
|---|---|----------------|---|---------------------------------|-------------------------|
| | 8b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 32,780,213. | 32,780,213. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 928,410. | 928,410. | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 1,325,971. | 318,643. | 308,058. | 699,270 |
| 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 | 3,813,821. | 2,117,454. | 845,592. | 850,775 |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | 27,577. | 10,640. | 7,618. | 9,319 |
| 9 | Other employee benefits | 555,995. | 267,633. | 139,109. | 149,253 |
| 10 | Payroll taxes | 359,074. | 173,971. | 77,949. | 107,154 |
| 11 | Fees for services (nonemployees): | | | | |
| а | Management | | | | |
| b | Legal | 3,448. | 1,142. | 1,104. | 1,202 |
| С | Accounting | 82,223. | 3,416. | 72,463. | 6,344 |
| d | | 27,000. | 20,250. | 6,750. | |
| е | D (' 1(1 ' ' ' O D ' N ' ' 47 | | | | |
| f | Investment management fees | 462,468. | 462,468. | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A) amount, list line 11g expenses on Sch 0.) | 552,366. | 383,647. | 109,176. | 59,543 |
| 12 | Advertising and promotion | 183,047. | 139,167. | 3,287. | 40,593 |
| 13 | Office expenses | 95,446. | 44,587. | 28,579. | 22,280 |
| 14 | Information technology | 478,317. | 240,565. | 126,006. | 111,746 |
| 15 | Royalties | | | | |
| 16 | Occupancy | 197,594. | 70,484. | 69,122. | 57,988 |
| 17 | Travel | 269,944. | 208,124. | 15,617. | 46,203 |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 382,502. | 241,055. | 13,501. | 127,946 |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | 426,972. | 414,313. | 1,998. | 10,661 |
| 22 | Depreciation, depletion, and amortization | 423,671. | | 363,937. | 59,734 |
| 23 | Insurance | 60,148. | 26,465. | 18,646. | 15,037 |
| 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 Schedule 0.) | | | | |
| а | TRUST DISTRIBUTIONS | 169,216. | 169,216. | | |
| b | LIFE INSURANCE PREMIUMS | 120,166. | 120,166. | | |
| c | OTHER EXPENSE | 76,333. | 76,333. | | |
| q | CREDIT CARD PROCESSING | 40,419. | 2,890. | 37,529. | |
| e | An | 42,497. | 34,771. | 7,649. | 77 |
| 25 | Total functional expenses. Add lines 1 through 24e | 43,884,838. | 39,256,023. | 2,253,690. | 2,375,125 |
| <u>25 </u> | Joint costs. Complete this line only if the organization | ==,===,===,=== | , | =,===,=== | = , - , - , - 2 2 0 |
| _0 | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | outoutional campaign and fundraising solicitation. | | | | |

Form **990** (2019)

| Га | ΓLA | Balance Sneet | | | | | |
|-----------------------------|-----|---|-------------|------------------------|---------------------------------|-------|---------------------------|
| | | Check if Schedule O contains a response or | note to ar | ny line in this Part X | | ····· | |
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | | 1,000. | 1 | 1,070. |
| | 2 | Savings and temporary cash investments | | | 30,254,352. | 2 | 25,852,345. |
| | 3 | Pledges and grants receivable, net | | | 10,456,402. | 3 | 10,754,526. |
| | 4 | Accounts receivable, net | | | 162,793. | 4 | 110,343. |
| | 5 | Loans and other receivables from any curren | | | | | |
| | | trustee, key employee, creator or founder, su | bstantial | contributor, or 35% | | | |
| | | controlled entity or family member of any of t | hese pers | sons | | 5 | |
| | 6 | Loans and other receivables from other disqu | ualified pe | ersons (as defined | | | |
| | | under section 4958(f)(1)), and persons descri | bed in se | ction 4958(c)(3)(B) | | 6 | |
| ţ | 7 | Notes and loans receivable, net | | | 235,494. | 7 | 167,645. |
| Assets | 8 | Inventories for sale or use | | | | 8 | |
| Ä | 9 | Prepaid expenses and deferred charges | | | 104,782. | 9 | 24,479. |
| | 10a | Land, buildings, and equipment: cost or other | | | | | |
| | | basis. Complete Part VI of Schedule D | 10a | 12,139,301. | | | |
| | b | Less: accumulated depreciation | | 5,282,275. | 7,207,910. | 10c | 6,857,026. |
| | 11 | Investments - publicly traded securities | | | 276,233,505. | 11 | 286,855,866. |
| | 12 | Investments - other securities. See Part IV, lir | ne 11 | | 2,631,036. | 12 | 1,446,040. |
| | 13 | Investments - program-related. See Part IV, li | ne 11 | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 2,890,565. | 15 | 3,086,726. |
| | 16 | Total assets. Add lines 1 through 15 (must e | | | 330,177,839. | 16 | 335,156,066. |
| | 17 | Accounts payable and accrued expenses | | | 2,167,736. | 17 | 2,913,532. |
| | 18 | Grants payable | | | 8,678,021. | 18 | 7,687,389. |
| | 19 | Deferred revenue | | | 32,055. | 19 | 3,492. |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Comple | | | | 21 | |
| Se | 22 | Loans and other payables to any current or f | ormer offi | cer, director, | | | |
| Liabilities | | trustee, key employee, creator or founder, su | bstantial | contributor, or 35% | | | |
| japi | | controlled entity or family member of any of t | hese pers | sons | | 22 | |
| _ | 23 | Secured mortgages and notes payable to un | related th | ird parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrela | ated third | parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, | payables | to related third | | | |
| | | parties, and other liabilities not included on li | nes 17-24 |). Complete Part X | | | |
| | | of Schedule D | | | 58,671,187. | 25 | 61,436,187. |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 69,548,999. | 26 | 72,040,600. |
| 'n | | Organizations that follow FASB ASC 958, or | check her | re 🕨 🗓 | | | |
| čě | | and complete lines 27, 28, 32, and 33. | | | | | |
| alan | 27 | Net assets without donor restrictions | | | 239,839,606. | 27 | 237,618,557. |
| Ä | 28 | Net assets with donor restrictions | | <u></u> | 20,789,234. | 28 | 25,496,909. |
| ŭ. | | Organizations that do not follow FASB AS | C 958, ch | eck here 🕨 📖 | | | |
| Ē | | and complete lines 29 through 33. | | | | | |
| ts o | 29 | Capital stock or trust principal, or current fun | ds | | | 29 | |
| sse | 30 | Paid-in or capital surplus, or land, building, or | equipme | nt fund | | 30 | |
| Net Assets or Fund Balances | 31 | Retained earnings, endowment, accumulated | d income, | or other funds | | 31 | |
| Ne | 32 | Total net assets or fund balances | | | 260,628,840. | 32 | 263,115,466. |
| | 33 | Total liabilities and net assets/fund balances | | | 330,177,839. | 33 | 335,156,066. |

Page **11**

| Pa | rt XI Reconciliation of Net Assets | | | | |
|----|---|------------|--------|------|----------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | Х |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | | ,032. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | ,838. |
| 3 | | | | | ,194. |
| 4 | 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 | | | | ,840. |
| 5 | Net unrealized gains (losses) on investments | 5 | - 3 | ,146 | ,891. |
| 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 | 2 | ,541 | ,323. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | |
| | column (B)) | 10 | 263 | ,115 | ,466. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | X |
| | | | \Box | 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 in Schedule O. | | | | |
| 2a | 2a Were the organization's financial statements compiled or reviewed by an independent accountant? | | | | Х |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a | | | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Х | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa | e basis, | | | |
| | consolidated basis, or both: | | | | |
| | Separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Х | <u> </u> |
| | If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. | | | | |
| 3a | 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit | | | | |
| | Act and OMB Circular A-133? | | 3a | | Х |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | ired audit | | | |
| | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | 3b | | <u> </u> |
| | | | Form | 990 | (2019) |

SCHEDULE A

(Form 990 or 990-EZ)

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

Open to Public Inspection

Employer identification number Name of the organization JEWISH FEDERATION OF GREATER 58-1021791 ATLANTA INC Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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). 7 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.) 8 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 university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2019 ATLANTA, INC.

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 | tion A. Public Support | | | | | | |
|------|--|------------------------------|-----------------------|----------------------------|----------------------------|---------------------|--------------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 51,050,388. | 63,372,929. | 51,807,385. | 46,137,845. | 44,478,120. | 256,846,667. |
| 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 | 51,050,388. | 63,372,929. | 51,807,385. | 46,137,845. | 44,478,120. | 256,846,667. |
| 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) | | | | | | 38,963,647. |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | 217,883,020. |
| | tion B. Total Support | | • | | | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 7 | Amounts from line 4 | 51,050,388. | 63,372,929. | 51,807,385. | 46,137,845. | 44,478,120. | 256,846,667. |
| 8 | Gross income from interest, | | | | | | _ |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, | | | | | | |
| | and income from similar sources | 3,895,731. | 1,678,323. | 842,340. | 2,431,063. | 998,095. | 9,845,552. |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 266,692,219. |
| 12 | Gross receipts from related activities, | etc. (see instruction | ons) | | | 12 | 2,063,510. |
| 13 | First five years. If the Form 990 is for | r the organization's | first, second, third | l, fourth, or fifth ta | x year as a sectio | n 501(c)(3) | |
| | organization, check this box and stop | here | | | | | > |
| Sec | tion C. Computation of Publ | ic Support Pe | rcentage | | | | |
| 14 | Public support percentage for 2019 (| line 6, column (f) di | vided by line 11, c | olumn (f)) | | 14 | 81.70 % |
| 15 | Public support percentage from 2018 | Schedule A, Part | II, line 14 | | | 15 | 62.82 % |
| 16a | 33 1/3% support test - 2019. If the d | organization did no | t check the box on | line 13, and line 1 | 14 is 33 1/3% or n | nore, check this bo | x and |
| | stop here. The organization qualifies | as a publicly supp | orted organization | | | | X |
| b | 33 1/3% support test - 2018. If the d | organization did no | t check a box on li | ne 13 or 16a, and | line 15 is 33 1/3% | or more, check th | nis box |
| | and stop here. The organization qual | ifies as a publicly s | upported organiza | tion | | | ▶□ |
| 17a | 10% -facts-and-circumstances tes | t - 2019. If the orga | anization did not cl | heck a box on line | 13, 16a, or 16b, a | and line 14 is 10% | or more, |
| | and if the organization meets the "fac | ts-and-circumstan | ces" test, check th | is box and stop h e | ere. Explain in Par | t VI how the organ | ization |
| | meets the "facts-and-circumstances" | test. The organiza | tion qualifies as a p | oublicly supported | l organization | | ▶□ |
| b | 10% -facts-and-circumstances tes | t - 2018. If the org | anization did not cl | heck a box on line | 13, 16a, 16b, or | 17a, and line 15 is | 10% or |
| | more, and if the organization meets the | ne "facts-and-circu | mstances" test, ch | eck this box and s | stop here. Explain | in Part VI how the | <u> </u> |
| | organization meets the "facts-and-circ | cumstances" test. | The organization q | ualifies as a public | cly supported orga | anization | ▶□ |
| 18 | Private foundation. If the organization | on did not check a | oox on line 13, 16a | ı, 16b, 17a, or 17b | , check this box a | ınd see instruction | s ▶□ |

Schedule A (Form 990 or 990-EZ) 2019

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.)

| Se | ction A. Public Support | | | | | | |
|------|---|--------------------|--------------------------|----------------------|--------------------------|--------------------|------------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, | | | | | | |
| | merchandise sold or services per- | | | | | | |
| | formed, or facilities furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that | | | | | | |
| | are not an unrelated trade or bus- | | | | | | |
| | iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| k | Amounts included on lines 2 and 3 received | | | | | | |
| | from other than disqualified persons that | | | | | | |
| | exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| , | Add lines 7a and 7b | | | | | | |
| | Public support. (Subtract line 7c from line 6.) | | | | | | |
| | ction B. Total Support | | | | | | |
| | endar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| | Amounts from line 6 | (4) 2010 | (2) 2010 | (6) 2017 | (4) 2010 | (0) 2010 | (i) rotar |
| | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, and income from similar sources | | | | | | |
| ŀ | Unrelated business taxable income | | | | | | |
| | (less section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| , | Add lines 10a and 10b | | | | | | |
| | Net income from unrelated business | | | | | | |
| | activities not included in line 10b, | | | | | | |
| | whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| 13 | assets (Explain in Part VI.) | | | | | | |
| | First five years. If the Form 990 is for | the organization's | l e firet second thir | d fourth or fifth t | l av vear as a sectio | n 501(c)(3) organi | zation |
| • | check this box and stop here | · · | | | • | () () | |
| Sec | ction C. Computation of Publ | ic Support Pe | rcentage | | | | |
| | Public support percentage for 2019 (| | | column (fl) | | 15 | % |
| | Public support percentage from 2018 | | | | | 16 | |
| | ction D. Computation of Inves | | | | | 1 10 1 | 70 |
| | Investment income percentage for 20 | | | | | 17 | % |
| | Investment income percentage from 2 | | | | | 18 | |
| | a 33 1/3% support tests - 2019. If the | | | on line 14, and line | | | |
| 136 | more than 33 1/3%, check this box a | | | | | | ., 13 1101 |
| L | 33 1/3% support tests - 2018. If the | | - | | · · · | | and |
| L | line 18 is not more than 33 1/3%, che | - | | | | | |
| 20 | Private foundation. If the organization | | | | | | |
| | ato roundationi ii tilo organizatio | ala not oncor a | 201 OII III O 17, 10 | a, or roo, oricon ti | ino box and bob III | | <u></u> |

932023 09-25-19

Schedule A (Form 990 or 990-EZ) 2019

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **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 in 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 in 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 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 |
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JEWISH FEDERATION OF GREATER

| | dule A (Form 990 or 990-EZ) 2019 ATLANTA, INC. | 58-1021791 | Pa | age 5 |
|-------------|--|-------------------------|-----|--------------|
| Pai | rt IV Supporting Organizations _(continued) | | | |
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. | 11c | | |
| | tion B. Type I Supporting Organizations | 110 | | |
| | tion B. Type I supporting organizations | | Yes | No |
| 4 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | 165 | NO |
| 1 | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the | | | |
| | 5 7 11 | | | |
| | tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or | | | |
| | controlled the organization's activities. If the organization had more than one supported organization, | | | |
| | describe how the powers to appoint and/or remove 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 | | |
| <u>Sec</u> | 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 ta | ıx . | | |
| | 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 | | |
| 2 | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| 3 | | | | |
| | 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 | | | |
| <u> </u> | supported organizations played in this regard. | 3 | | |
| | 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 yea(see in | istructions). | | |
| а | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i> | | , | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a government er | ntity (see instructions | | |
| 2 | Activities Test. Answer (a) and (b) 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. | 2 a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | | | |
| | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | |
| | activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| u | trustees of each of the supported organizations? <i>Provide details in Part VI</i> . | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | Ju | | |
| - | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

932025 09-25-19

Schedule A (Form 990 or 990-EZ) 2019 ATLANTA, INC.

| Pa | rt V Type III Non-Functionally Integrated 509(a)(3) Supporting | g Orgar | nizations | | |
|------|--|-------------|----------------------------|--------------------------------|--|
| 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 co | mplete Se | ections 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 1-1/2% of line 3 (for greater amount, | | | | |
| | see instructions). | 4 | | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | | |
| _6 | Multiply line 5 by .035. | 6 | | | |
| _7_ | Recoveries of prior-year distributions | 7 | | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | | |
| Sect | ion C - Distributable Amount | | | Current Year | |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | | |
| 2 | Enter 85% of line 1. | 2 | | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | | |
| 4 | Enter greater of line 2 or line 3. | 4 | | | |
| 5 | Income tax imposed in prior year | 5 | | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | | |
| | emergency temporary reduction (see instructions). | 6 | | | |
| 7 | Check here if the current year is the organization's first as a non-functionall | y integrate | ed Type III supporting org | ganization (see | |
| | instructions). | - | | | |

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 ATLANTA, INC.

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

| ı aı | Type in Non-Functionally integrated 509 | (a)(s) supporting Orga | amzanoms (continued) | |
|-------|--|-------------------------------|--|---|
| Secti | on D - Distributions | | | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exe | | | |
| 2 | Amounts paid to perform activity that directly furthers exemp | | | |
| | organizations, in excess of income from activity | | | |
| 3 | Administrative expenses paid to accomplish exempt purpose | es of supported organization | ns | |
| 4 | Amounts paid to acquire exempt-use assets | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | |
| 8 | Distributions to attentive supported organizations to which the | ne organization is responsive | Э | |
| | (provide details in Part VI). See instructions. | | | |
| 9 | Distributable amount for 2019 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by line 9 amount | | | |
| Secti | on E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2019 | (iii) Distributable Amount for 2019 |
| 1 | Distributable amount for 2019 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2019 (reason- | | | |
| | able cause required- explain in Part VI). See instructions. | | | |
| 3 | Excess distributions carryover, if any, to 2019 | | | |
| а | From 2014 | | | |
| b | From 2015 | | | |
| С | From 2016 | | | |
| d | From 2017 | | | |
| е | From 2018 | | | |
| f | Total of lines 3a through e | | | |
| g | Applied to underdistributions of prior years | | | |
| h | Applied to 2019 distributable amount | | | |
| i | Carryover from 2014 not applied (see instructions) | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 | Distributions for 2019 from Section D, | | | |
| | line 7: \$ | | | |
| а | Applied to underdistributions of prior years | | | |
| | Applied to 2019 distributable amount | | | |
| | Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 | Remaining underdistributions for years prior to 2019, if | | | |
| | any. Subtract lines 3g and 4a from line 2. For result greater | | | |
| | than zero, explain in Part VI. See instructions. | | | |
| 6 | Remaining underdistributions for 2019. Subtract lines 3h | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | |
| | Part VI. See instructions. | | | |
| 7 | Excess distributions carryover to 2020. Add lines 3j | | | |
| | and 4c. Breakdown of line 7: | | | |
| 8 | Excess from 2015 | | | |
| | Excess from 2015 Excess from 2016 | | | |
| | Excess from 2017 | | | |
| | Excess from 2018 | | | |
| | Excess from 2019 | | | |

Schedule A (Form 990 or 990-EZ) 2019

| Schedule A | (Form 990 or 990-EZ) 2019 ATLANTA, INC. | 58-1021/91 Page |
|------------|---|----------------------------|
| Part VI | Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 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 a 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, | and 2; Part IV, Section C, |
| | Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition (See instructions.) | al information. |
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JEWISH FEDERATION OF GREATER

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

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

| ATL | ANTA, INC. | 58-1021791 | | | | |
|--|---|--------------------------------|--|--|--|--|
| Organization type (check one): | | | | | | |
| Filers of: | Section: | | | | | |
| Form 990 or 990-EZ | X 501(c)(³) (enter number) organization | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | |
| | 527 political organization | | | | | |
| Form 990-PF | 501(c)(3) exempt private foundation | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | |
| | 501(c)(3) taxable private foundation | | | | | |
| | | | | | | |
| | s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru | ule. See instructions. | | | | |
| | (,), (,), (,), (,) | | | | | |
| General Rule | | | | | | |
| | n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor | • | | | | |
| Special Rules | | | | | | |
| sections 509(a)(1) any one contributo | n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount line 1. Complete Parts I and II. | or 16b, and that received from | | | | |
| 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, II, and III. | | | | | | |
| year, contributions is checked, enter h purpose. Don't cor | 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 General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year | | | | | |
| but it must answer "No" on | at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). | · | | | | |

Name of organization

JEWISH FEDERATION OF GREATER

ATLANTA, INC.

Employer identification number

58-1021791

| Part I | Contributors (see instructions). Use duplicate copies of Part I if ac | dditional space is needed. | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | | \$\$ | Person X Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | | \$\$ | Person X Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 | | \$\$ | Person X Payroll |

Name of organization

JEWISH FEDERATION OF GREATER

ATLANTA, INC.

Employer identification number

58-1021791

| Part II | Noncash Property (see instructions). Use duplicate copies of Part II if a | additional space is needed. | |
|------------------------------|---|---|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| 1 | DONATION OF HOME DEPOT STOCK | | |
| | | | |
| | | \$8,210,805. | 12/23/19 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| Taiti | 0.9069 CLASS A UNITS OF ASHFORD 2788 | | |
| 2 | MANGER, LLC | | |
| | | \$1,504,273. | 12/18/19 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | DONATION OF STOCK | | |
| 4 | | | |
| | | \$1,859,845. | 10/10/19 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | | |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
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SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047 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

| | e separate instructions), then | | ,,, (| ,, | |
|--|--|---|---|---|---|
| | ATLANTA, II | ERATION OF GREATER | | | oyer identification number 58-1021791 |
| Part I | -A Complete if the org | ganization is exempt und | ler section 501(c) | or is a section 527 o | rganization. |
| 2 Poli | itical campaign activity expendit | zation's direct and indirect politic tures ign activities | | ▶\$ | |
| Part I | -B Complete if the org | ganization is exempt und | ler section 501(c) | | |
| | | incurred by the organization und | | | |
| 3 If th 4a Was | ne organization incurred a sectio | incurred by organization manag on 4955 tax, did it file Form 4720 | for this year? | | Yes No |
| Part I | -C Complete if the org | ganization is exempt und | ler section 501(c) | , except section 501(| c)(3). |
| 2 Enterexe state of the exe state of the | er the amount of the filing organized that amount of the filing organization expenditures the filing organization file Former the names, addresses and erde payments. For each organizatiributions received that were present in the filing organization file former the names, addresses and erde payments. | d by the filing organization for se nization's funds contributed to ot s. Add lines 1 and 2. Enter here a second for this year? Inployer identification number (Elation listed, enter the amount pai comptly and directly delivered to additional space is needed, provided to additional space is needed. | ther organizations for so and on Form 1120-POL IN) of all section 527 po d from the filing organia a separate political org | ection 527 | Yes No No the filing organization ne amount of political |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0 |
| | | | | | |
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| | | | | | |

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

Schedule C (Form 990 or 990-EZ) 2019

LHA

932041 11-26-19

| 5 | Ω | -1 | Λ | 2 | 1 | 7 | a | 1 |
|---|---|----|---|---|---|---|---|---|
| | | | | | | | | |

| Part II-A Complete if the org | | mpt under sectio | n 501(c)(3) and fil | ed Form 5768 (e | lection under |
|---|--|--|---|--|------------------------------------|
| expenses, and share | re of excess lobbying | expenditures). | n Part IV each affiliated | group member's nan | ne, address, EIN, |
| Limi | ts on Lobbying Expe | nd "limited control" pro nditures unts paid or incurred. | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a Total lobbying expenditures to influ | uence public opinion (| grassroots lobbying) | | | |
| b Total lobbying expenditures to influ | | | | | |
| c Total lobbying expenditures (add li | | | | | |
| d Other exempt purpose expenditure | | ٠٠٠٠٠٠ | | | |
| e Total exempt purpose expendituref Lobbying nontaxable amount. Enter | | | | | |
| If the amount on line 1e, column (a) of | | bying nontaxable am | T I | | |
| Not over \$500,000 | | the amount on line 1e | | | |
| Over \$500,000 but not over \$1,000 | | 00 plus 15% of the exc | | | |
| Over \$1,000,000 but not over \$1,5 | | 00 plus 10% of the exc | | | |
| Over \$1,500,000 but not over \$17, | | 00 plus 5% of the exce | | | |
| Over \$17,000,000 | \$1,000, | 000. | | | |
| g Grassroots nontaxable amount (er h Subtract line 1g from line 1a. If zer i Subtract line 1f from line 1c. If zer j If there is an amount other than ze reporting section 4911 tax for this (Some organizations the | o or less, enter -0- o or less, enter -0- ro on either line 1h or year? 4-Year Ave nat made a section 5 | eraging Period Under | ation file Form 4720 Section 501(h) have to complete all | | Yes No |
| | | nditures During 4-Ye | | | |
| Calendar year (or fiscal year beginning in) | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) Total |
| 2a Lobbying nontaxable amount | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| 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 or 990-EZ) 2019

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

| or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description | (| a) | (k | o) |
|---|---|--|--------------|----------|
| f the lobbying activity. | Yes | No | Amo | 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: | | | | |
| a Volunteers? | х | | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | ? X | | | |
| c Media advertisements? | | Х | | |
| d Mailings to members, legislators, or the public? | Х | | | 2,035 |
| e Publications, or published or broadcast statements? | | Х | | |
| f Grants to other organizations for lobbying purposes? | | Х | | 21.255 |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | 24,965 |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | X | | |
| i Other activities? | | Х | | 07.000 |
| j Total. Add lines 1c through 1i | | | | 27,000 |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | Х | | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | \(\(\) \(\ | otion | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), s 501(c)(6). | section 50 r(c) | jijoj, or se | ection | |
| 301(0)(0). | | | Yes | No |
| | | | 163 | 140 |
| 4 M/ | | | | |
| 1 Were substantially all (90% or more) dues received nondeductible by members? | | | | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | 2 | | |
| 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 f | from the prior yea | 2 ar? 3 | ection | |
| 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 for the organization is exempt under section 501(c)(4), section 501(c)(4), section 501(c)(4) | from the prior yea | 2 ar? 3)(5), or se | | e 3. is |
| 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 for till-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered. | from the prior yea | 2 ar? 3)(5), or se | | e 3, is |
| 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 for Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." | from the prior yea section 501(c ered "No" Of | 2 3)(5), or se R (b) Part | | ne 3, is |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for till-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members | from the prior yea section 501(c ered "No" Of | 2 3)(5), or se R (b) Part | | ne 3, is |
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| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for till-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). | from the prior yea section 501(c ered "No" Of political | 2 3)(5), or se R (b) Part | | ne 3, is |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). a Current year | from the prior yes section 501(c) ered "No" Of political | 2 3)(5), or se R (b) Part | | ne 3, is |
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| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures of Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total | from the prior yea section 501(c ered "No" Of political | 2 3)(5), or se R (b) Part 1 2a 2b 2c | | ne 3, is |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures of Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due | from the prior yea section 501(c) ered "No" Of political | 2 3)(5), or se R (b) Part 1 2a 2b 2c | | ne 3, is |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). Current year Carryover from last year | from the prior yes section 501(c) ered "No" Of political | 2 3)(5), or se R (b) Part 1 2a 2b 2c | | ne 3, is |
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| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures for the organization agree to carry over lobbying and political campaign activity expenditures for the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) duals of the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated instructions); and Part II-B, line 1. Also, complete this part for any additional information. | political Jes Bection 501(c) Bered "No" OF Political | 2 3)(5), or se R (b) Part 2a 2b 2c 3 | t III-A, lin | ne 3, is |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures of Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) duals of the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated instructions); and Part II-B, line 1. Also, complete this part for any additional information. ART II-B, LINE 1, LOBBYING ACTIVITIES: | political Jes Bection 501(c) Bered "No" OF Political | 2 3)(5), or se R (b) Part 2a 2b 2c 3 | t III-A, lin | ne 3, is |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures of Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) duals of the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated instructions); and Part II-B, line 1. Also, complete this part for any additional information. ART II-B, LINE 1, LOBBYING ACTIVITIES: | political Jes Bection 501(c) Bered "No" OF Political | 2 3)(5), or se R (b) Part 2a 2b 2c 3 | t III-A, lin | ne 3, is |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures of Part III-B Complete if the organization is exempt under section 501(c)(4), s 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated instructions); and Part II-B, line 1. Also, complete this part for any additional information. ART II-B, LINE 1, LOBBYING ACTIVITIES: | political Jes Bection 501(c) Bered "No" OF Political | 2 3)(5), or se R (b) Part 2a 2b 2c 3 | t III-A, lin | ne 3, is |
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| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures of Part III-B Complete if the organization is exempt under section 501(c)(4), s 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answ answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du fl notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated instructions); and Part II-B, line 1. Also, complete this part for any additional information. ART II-B, LINE 1, LOBBYING ACTIVITIES: OBBYING ACTIVITIES INCLUDE THE DISTRIBUTION OF AN E-MAIL NEWSLETTER | political Jes Bection 501(c) Bered "No" OF Political | 2 3)(5), or se R (b) Part 2a 2b 2c 3 | t III-A, lin | ne 3, is |

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 Open to Public Inspection

Name of the organization

JEWISH FEDERATION OF GREATER ATLANTA, INC.

Employer identification number 58-1021791

| Pai | t I Organizations Maintaining Donor Advise | d Funds or Other Similar Funds o | or Accounts.Complete if the |
|-----|---|---|-------------------------------------|
| | organization answered "Yes" on Form 990, Part IV, line | e 6. | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | 466 | |
| 2 | Aggregate value of contributions to (during year) | 25,581,313. | |
| 3 | Aggregate value of grants from (during year) | 31,427,108. | |
| 4 | Aggregate value at end of year | 212,641,972. | |
| 5 | Did the organization inform all donors and donor advisors in v | writing that the assets held in donor advised | d funds |
| | are the organization's property, subject to the organization's | exclusive legal control? | X Yes No |
| 6 | Did the organization inform all grantees, donors, and donor a | | |
| | for charitable purposes and not for the benefit of the donor o | | |
| | | | |
| Pai | | | |
| 1 | Purpose(s) of conservation easements held by the organization | on (check all that apply). | |
| | Preservation of land for public use (for example, recrea | tion or education) Preservation of a | historically important land area |
| | Protection of natural habitat | Preservation of a | certified historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | ied 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 |
| а | Total number of conservation easements | | 2a |
| b | | | |
| С | Number of conservation easements on a certified historic stru | ucture included in (a) | 2c |
| d | Number of conservation easements included in (c) acquired a | after 7/25/06, and not on a historic structure | e |
| | listed in the National Register | | 2d |
| 3 | Number of conservation easements modified, transferred, rel | | |
| | year ▶ | | |
| 4 | Number of states where property subject to conservation eas | sement is located > | |
| 5 | Does the organization have a written policy regarding the per | iodic monitoring, inspection, handling of | |
| | violations, and enforcement of the conservation easements it | tholds? | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | | |
| | | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | lling of violations, and enforcing conservation | on easements during the year |
| | ▶ \$ | | |
| 8 | Does each conservation easement reported on line 2(d) above | | |
| | and section 170(h)(4)(B)(ii)? | | Yes No |
| 9 | In Part XIII, describe how the organization reports conservation | on easements in its revenue and expense s | tatement and |
| | balance sheet, and include, if applicable, the text of the footn | note to the organization's financial statemen | its that describes the |
| | organization's accounting for conservation easements. | (| 0: " |
| Pai | t III Organizations Maintaining Collections of | • | ier Similar Assets. |
| | Complete if the organization answered "Yes" on Form | | |
| 1a | If the organization elected, as permitted under FASB ASC 95 | | |
| | of art, historical treasures, or other similar assets held for pub | | |
| | service, provide in Part XIII the text of the footnote to its finar | | |
| b | If the organization elected, as permitted under FASB ASC 95 | • | |
| | art, historical treasures, or other similar assets held for public | exhibition, education, or research in furthe | rance of public service, |
| | provide the following amounts relating to these items: | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | |
| | (ii) Assets included in Form 990, Part X | | > \$ |
| 2 | If the organization received or held works of art, historical treat | | gain, provide |
| | the following amounts required to be reported under FASB A | _ | |
| а | Revenue included on Form 990, Part VIII, line 1 | | |
| h | Assets included in Form 990. Part X | | ▶ \$ |

932051 10-02-19

Schedule D (Form 990) 2019

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

| Pai | t III Organizations Maintaining C | collections of A | t, Historical Tı | reasures, or Oth | <u>ner Similar As</u> | sets (continued) |
|---------|---|------------------------|------------------------|-----------------------|--|-------------------------|
| 3 | Using the organization's acquisition, accessi | on, and other record | s, check any of the | following that make | significant use of | its |
| | collection items (check all that apply): | | | | | |
| а | Public exhibition | d | Loan or exc | change program | | |
| b | Scholarly research | е | Other | | | |
| С | Preservation for future generations | | | | | |
| 4 | Provide a description of the organization's co | ollections and explain | n how they further | the organization's ex | empt purpose in F | Part XIII. |
| 5 | During the year, did the organization solicit o | | | - | | |
| | to be sold to raise funds rather than to be ma | | | | | Yes No |
| Pai | t IV Escrow and Custodial Arran | | | | | |
| | reported an amount on Form 990, Par | | | | | , |
| | Is the organization an agent, trustee, custod | | liary for contribution | ns or other assets no | ot included | |
| | on Form 990, Part X? | | | | | Yes No |
| b | If "Yes," explain the arrangement in Part XIII | | | | | |
| ~ | ii roo, oxpiaii tilo arrangomont ii r art xiii | and complete the re | noving table. | | | Amount |
| С | Beginning balance | | | | 1c | Amount |
| | | | | | | |
| | Additions during the year | | | | | |
| _ | Distributions during the year | | | | | |
| f 20 | Ending balance | | | | | Yes No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | |
| Pai | | | | | | |
| . u | 2 Indevinient Lander Complete | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years ba | ck (e) Four years back |
| 10 | Paginning of year balance | 234,387,429. | 343,102,234 | + ` ' | | |
| _ | Beginning of year balance | 29,665,838. | 25,098,655 | | + | |
| b | Contributions | 2,358,135. | 8,681,318 | | | |
| С. | Net investment earnings, gains, and losses | | | | + | |
| d | Grants or scholarships | 31,213,517. | 143,358,020 | 25,061,375 | 26,462,42 | 23,581,907. |
| е | Other expenditures for facilities | | | | | |
| | and programs | 1 110 110 | 252 242 | 5=0.505 | 604 50 | 1 105 100 |
| f | Administrative expenses | 1,443,149. | 863,242 | | | |
| g | End of year balance | 233,754,736. | 234,387,429 | <u> </u> | 172,309,74 | 139,240,470. |
| 2 | Provide the estimated percentage of the curr | • | e (line 1g, column (| a)) held as: | | |
| а | Board designated or quasi-endowment | 90.30 | _% | | | |
| b | Permanent endowment ► 1.70 | % | | | | |
| С | Term endowment ▶ | % | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | uld equal 100%. | | | | |
| 3a | Are there endowment funds not in the posse | ssion of the organiza | ation that are held a | and administered for | the organization | |
| | by: | | | | | Yes No |
| | (i) Unrelated organizations | | | | | 3a(i) X |
| | (ii) Related organizations | | | | | 3a(ii) X |
| b | If "Yes" on line 3a(ii), are the related organization | | | | | |
| 4 | Describe in Part XIII the intended uses of the | | wment funds. | | | |
| Pai | t VI Land, Buildings, and Equipm | ent. | | | | |
| | Complete if the organization answere | d "Yes" on Form 990 |), Part IV, line 11a. | See Form 990, Part 2 | X, line 10. | |
| | Description of property | (a) Cost or o | ther (b) Cos | t or other (c) | Accumulated | (d) Book value |
| | | basis (investn | | | epreciation | |
| 1a | Land | 31 | 5,196. | 3,200,000. | | 3,515,196. |
| | Buildings | | | 7,556,664. | 4,364,917. | 3,191,747. |
| | Leasehold improvements | | | | | |
| | Equipment | | | L,067,441. | 917,358. | 150,083. |
| | Other | | | | | |
| Tota | . Add lines 1a through 1e. (Column (d) must e | qual Form 990, Part | X, column (B), line | 10c.) | > | 6,857,026. |
| | | | | | Sched | ule D (Form 990) 2019 |

| Schedule D (Form 990) 2019 ATLANTA, INC. | | 58 | -1021791 Page 3 |
|--|-------------------------------|--|-------------------------|
| 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 er | nd-of-year market value |
| (1) Financial derivatives | ., | | |
| (2) Closely held equity interests | | | |
| (3) Other | | | |
| . , | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| <u>(E)</u> | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII Investments - Program Related. | • | | |
| Complete if the organization answered "Yes' | on Form 990 Part IV line | 11c See Form 990 Part X line 13 | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or er | nd-of-vear market value |
| (1) | (, | (-, | |
| | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| Part IX Other Assets. | | | |
| Complete if the organization answered "Yes' | on Form 990, Part IV, line | 11d. See Form 990, Part X, line 15. | |
| | Description | | (b) Book value |
| (1) | · | | |
| (2) | | | + |
| | | | + |
| (3) | | | + |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) lin | ne 15.) | > | • |
| Part X Other Liabilities. | | | |
| Complete if the organization answered "Yes' | on Form 990, Part IV, line | 11e or 11f. See Form 990, Part X, line 2 | <i>t</i> 5. |
| 1. (a) Description of liability | | | (b) Book value |
| (1) Federal income taxes | | | 1 |
| (2) TRUST OBLIGATIONS | | | 1,636,086. |
| (3) PAYABLE TO OTHER ORGANIZATIONS | | | 59,692,874. |
| (0) | | | 107,227. |
| | | | 107,227. |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) lir | ne 25.) | | 61,436,187. |
| 2. Liability for uncertain tax positions. In Part XIII, provid- | e the text of the footnote to | the organization's financial statements | that reports the |

Schedule D (Form 990) 2019

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.... X

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| Par | rt XI Reconciliation of Revenue per Audited Financial | i Statements with neven | ue per neturn. | |
|-----------|--|---------------------------------|-------------------------------------|-------|
| | Complete if the organization answered "Yes" on Form 990, Part | | | |
| 1 | Total revenue, gains, and other support per audited financial statement | ts | 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 | / | | | |
| е | Add lines 2a through 2d | | | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 1 1 | | |
| а | 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, lin | ne 12.) | 5 | |
| Pai | rt XII Reconciliation of Expenses per Audited Financia | | ises per Return. | |
| | Complete if the organization answered "Yes" on Form 990, Part | | | |
| 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: | 1 1 | | |
| а | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| С | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| е | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| 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 | |
| | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, I | line 18.) | 5 | |
| | rt XIII Supplemental Information. | | | |
| | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a | | Part V, line 4; Part X, line 2; Par | t XI, |
| lines | 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to prov | ide any additional information. | | |
| | | | | |
| D 7 D III | n w ithir C. | | | |
| PART | F X, LINE 2: | | | |
| mur | FEDERATION QUALIFIES FOR TAX-EXEMPT STATUS UNDER SECTI | ION 501/C)/3) OF | | |
| | I DEBERTION CORPLISED FOR TAX EXEMIT STATES ORDER SECTION | 10N 301(C)(3) 01 | | |
| тне | INTERNAL REVENUE CODE (THE "CODE") AS A CHARITABLE ORG | GANTZATTON | | |
| | THIRME REVEROE CODE (THE CODE) THE IT CHINCITEDED ON | 57111 2711 1011 | | |
| WHER | REBY ONLY UNRELATED BUSINESS INCOME, IF ANY AS DEFINED | BY SECTION | | |
| | , | | | |
| 512(| (A)(1) OF THE CODE, IS SUBJECT TO FEDERAL INCOME TAX. N | MANAGEMENT | | |
| | , | | | |
| BELI | EVES THE FEDERATION MET THE REQUIREMENTS TO MAINTAIN | THEIR TAX-EXEMPT | | |
| | <u>"</u> | | | |
| STAT | rus; therefore, no provision for income taxes on exemp | I PURPOSES HAS | | |
| | · · | | | |
| BEEN | N PROVIDED IN THESE FINANCIAL STATEMENTS. | | | |
| | | | | |
| | | | | |
| | | | | |
| AS C | OF AND FOR THE YEARS ENDED JUNE 30, 2020 AND 2019, THE | FEDERATION DID | | |
| | | | | |
| NOT | IDENTIFY ANY UNCERTAIN TAX POSITIONS THAT REQUIRE ADJU | JSTMENT TO OR | | |
| | | | | |
| | | | | |

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

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

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

| | | | 0.0000 | allo lates a lates | | | | |
|--|----------------------|------------------------------------|---|-----------------------------------|---|---|---------------------------------------|------|
| Name of the organization JEWISH FEDERATION OF GREATER | TION OF GREAT | 3R | | | | | Employer identification number | ē |
| ATLANTA, INC. | | | | | | | 58-1021791 | |
| Part I General Information on Grants and Assistance | ind Assistance | | | | | | | l |
| 1 Does the organization maintain records to substantiate the amount of | to substantiate th | | or assistance, the | grantees' eligibility | for the grants or ass | the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection | lion | |
| criteria used to award the grants or assistance? | stance? | | | | | | X Yes | ŝ |
| 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States | ocedures for mon | itoring the use of grant | funds in the United | States. | | | | ١ |
| | Domestic Organ | izations and Domestio | c Governments. Co | omplete if the orga | nization answered "Y | 'es" on Form 990, Part | IV, line 21, for any | |
| recipient that received more than \$5,000. Part II can be duplicat | \$5,000. Part II ca | be duplicated if additi | ed if additional space is needed | ed. | | | | |
| 1 (a) Name and address of organization or government | (p) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, EMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance | |
| AMERICAN FRIENDS OF THE ISRAEL | | | | | | | | |
| DEMOCRACY INSTITUTE - 1266 WEST | | | | | | | | |
| PACES FERRY ROAD - ATLANTA, GA | | | | | | | | |
| 30327 | 13-3348313 | 501(C)(3) | .000,085,9 | 0 | | | DONATIONS | |
| ATLANTA TECHNICAL COLLEGE | | | | | | | | |
| FOUNDATION INC 1560 | | | | | | | | |
| METROPOLITAN PARKWAY SW - ATLANTA, | | | | | | | | |
| GA 30310 | 58-2582973 | 501(C)(3) | 1,251,000. | 0. | | | DONATIONS | |
| | | | | | | | | |
| ATLANTA JEWISH ACADEMY | | | | | | | | |
| 5200 NORTHLAND DRIVE | | | | | | | | |
| ATLANTA, GA 30342 | 58-1088687 | 501(C)(3) | 1,100,235. | 0 | | | DONATIONS | |
| THE FELICIA PENZELL WEBER JEWISH | | | | | | | | |
| COMMUNITY HIGH SCHOOL - 6751 | | | | | | | | |
| ROSWELL ROAD - ATLANTA, GA | | | | | | | | |
| 30328-2501 | 58-2207654 | 501(C)(3) | 851,708. | 0 | | | DONATIONS | |
| | | | | | | | | |
| JEWISH FAMILY & CAREER SERVICES | | | | | | | | |
| | 58-1479212 | 501(0)(3) | 796 999 | C | | | PONSTITONS | |
| organization, organization | 7177 | (0) (0) | • # 00 00 00 00 00 00 00 00 00 00 00 00 0 | • | | | | |
| EPSTEIN SCHOOL INC. | | | | | | | | |
| 335 COLEWOOD WAY NW | | | | | | | | |
| ATLANTA, GA 30328-2956 | 58-2022685 | 501(C)(3) | 548,422. | 0 | | | DONATIONS | |
| 2 Enter total number of section 501(c)(3) and government organizations | ind government o | | listed in the line 1 table | | | | 4 25 | 257. |
| 3 Enter total number of other organizations listed in the line 1 table | s listed in the line | 1 table | | | | | | 。 |
| ر ا | , see the Instruc | tions for Form 990. | | | | | Schedule I (Form 990) (2019) | 6 |

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

Schedule I (Form 990) (2019)

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| FEDERATION |
| JEWISH |

Page 1 58-1021791 Schedule I (Form 990) ATLANTA, INC.

| Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | ernments and Organ | nzations in the Ur | nited States (Sche | dule I (Form 990), Par | T II.) | |
|---|------------------|----------------------------------|--------------------------|---|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| AHAVATH ACHIM SYNAGOGUE 600 PEACHTREE BATTLE AVE. NW ATLANTA, GA 30327 | 58-2360915 | 501(C)(3) | 493,802. | 0, | | | DONATIONS |
| WIREGRASS GEORGIA TECHNICAL COLLEGE FOUNDATION - 4089 VAL TECH ROAD - VALDOSTA, GA 31602 | 58-1831750 | 501(C)(3) | 475,000. | 0, | | | DONATIONS |
| MARCUS JEWISH COMMUNITY CENTER OF ATLANTA INC 5342 TILLY MILL ROAD - DUNWOODY, GA 30338 | 58-0566126 | 501(C)(3) | 456,653. | 0. | | | DONATIONS |
| PACE ACADEMY 966 W PACES FERRY RD NW ATLANTA, GA 30327 | 58-0706812 | 501(C)(3) | 448,500. | 0. | | | DONATIONS |
| JEWISH WOMEN'S CONNECTION OF ATLANTA - 1959 LAVISTA RD, NE - ATLANTA, GA 30329 | 58-1750850 | 501(C)(3) | 351,650. | 0, | | | DONATIONS |
| ZOO ATLANTA 800 CHEROKEE AVE SE ATLANTA, GA 30315 | 58-1655184 | 501(C)(3) | 334,059. | 0, | | | DONATIONS |
| BIRTHRIGHT ISRAEL FOUNDATION 711 3RD AVENUE, 10TH FLOOR NEW YORK, NY 10017 | 13-4092050 | 501(C)(3) | 302,330. | 0. | | | DONATIONS |
| GRADY HEALTH FOUNDATION 191 PEACHTREE STREET NE, SUITE 820 ATLANTA, GA 30303 | 58-2130437 | 501(C)(3) | 300,000. | .0 | | | DONATIONS |
| UNIVERSITY OF GEORGIA FOUNDATION 1 PRESS PLACE ATHENS, GA 30602 | 58-6033837 | 501(C)(3) | 288,577. | 0. | | | DONATIONS |
| | | | | | | | Schedule (Form 990) |

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| JEWISH |

| Schedule I (Form 990) ATLANTA, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | nizations in the Ur | nited States (Sche | dule I (Form 990), Par | | 58-1021791 Page 1 |
|--|------------------|----------------------------------|--------------------------|-----------------------------------|--|---|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| TEMPLE SINAI 5645 DUPREE DRIVE ATLANTA, GA 30327-4303 | 58-1033792 | 501(C)(3) | 280,006. | 0. | | | DONATIONS |
| JEWISH EDUCATIONAL LOAN FUND 4549 CHAMBLEE DUNWOODY RD ATLANTA, GA 30338 | 58-0568686 | 501(C)(3) | 261,415. | .0 | | | DONATIONS |
| JEWISH HOME LIFE COMMUNITIES INC. 3150 HOWELL MILL ROAD NW ATLANTA, GA 30327 | 47-4755353 | 501(C)(3) | 218,643. | .0 | | | DONATIONS |
| CONGREGATION OHR HATORAH 2056 LAVISTA ROAD NE ATLANTA, GA 30329 | 58-2159691 | 501(C)(3) | 206,433. | 0. | | | DONATIONS |
| MOREHOUSE SCHOOL OF MEDICINE 720 WESTVIEW DR SW, NCPC: ROOM 402 ATLANTA, GA 30310 | 58-1438873 | 501(C)(3) | 200,000. | 0. | | | DONATIONS |
| THE TEMPLE 1589 PEACHTREE ST. NE ATLANTA, GA 30309-2401 | 58-1083581 | 501(C)(3) | 194,960. | 0. | | | DONATIONS |
| IN THE CITY CAMP INC 2897 N DRUID HILLS RD #344 ATLANTA, GA 30329 | 47-2246068 | 501(C)(3) | 171,680. | 0. | | | DONATIONS |
| CONGREGATION B'NAI TORAH 700 MOUNT VERNON HWY, NE ATLANTA, GA 30328 | 58-1419696 | 501(C)(3) | 167,630. | 0. | | | DONATIONS |
| JEWISH NATIONAL FUND 6065 ROSWELL ROAD STE 214 ATLANTA, GA 30328 | 13-1659627 | 501(C)(3) | 156,845. | .0 | | | DONATIONS |
| | | | | | | | Schedule I (Form 990) |

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| Schedule I (Form 990) ATLANTA, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Gc | vernments and Organ | nizations in the Ur | nited States (Sche | dule I (Form 990), Par | | 58-1021791 Page 1 |
|--|------------------|----------------------------------|--------------------------|-----------------------------------|---|---|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| AMERICAN JEWISH COMMITTEE 165 EAST 56 STREET, #600 NEW YORK, NY 10022 | 13-5563393 | 501(C)(3) | 153,780. | •0 | | | DONATIONS |
| JEWISH WOMEN'S RENAISSANCE PROJECT 6101 EXECUTIVE BLVD, SUITE 240 ROCKVILLE, MD 20852 | 38-3852989 | 501(c)(3) | 150,000. | 0.0 | | | DONATIONS |
| BETHUNE-COOKMAN UNIVERSITY 640 DR. MARY MCLEOD BETHUNE BLVD. DAYTONA BEACH, FL 32114-3099 | 59-0704726 | 501(C)(3) | 150,000. | .0 | | | DONATIONS |
| ATLANTA COMMUNITY FOOD BANK 3400 NORTH DESERT DRIVE ATLANTA, GA 30344 | 58-1376648 | 501(C)(3) | 146,532. | 0. | | | DONATIONS |
| HIGH MUSEUM OF ART 1280 PEACHTREE STREET NE ATLANTA, GA 30309 | 58-0633971 | 501(C)(3) | 144,153. | .0 | | | DONATIONS |
| TORAH DAY SCHOOL OF ATLANTA 1985 LAVISTA ROAD NE ATLANTA, GA 30329 | 58-1594193 | 501(C)(3) | 130,811. | .0 | | | DONATIONS |
| P.E.F. ISRAEL ENDOWMENT FUNDS INC. 630 THIRD AVENUE, SUITE 1501 NEW YORK, NY 10017 | 13-6104086 | 501(C)(3) | 128,370. | .0 | | | DONATIONS |
| CONGREGATION ARIEL 5237 TILLY MILL ROAD DUNWOODY, GA 30338 | 33-1180230 | 501(C)(3) | 126,360. | .0 | | | DONATIONS |
| CAMP RAMAH DAROM 6400 POWERS FERRY RD. NW SUITE 215 ATLANTA, GA 30339 | 58-2146741 | 501(C)(3) | 123,753. | 0 | | | DONATIONS |
| | | | | | | | Schedule I (Form 990) |

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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | izations in the Ur | nited States (Sche | dule I (Form 990), Par | t II.) | |
|---|------------------|----------------------------------|--------------------------|---|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| IMPACTISRAEL 4340 EAST-WEST HIGHWAY, SUITE 202 BETHESDA, MD 20814 | 22-3090463 | 501(C)(3) | 122,160. | .0 | | | DONATIONS |
| BETH JACOB ATLANTA 1855 LAVISTA ROAD NE ATLANTA, GA 30329-3819 | 58-0833315 | 501(C)(3) | 120,039. | .0 | | | DONATIONS |
| CONGREGATION ETZ CHAIM 1190 INDIAN HILLS PKWY MARIETTA, GA 30068 | 58-1245765 | 501(C)(3) | 112,846. | .0 | | | DONATIONS |
| AMERICAN ISRAEL EDUCATION FOUNDATION - 251 H STREET NW - WASHINGTON, DC 20001 | 52-1623781 | 501(C)(3) | 111,000. | .0 | | | DONATIONS |
| UNIVERSITY OF FLORIDA FOUNDATION, INC P.O. BOX 14425 - GAINESVILLE, FL 32604-2425 | 59-0974739 | 501(C)(3) | 110,000. | .0 | | | DONATIONS |
| THE ALFRED & ADELE DAVIS ACADEMY 8105 ROBERTS DRIVE ATLANTA, GA 30350 | 58-1970181 | 501(C)(3) | 108,000. | .0 | | | DONATIONS |
| THE WILLIAM BREMAN JEWISH HERITAGE MUSEUM - 1440 SPRING STREET NW - ATLANTA, GA 30309 | 02-0541872 | 501(C)(3) | 104,645. | .0 | | | DONATIONS |
| CAMP JUDAEA 1440 SPRING STREET NW ATLANTA, GA 30309 | 58-6014651 | 501(C)(3) | 103,511. | 0. | | | DONATIONS |
| AMERICAN FRIENDS OF MAGEN DAVID ADOM (AFMDA)-SE REGION - 3300 PGA BLVD, SUITE 970 - PALM BEACH GARDENS, FL 33410-2888 | 13-1790719 | 501(C)(3) | 103,000. | 0. | | | DONATIONS |
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Page 1 (h) Purpose of grant or assistance DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS 58-1021791 (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 0 0 0 0 0 o 0 Ö (e) Amount of non-cash assistance 89,246 87,975 87,260. (d) Amount of cash grant 96,338 91,588 85,080 84,389 82,000 (c) IRC section if applicable 58-2475208 | 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 47-1260411 13-3633501 58-1822788 13-3156445 13-2887439 11 - 352590058-0610059 (p) EIN ANTI-DEFAMATION LEAGUE-SE REGIONAL FORCES - 5555 GLENRIDGE CONNECTOR. THE WILLIAM BREMAN JEWISH HOME FRIENDS OF THE ISRAEL DEFENSE SUITE 200 - ATLANTA, GA 30342 3490 PIEDMONT ROAD, SUITE 610 ATLANTA TEMIMA HIGH SCHOOL FOR GIRLS MORDICHAI - 2 BELVEDERE LANE ATLANTA JEWISH FILM FESTIVAL (a) Name and address of organization or government MUCOLIPIDOSIS IV FOUNDATION AMERICAN FRIENDS OF YIKAR 3150 HOWELL MILL ROAD NW 5065 HIGHPOINT ROAD NE ATLANTA, GA 30342-2312 1440 SPRING STREET NW NJ 08701 ATLANTA, GA 30305 ATLANTA, GA 30327 ATLANTA, GA 30309 1839 LAVISTA ROAD ATLANTA, GA 30329 ATLANTA, GA 30374 CHABAD OF GEORGIA Schedule I (Form 990) P.O. BOX 746371 LAKEWOOD,

Schedule I (Form 990)

DONATIONS

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78,198.

501(C)(3)

58-1339998

1580 SPALDING DRIVE

TEMPLE EMANU-EL

ATLANTA, GA 30350

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Schedule I (Form 990)

DONATIONS

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63,000.

501(C)(3)

13-3880269

NEW YORK, NY 10279

DONATIONS

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65,730

501(C)(3)

58-0632076

THE MUSICIAN'S AID SOCIETY OF NEW YORK - 233 BROADWAY, SUITE 2208 -

CONGREGATION SHEARITH ISRAEL

1180 UNIVERSITY DR NE

ATLANTA, GA 30306

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Page 1 (h) Purpose of grant or assistance DONATIONS DONATIONS 58-1021791 (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 0 0 (e) Amount of non-cash assistance (d) Amount of cash grant 62,577 62,360 (c) IRC section if applicable 58-1754983 | 501(C)(3) 501(C)(3) 27-5126671 (p) EIN ONE NORTHFIELD PLAZA, SUITE 300 SPORT CENTER FOR THE DISABLED -AMERICAN FRIENDS OF THE ISRAEL ATLANTA (a) Name and address of organization or government NORTHFIELD, IL 60093 TEMPLE BETH TIKVAH ROSWELL, GA 30075 Schedule I (Form 990) WOODWARD ACADEMY 9955 COLEMAN RD

DONATIONS

0

60,300

501(C)(3)

58-0625584

ADVANCEMENT OFFICE, 1662 RUGBY

AVENUE - COLLEGE PARK, GA

30337-2199

DONATIONS

0

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501(C)(3)

13-1624241

229 PEACHTREE STREET, SUITE 2350

ATLANTA, GA 30303

UNITED NEGRO COLLEGE FUND

THE ROHR JEWISH LEARNING CENTER

LAKESIDE PRESBYTERIAN CHURCH

BROOKLYN, NY 11213

822 EASTERN PKWY

DONATIONS

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43-2090061

DONATIONS

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DONATIONS

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75-3018448

DONATIONS

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51,600

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JEWISH FEDERATION OF GREATER LOS

ANGELES - P.O. BOX 54269 - LOS

ANGELES, CA 90054-0269

932241 04-01-19

FUND - 276 5TH AVENUE, ROOM 703

NEW YORK, NY 10001

NAACP-LEGAL DEFENSE & EDUCATION

1458 CHURCH STREET, SUITE F

DECATUR, GA 30030

GEORGIA INNOCENCE PROJECT

LAKESIDE PARK, KY 41017

2690 DIXIE HIGHWAY

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Schedule I (Form 990)

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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part III.) | Assistance to Go | vernments and Organ | nizations in the Ur | nited States (Sche | dule I (Form 990), Par | T II.) | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| PCOM FOUNDATION 4180 CITY AVENUE PHILADELPHIA, PA 19004 | 22-2691757 | 501(C)(3) | .000,000 | 0. | | | DONATIONS |
| NEW GATE TO PEACE FOUNDATION P.O. BOX 743210 ATLANTA, GA 30384-3210 | 55-0907295 | 501(C)(3) | 50,000. | .0 | | | DONATIONS |
| FRIENDSHIP CIRCLE OF ATLANTA 5065 HIGH POINT ROAD ATLANTA, GA 30342 | 46-0853202 | 501(C)(3) | 48,440. | .0 | | | DONATIONS |
| JEWISH INTEREST FREE LOAN OF ATLANTA INC 5115 NEW PEACHTREE ROAD - CHAMBLEE, GA 30341 | 27-3711475 | 501(C)(3) | 44,790. | .0 | | | DONATIONS |
| ORT AMERICA 3495 PIEDMONT RD NE, BLDG 12, STE ATLANTA, GA 30305 | 13-5562424 | 501(C)(3) | 44,380. | .0 | | | DONATIONS |
| SALVATION ARMY METRO ATLANTA 1000 CENTER PLACE NW NORCROSS, GA 30093 | 28-0660606 | 501(C)(3) | 41,650. | .0 | | | DONATIONS |
| GEORGIA STATE UNIVERSITY FOUNDATION INC 1 PARK PLACE, SUITE 533 - ATLANTA, GA 30303 | 58-6033185 | 501(C)(3) | 41,000. | .0 | | | DONATIONS |
| GEORGIA TECH FOUNDATION, INC. 177 NORTH AVE NW ATLANTA, GA 30313 | 58-6043294 | 501(C)(3) | 40,600. | .0 | | | DONATIONS |
| GATEWAY CENTER 275 PRYOR STREET SW ATLANTA, GA 30303 | 26-1193832 | 501(C)(3) | 40,000. | .0 | | | DONATIONS |
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932241 04-01-19

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| (a) Name and address of (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) assistance (book, FMV, assistance appraisal, other) | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|----------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ONE TABLE 79 MADISON AVENUE, 8TH FLOOR NEW YORK, NY 10016 | 46-4715368 | 501(C)(3) | 40,000. | 0 | | | DONATIONS |
| LEUKEMIA & LYMPHOMA SOCIETY, GEORGIA CHAPTER - 2859 PACES FERRY ROAD SE, SUITE 725 - ATLANTA, GA 30339 | 13-5644916 | 501(C)(3) | 38,750. | 0. | | | DONATIONS |
| CROHN'S & COLITIS FOUNDATION 2751 BUFORD HIGHWAY, SUITE 780 ATLANTA, GA 30324 | 13-6193105 | 501(C)(3) | 37,900. | 0. | | | DONATIONS |
| BATYA-FRIENDS OF UNITED HATZALAH INC 208 EAST 51ST STREET - NEW YORK, NY 10022 | 11-3533002 | 501(C)(3) | 37,380. | .0 | | | DONATIONS |
| PIEDMONT HEALTHCARE FOUNDATION, INC 2001 PEACHTREE ROAD NE, SUITE 400 - ATLANTA, GA 30309 | 58-1272768 | 501(C)(3) | 36,500. | .0 | | | DONATIONS |
| CONGREGATION OR VESHALOM 1681 N. DRUID HILLS RD. NE ATLANTA, GA 30319-4155 | 58-0899565 | 501(C)(3) | 36,170. | .0 | | | DONATIONS |
| UNIVERSITY OF TEXAS AT AUSTIN P.O. BOX 7458 AUSTIN, TX 78713-7458 | 74-1587488 | 501(C)(3) | 36,000. | .0 | | | DONATIONS |
| PLANNED PARENTHOOD SOUTHEAST 241 PEACHTREE STREET NE, SUITE 400 ATLANTA, GA 30303 | 58-6045874 | 501(C)(3) | 35,580. | .0 | | | DONATIONS |
| PAIDEIA SCHOOL 1509 PONCE DE LEON AVE ATLANTA, GA 30307 | 23-7089522 | 501(C)(3) | 35,050. | .0 | | | DONATIONS |
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| (a) Name and address of cash grant or government (b) EIN (c) IRC section (d) Amount of rash grant or government (f) Method of (f | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
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| AMERICAN DERMATOLOGICAL ASSOCIATION, INC P.O. BOX 551301 - DAVIE, FL 33355 | 13-6158870 | 501(C)(3) | .000. | .0 | | | DONATIONS |
| KOLLEL NER HAMIZRACH 1858 LAVISTA ROAD NE ATLANTA, GA 30329 | 46-5265334 | 501(C)(3) | 32,854. | .0 | | | DONATIONS |
| AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE - 220 EAST 42ND STREET, #400 - NEW YORK, NY 10017 | 13-1656634 | 501(C)(3) | 32,617. | .0 | | | DONATIONS |
| WEINSTEIN HOSPICE 3150 HOWELL MILL ROAD NW ATLANTA, GA 30327-2108 | 58-2483753 | 501(C)(3) | 31,996. | .0 | | | DONATIONS |
| FOUNDATION FOR JEWISH CAMP 253 W. 35TH STREET, 4TH FLOOR NEW YORK, NY 10001 | 22-3551013 | 501(C)(3) | 31,050. | .0 | | | DONATIONS |
| INDIANA UNIVERSITY FOUNDATION P.O. BOX 500 BLOOMINGTON, IN 47402 | 35-6018940 | 501(C)(3) | 30,000. | .0 | | | DONATIONS |
| URBAN LEAGUE GREATER ATLANTA 229 PEACHTREE STREE NE #300 ATLANTA, GA 30303 | 58-2593386 | 501(C)(3) | 30,000. | .0 | | | DONATIONS |
| CONGREGATION BETH SHALOM 5303 WINTERS CHAPEL ROAD ATLANTA, GA 30360 | 58-6134936 | 501(C)(3) | 29,639. | .0 | | | DONATIONS |
| CONGREGATION BETH TEFILLAH 5065 HIGH POINT RD NE ATLANTA, GA 30342 | 58-2219431 | 501(C)(3) | 29,192. | .0 | | | DONATIONS |
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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | nizations in the Ur | nited States (Sche | dule I (Form 990), Par | t II.) | |
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| THE ATLANTA OPERA INC. 1575 NORTHSIDE DR, NW ATLANTA, GA 30318 | 58-1371843 | 501(C)(3) | 28,750. | 0. | | | DONATIONS |
| CHABAD OF COBB 4450 LOWER ROSWELL RD MARIETTA, GA 30068 | 58-2503948 | 501(C)(3) | 27,141. | 0. | | | DONATIONS |
| URBAN YOUTH HARP ENSEMBLE INC. 3259 BRIARWOOD BLVD. EAST POINT, GA 30344 | 52-2440625 | 501(C)(3) | 27,000. | 0. | | | DONATIONS |
| HADASSAH - ATLANTA 1050 CROWN POINTE PARKWAY DUNWOODY, GA 30338 | 58-6032056 | 501(C)(3) | 26,676. | 0. | | | DONATIONS |
| ATLANTA VOLUNTEER LAWYERS FOUNDATION - 235 PEACHTREE STREET, NE - ATLANTA, GA 30303 | 58-1364400 | 501(C)(3) | 26,450. | 0. | | | DONATIONS |
| CURE CHILDHOOD CANCER, INC. 200 ASHFORD CENTER NORTH, STE 250 ATLANTA, GA 30338 | 58-1244138 | 501(C)(3) | 26,280. | 0, | | | DONATIONS |
| COMMUNITY ASSISTANCE CENTER 1130 HIGHTOWER TRAIL SANDY SPRINGS, GA 30350 | 58-1825565 | 501(C)(3) | 26,250. | 0. | | | DONATIONS |
| ALLIANCE THEATRE 1280 PEACHTREE ST NE ATLANTA, GA 30309 | 58-2627786 | 501(C)(3) | 25,700. | 0. | | | DONATIONS |
| ISRAELI AMERICAN COUNCIL 5900 CANOGA AVENUE, SUITE 390 WOODLAND HILLS, CA 91367 | 22-3951652 | 501(C)(3) | 25,360. | 0. | | | DONATIONS |
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| GEORGIA AQUARIUM 225 BAKER ST ATLANTA, GA 30313 | 58-2574918 | 501(C)(3) | . 25,100. | 0. | | | DONATIONS |
| OUR DAILY BREAD SOUP KITCHEN & SOCIAL CENTER - 1730 RACE STREET - CINCINNATI, OH 45202 | 31-1126386 | 501(C)(3) | 25,000. | .0 | | | DONATIONS |
| NEW STORY INC. 182 HOWARD STREET, #101 SAN FRANCISCO, CA 94105 | 47-2529408 | 501(C)(3) | .000, | .0 | | | DONATIONS |
| SPECIAL OPERATIONS FUND 901 N. STUART STREET, SUITE 1200 ARLINGTON, VA 22203 | 52-1765222 | 501(C)(3) | 25,000. | .0 | | | DONATIONS |
| UNITED WAY OF GREATER ATLANTA 40 COURTLAND ST NE ATLANTA, GA 30303-3026 | 58-0566194 | 501(C)(3) | 24,500. | .0 | | | DONATIONS |
| AMERICAN SUPPORT FOR ISRAEL 1732 1ST AVENUE #27091 NEW YORK, NY 10128 | 26-3383926 | 501(C)(3) | 24,000. | .0 | | | DONATIONS |
| AMERICAN FRIENDS OF YESHIVAS TORAS MOSHE - 1412 EAST 7TH STREET - BROOKLYN, NY 11230 | 11-3069714 | 501(C)(3) | 23,800. | 0. | | | DONATIONS |
| YAD L' YAD CHARITY FUND INC. 2897 N. DRUID HILLS ROAD ATLANTA, GA 30329 | 20-8280567 | 501(C)(3) | 23,080. | .0 | | | DONATIONS |
| FEEDING THE VALLEY, INC. P.O. BOX 8904 COLUMBUS, GA 31908 | 58-1498131 | 501(C)(3) | . 22,000. | .0 | | | DONATIONS |
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| IAN'S FRIENDS FOUNDATION 855 MARSEILLES DRIVE ATLANTA, GA 30327 | 56-2571902 | 501(C)(3) | 21,618. | 0, | | | DONATIONS |
| ONWARD ISRAEL USA 633 3RD AVENUE, 21ST FLOOR NEW YORK, NY 10017 | 81-2507413 | 501(C)(3) | 21,600. | 0. | | | DONATIONS |
| ATLANTA JEWISH MUSIC FESTIVAL INC. 1440 SPRING STREET NW ATLANTA, GA 30309 | 37-1689385 | 501(C)(3) | 20,440. | 0, | | | DONATIONS |
| NORTHWESTERN UNIVERSITY 1201 DAVIS STREET EVANSTON, IL 60208 | 36-2167817 | 501(C)(3) | 20,280. | 0, | | | DONATIONS |
| MOISHE HOUSE 5802 MONROE ROAD CHARLOTTE, NC 28212 | 26-2599786 | 501(C)(3) | 20,180. | 0. | | | DONATIONS |
| 18 DOORS 90 OAK STREET NEWTON UPPER FALLS, MA 02464 | 04-3577816 | 501(C)(3) | .000,02 | 0. | | | DONATIONS |
| LILITH PUBLICATIONS, INC. 119 WEST 57 STREET, SUITE 1210 NEW YORK, NY 10019 | 13-2794121 | 501(C)(3) | 20,000. | 0, | | | DONATIONS |
| FLUXX PRODUCTIONS 236 EAST WAVERLY STREET TUSCON, AZ 85705 | 27-1747905 | 501(C)(3) | 20,000. | 0. | | | DONATIONS |
| SCHWAB CHARITABLE FUND P.O. BOX 628298 ORLANDO, FL 32862 | 31-1640316 | 501(C)(3) | 20,000. | 0 | | | DONATIONS |
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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part III, | Assistance to Go | vernments and Organ | izations in the Ur | ited States (Scne | dule I (Form 990), Par | t II.) | |
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| MISSION DHARMA 47 GEORGE LANE | | | | • | | | |
| SAUSALITO, CA 94965 | 81-2730226 | 501(C)(3) | .000,02 | 0.0 | | | DONATLONS |
| INCUBATOR FOR EMERGING JEWISH INITIATIVES - 8401 CONNECTICUT AVEMIE, STE 1260 - CHEVY CHASE, MD 20815 | 83-1432599 | 501(C)(3) | .000,02 | 0. | | | DONATIONS |
| TUCSON HEBREW ACADEMY 3888 E. RIVER ROAD TUCSON, AZ 85718 | 86-0274412 | 501(C)(3) | .000,02 | 0. | | | DONATIONS |
| TEMPLE ISRAEL 477 LONGWOOD AVENUE BOSTON, MA 02215-5396 | 94-6077724 | 501(C)(3) | 20,000. | 0. | | | DONATIONS |
| UNIVERSITY OF PENNSYLVANIA 2929 WALNUT STREET, SUITE 300 PHILADELPHIA, PA 19104-5099 | 23-1352685 | 501(C)(3) | 19,450. | 0. | | | DONATIONS |
| JEWISH KIDS GROUP 1440 SPRING STREET NW ATLANTA, GA 30309 | 08-2785628 | 501(C)(3) | .088,41 | .0 | | | DONATIONS |
| EMORY UNIVERSITY 1762 CLIFTON ROAD NE, STE #1400 ATLANTA, GA 30322-4001 | 58-0566256 | 501(C)(3) | 18,888. | .0 | | | DONATIONS |
| JEWISH CHILDREN'S REGIONAL SERVICE 3500 N. CAUSEWAY BLVD. SUITE 1120 MATAIRIE, LA 70002 | 72-0408936 | 501(C)(3) | 18,500. | .0 | | | DONATIONS |
| THE HARPETH HALL SCHOOL 3801 HOBBS ROAD NASHVILLE, TN 37215 | 62-0501916 | 501(C)(3) | 18,200. | .0 | | | DONATIONS |
| | | | | | | | Schedule I (Form 990) |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| JEWISH UNITY INTERNATIONAL, INC. 1428 HOLLY LANE | 26-3813073 | 501(0)(3) | α, | c | | | ONATIONS |
| MTY 8 92 GA 3 | 58-2642722 | 501(C)(3) | 18,000. | . 0 | | | DONATIONS |
| MOUNT SINAI MEDICAL CENTER FOUNDATION - 4300 ALTON ROAD - MIAMI BEACH, FL 33140 | 59-1711400 | 501(C)(3) | 18,000. | .0 | | | DONATIONS |
| AKIVA SCHOOL 809 PERCY WARNER BLVD. NASHVILLE, TN 37205 | 62-0694534 | 501(C)(3) | 18,000. | 0 | | | DONATIONS |
| JORDAN THOMAS FOUNDATION, INC. 9005 OVERLOOK BLVD., #742 BRENTWOOD, TN 37027 | 20-3498598 | 501(C)(3) | 17,500. | 0 | | | DONATIONS |
| SOUTHERN JEWISH RESOURCE NETWORK INC SOJOURN - 1530 DEKALB AVE - ATLANTA, GA 30307 | 46-3383825 | 501(C)(3) | 17,443. | 0. | | | DONATIONS |
| J STREET EDUCATION FUND P.O. BOX 66073 WASHINGTON, DC 20035 | 20-2777557 | 501(C)(3) | .008,11 | .0 | | | DONATIONS |
| THE GALLOWAY SCHOOL 215 W WIEUCA RD NW ATLANTA, GA 30342 | 58-1052217 | 501(C)(3) | 16,650. | 0. | | | DONATIONS |
| NEW ISRAEL FUND - NATIONAL 6 EAST 39TH STREET, SUITE 301 NEW YORK, NY 10016 | 94-2607722 | 501(C)(3) | 16,480. | .0 | | _ | DONATIONS |
| | | | | | | | Schedule I (Form 990) |

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| JEWISH FEDEKATION OF GREATER Schedule I (Form 990) ATLANTA, INC. | LION OF GREAT | , r | | | | 25 | 58-1021791 Page 1 |
|---|------------------|----------------------------------|-----------------------------|---|--|--|---------------------------------------|
| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Orga | nizations in the U | nited States (Sche | dule I (Form 990), Pa | rt II.) | |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| BROWN UNIVERSITY P.O. BOX 1877 PROVIDENCE, RI 02912-1877 | 05-0258809 | 501(C)(3) | 16,450. | 0. | | | DONATIONS |
| CENTER FOR THE VISUALLY IMPAIRED 739 W. PEACHTREE STREET NW ATLANTA, GA 30308-1137 | 58-1168874 | 501(C)(3) | 16,000. | .0 | | | DONATIONS |
| CONGREGATION NER HAMIZRACH 1858 LAVISTA RD NE ATLANTA, GA 30329 | 58-1799365 | 501(C)(3) | 15,800. | .0 | | | DONATIONS |
| FJC 520 EIGHTH AVENUE, 20TH FLOOR NEW YORK, NY 10018 | 13-3848582 | 501(C)(3) | 15,500. | .0 | | | DONATIONS |
| HORIZON THEATRE COMPANY, INC. P.O. BOX 5376 ATLANTA, GA 31107 | 58-1576913 | 501(C)(3) | 15,500. | .0 | | | DONATIONS |
| CHABAD INTOWN 730 PONCE DE LEON PLACE NE ATLANTA, GA 30306-4287 | 58-2451913 | 501(C)(3) | 15,460. | .0 | | | DONATIONS |
| ZALIK FOUNDATION FUND 915 CLIFTON AVENUE, SUITE 4 CLIFTON, NJ 07013 | 13-3548993 | 501(C)(3) | 15,000. | .0 | | | DONATIONS |
| FLAGLER COLLEGE P.O. BOX 1027 ST. AUGUSTINE, FL 32085-1027 | 54-0224117 | 501(C)(3) | 15,000. | .0 | | | DONATIONS |
| CHARLOTTE COUNTRY DAY SCHOOL 1440 CARMEL ROAD CHARLOTTE, NC 28226 | 56-0623935 | 501(C)(3) | 15,000. | .0 | | | DONATIONS |
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Schedule I (Form 990)

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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Orgar | izations in the Ur | nited States (Sche | dule I (Form 990), Pari | t II.) | |
|---|------------------|----------------------------------|--------------------------|-----------------------------------|---|---|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| CAMP TWIN LAKES 1100 SPRING STREET NW, SUITE 406 ATLANTA, GA 30309 | 58-1826782 | 501(C)(3) | 14,070. | 0. | | | DONATIONS |
| MOVING TRADITIONS 8380 OLD YORK ROAD, SUITE 4300 ELKINS PARK, PA 19027 | 34-2015014 | 501(C)(3) | 14,000. | .0 | | | DONATIONS |
| JEWISH COMMUNITY RELATIONS COUNCIL OF ATLANTA, INC 1440 SPRING STREET NW - ATLANTA, GA 30309 | 27-1545032 | 501(C)(3) | 13,596. | .0 | | | DONATIONS |
| HONEYMOON ISRAEL FOUNDATION, INC. 1417 MAYSON STREET NE ATLANTA, GA 30324 | 47-1291052 | 501(C)(3) | 13,084. | 0. | | | DONATIONS |
| CHABAD OF ATHENS -UGA 1491 SOUTH LUMPKIN STREET ATHENS, GA 30605 | 87-0760911 | 501(C)(3) | 12,860. | .0 | | | DONATIONS |
| TULANE UNIVERSITY 6823 SAINT CHARLES AVE NEW ORLEANS, LA 70118 | 72-0423889 | 501(C)(3) | 12,635. | 0. | | | DONATIONS |
| GESHER SCHOOL 4800 MATTIE MOORE COURT FAIRFAX, VA 22030 | 54-1201968 | 501(C)(3) | 12,500. | .0 | | | DONATIONS |
| SINAI TEMPLE 10400 WILSHIRE BLVD. LOS ANGELES, CA 90024 | 95-2103898 | 501(C)(3) | 12,195. | .0 | | | DONATIONS |
| CENTER FOR CIVIL AND HUMAN RIGHTS 250 WILLIAMS STREET, SUITE 2322 ATLANTA, GA 30303 | 26-0813637 | 501(C)(3) | 12,040. | 0. | | | DONATIONS |
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Page 1 (h) Purpose of grant or assistance DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS 58-1021791 (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 0 0 0 0 0 o 0 (e) Amount of non-cash assistance 11,565. (d) Amount of cash grant 12,000 12,000 12,000 11,850 11,425 11,000 (c) IRC section if applicable 11-2720514 | 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 81-4071148 11 - 323577182-1085513 27-0728201 58-2126423 22-1589223 (p) EIN GA ZABAN PARADIES CENTER FOR HOMELESS CONGREGATION SUPPORTERS OF TORAH DISABLED - ONE NORTHFIELD PLAZA STREET NE, 2ND FLOOR - ATLANTA, 8601 DUNWOODY PLACE, SUITE 136 COUPLES, INC. - 1605 PEACHTREE ATLANTA ISRAEL SPORTS CENTER FOR THE CITY SPRINGS THEATRE COMPANY (a) Name and address of organization or government PUBLIC BROADCASTING ATLANTA TEMPLE EMMANUEL OF CLOSTER MOREHEAD-CAIN FOUNDATION SANDY SPRINGS, GA 30350 NORTHFIELD, IL 60093 LAKEWOOD, NJ 08701 FLUSHING, NJ 11367 180 PIERMONT ROAD CLOSTER, NJ 07624 ATLANTA, GA 30324 Schedule I (Form 990) NER AVRAHAM INC. 14112 72 DRIVE 740 BISMARK RD 294 COLES WAY 30309

Schedule I (Form 990)

DONATIONS

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11,000

501(C)(3)

58-0566133

DONATIONS

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11,000

501(C)(3)

56-0599225

OFFICE OF UNIVERSITY DEVELOPEMENT

CHAPEL HILL, NC 27514-0690

227 MARTHA BERRY HWY NW MOUNT BERRY, GA 30149

BERRY COLLEGE

52

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| Schedule I (Form 990) ATLANTA, INC. | ION OF GREATER | Y. | | | | 58 | 58-1021791 Page 1 |
|---|------------------|----------------------------------|-----------------------------|---|--|---|---------------------------------------|
| Part II Continuation of Grants and Other Assistance to Governments and | Assistance to Go | vernments and Organ | nizations in the U | nited States (Sche | d Organizations in the United States (Schedule I (Form 990), Part II.) | τ II.) | |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| JACK AND JILL LATE STAGE CANCER FOUNDATION - 75 REMITTANCE DRIVE - CHICAGO, IL 60675-2065 | 20-4415512 | 501(C)(3) | 10,680. | .0 | | | DONATIONS |
| AUGUSTA JEWISH MUSEUM, INC. P.O. BOX 14279 AUGUSTA, GA 30909 | 47-4044432 | 501(C)(3) | 10,500. | 0 | | | DONATIONS |
| HAROLD GRINSPOON FOUNDATION 67 HUNT STREET, SUITE 100 AGAWAM, MA 01001 | 04-6685725 | 501(C)(3) | 10,100. | 0. | | | DONATIONS |
| CAMP COLEMAN 1580 SPALDING DR ATLANTA, GA 30350 | 13-1663143 | 501(C)(3) | 10,000. | 0. | | | DONATIONS |
| AMERICAN SOCIETY UNIVERSITY OF HAIFA - 80 BROAD STREET, SUITE 2102 - NEW YORK, NY 10004 | 16-6220819 | 501(C)(3) | 10,000. | 0. | | | DONATIONS |
| THE GLOBAL VILLAGE PROJECT, INC. P.O. BOX 1548 DECATUR, GA 30031 | 26-4152199 | 501(C)(3) | 10,000. | .0 | | | DONATIONS |
| BROADWAY DREAMS FOUNDATION CORPORATION - 641 SPRING STREET SE - GAINESVILLE, GA 30501 | 26-4771520 | 501(C)(3) | 10,000. | 0. | | | DONATIONS |
| DYNAMIC ART CONCEPTS P.O. BOX 44207 TUCSON, AZ 85733 | 27-0177826 | 501(C)(3) | 10,000. | 0. | | | DONATIONS |
| EARTH UNIVERSITY FOUNDATION 3525 PIEDMONT ROAD NE ATLANTA, GA 30305 | 38-2920639 | 501(C)(3) | 10,000. | 0 | | | DONATIONS |

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Page 1 (h) Purpose of grant or assistance DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS 58-1021791 (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 0 0 0 0 0 o 0 (e) Amount of non-cash assistance (d) Amount of cash grant 10,000 10,000 10,000 10,000 10,000 10,000 10,000 (c) IRC section if applicable 47-3171603 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 51-0172429 52-1218336 52-1271179 52-7082731 58-1348544 56-2093546 (p) EIN - 1030 15TH STREET N.W., THE BASCOM CENTER FOR VISUAL ARTS PEOPLE FOR THE ETHICAL TREATMENT BUSINESS EXECUTIVES FOR NATIONAL STE 200E - WASHINGTON, DC 20005 PERIMETER CHURCH OF JOHNS CREEK THE HOME OF THE INNOCENTS, INC. FLOOR 29 - NEW YORK, NY 10036 FUNDING TRUST - 1585 BROADWAY OF ANIMALS, INC. - 501 FRONT MORGAN STANLEY GLOBAL IMPACT (a) Name and address of organization or government STREET - NORFALK, VA 23510 UJA FEDERATION OF NEW YORK 9500 MEDLOCK BRIDGE ROAD GA 30097 TUCSON, AZ 85702-1809 TUCSON JAZZ FESTIVAL 130 EAST 59TH STREET HIGHLANDS, NC 28741 NEW YORK, NY 10022 Schedule I (Form 990) 323 FRANKLIN RD. P.O. BOX 1809 JOHNS CREEK, SECURITY

Schedule I (Form 990)

DONATIONS

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10,000

501(C)(3)

83-2491554

INTERNATIONAL - 9825 SE TOWER

VISITING VETERINARIANS

DRIVE - DAMASCUS, OR 97089

DONATIONS

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10,000

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61 - 0445834

1100 EAST MARKET STREET

LOUISVILLE, KY 40206

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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | nizations in the U | nited States (Sche | dule I (Form 990), Par | t II.) | |
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| ARSHA KULAM P.O. BOX 772 COTATI, CA 94931 | 95-3794405 | 501(C)(3) | 10,000. | 0. | | | DONATIONS |
| THE CENTRAL FUND OF ISRAEL 461 CENTRAL AVENUE CEDARHURST, NY 11516 | 13-2992985 | 501(C)(3) | .006,6 | 0. | | | DONATIONS |
| LIMMUD ATLANTA - SOUTHEAST 1440 SPRING ST NW ATLANTA, GA 30309 | 30-0012588 | 501(C)(3) | .088,6 | .0 | | | DONATIONS |
| SHEPHERD SPINAL CENTER FOUNDATION 2020 PEACHTREE RD. NW ATLANTA, GA 30309 | 20-1238224 | 501(C)(3) | 9,700. | .0 | | | DONATIONS |
| CHRIS180, INC. 1030 FAYETTVILLE ROAD ATLANTA, GA 30316 | 58-1430183 | 501(C)(3) | 9,540. | .0 | | | DONATIONS |
| TUFTS UNIVERSITY - SCHOOL OF ARTS & SCIENCE - 80 GEORGE STREET - MEDFORD, MA 02155 | 04-2103634 | 501(C)(3) | 9,500. | .0 | | | DONATIONS |
| FRIENDS OF ELNET 641 LEXINGTON AVENUE, 20TH FLOOR NEW YORK, NY 10022 | 45-2212393 | 501(C)(3) | 9,500. | .0 | | | DONATIONS |
| YESHIVAT MAHARAT INC. 3700 HENRY HUDSON PARKWAY BRONX, NY 10463 | 01-0954142 | 501(C)(3) | 9,200. | .0 | | | DONATIONS |
| THE ATLANTA WOMEN'S FOUNDATION 3355 LENOX ROAD NE #850 ATLANTA, GA 30326 | 58-2389721 | 501(C)(3) | 9,150. | 0. | | | DONATIONS |
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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | Uizations in the Ui | nited States (Sche | dule I (Form 990), Par | t II.) | |
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| JEWISH SOCIAL RESPONSE 2005 MARBLE GORGE DRIVE LAS VEGAS, NV 87117 | 46-4634663 | 501(C)(3) | 9,100. | 0. | | | DONATIONS |
| THE BLUE DOVE FOUNDATION 1200 ASHWOOD PARKWAY, UNIT 400 DUNWOODY, GA 30338 | 82-4010231 | 501(C)(3) | 8,800. | 0. | | | DONATIONS |
| THE CHASTAIN PARK CONSERVANCY 4001 POWERS FERRY RD. ATLANTA, GA 30342 | 81-0631219 | 501(C)(3) | 8,750. | .0 | | | DONATIONS |
| ORANGETOWN JEWISH CENTER 8 INDEPENDENCE AVENUE ORANGEBURG, NY 10962 | 13-6122898 | 501(C)(3) | 8,560. | 0. | | | DONATIONS |
| HEBREW IMMIGRANT AID SOCIETY (HIAS) - 1300 SPRING STREET, SUITE 500 - SILVER SPRING, MD 20910 | 52-1332694 | 501(C)(3) | 8,525. | 0. | | | DONATIONS |
| CONGREGATION BET HAVERIM 2074 LAVISTA ROAD ATLANTA, GA 30329 | 58-1648354 | 501(C)(3) | 8,520. | 0 | | | DONATIONS |
| TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - OFFICE OF ADVANCEMENT - PHILADELPHIA, PA 19104-3284 | 23-1352685 | 501(C)(3) | .002,8 | 0. | | | DONATIONS |
| HOPE THRU SOAP, INC. 2650 PLEASANTDALE ROAD, SUITE 15 ATLANTA, GA 30340 | 82-1679787 | 501(C)(3) | .002,8 | 0. | | | DONATIONS |
| CHABAD OF NORTH FULTON 10180 JONES BRIDGE ROAD ALPHARETTA, GA 30022 | 58-2642392 | 501(C)(3) | 8,475. | 0. | | | DONATIONS |
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Page 1 (h) Purpose of grant or assistance DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS 58-1021791 (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 0 0 0 0 0 o 0 (e) Amount of non-cash assistance 8,100. 8,000 (d) Amount of cash grant 8,350 8,200 8,200 8,200 8,000 (c) IRC section if applicable 46-2176788 | 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 23-7069236 58-2106707 81-3352483 01-0599278 13-1659707 27-3521132 (p) EIN 600 PEACHTREE STREET NE, SUITE 100 COLLEGE OF CHARLESTON FOUNDATION EDUCATION FOUNDATION - P.O. BOX JUDAISM - 120 BROADWAY, SUITE SUITE 100 UNITED SYNAGOGUE CONSERVATIVE (a) Name and address of organization or government 49066 - ATLANTA, GA 30359 DRESDEN ELEMENTARY SCHOOL WASHINGTON, DC 20009-4808 1540 - NEW YORK, NY 10271 LIFELINE ANIMAL PROJECT 1342 FLORIDA AVENUE NW WORLD CENTRAL KITCHEN 513 EDGEWOOD AVENUE, CHARLESTON, SC 29424 96 WENTWORTH STREET THE GIVING KITCHEN ATLANTA, GA 30308 ATLANTA, GA 30333 ATLANTA, GA 30312 Schedule I (Form 990) P.O. BOX 15466 CDC FOUNDATION

Schedule I (Form 990)

DONATIONS

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7,850.

501(C)(3)

62-0646012

HOSPITAL - 262 DANNY THOMAS PLACE

TN 38105

- MEMPHIS,

ST. JUDE CHILDREN'S RESEARCH

YMCA CAMP THUNDERBIRD

LAKE WYLIE, SC 29710

1 THUNDERBIRD LANE

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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | lizations in the Ur | iited States (Sche | idule I (Form 990), Par | t II.) | |
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| ALPHA EPSILON PI FOUNDATION 8815 WESLEYAN RD INDIANAPOLIS, IN 46268-1171 | 13-6141078 | 501(C)(3) | 7,600. | 0. | | | DONATIONS |
| APOLLO THEATER FOUNDATION, INC. 253 WEST 125TH STREET NEW YORK, NY 10027 | 13-3630066 | 501(C)(3) | 7,500. | 0, | | | DONATIONS |
| ATLANTA HUMANE SOCIETY 981 HOWELL MILL RD NW ATLANTA, GA 30318 | 58-0685900 | 501(C)(3) | 7,500. | 0, | | | DONATIONS |
| ATLANTA LYRIC THEATRE 12 POWDER SPRINGS STREET, STE 280 MARIETTA, GA 30064 | 58-1428049 | 501(C)(3) | 7,500. | 0 | | | DONATIONS |
| AMERICAN ISRAEL CHAMBER OF COMMERCE & INDUSTRY-SE - 400 NORTHRIDGE ROAD, SUITE 250 - ATLANTA, GA 30350 | 58-1975268 | 501(C)(3) | 7,500. | 0. | | | DONATIONS |
| SECOND HELPINGS ATLANTA P.O. BOX 720582 ATLANTA, GA 30358 | 45-3631347 | 501(C)(3) | 7,350. | 0, | | | DONATIONS |
| ALZHEIMER'S ASSOCIATION OF GEORGIA CHAPTER - 41 PERIMETER CENTER EAST - ATLANTA, GA 30346 | 58-1492046 | 501(C)(3) | 7,250. | 0, | | | DONATIONS |
| INTERNATIONAL RESCUE COMMITTEE 2305 PARKLAKE DRIVE, SUITE 100 ATLANTA, GA 30345 | 13-5660870 | 501(C)(3) | 7,180. | 0. | | | DONATIONS |
| THE LINK COUNSELING CENTER 348 MT VERNON HWY NE ATLANTA, GA 30328 | 58-1109087 | 501(C)(3) | 7,100. | 0. | | | DONATIONS |
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Page 1 (h) Purpose of grant or assistance DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS DONATIONS 58-1021791 (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 0 0 0 0 0 o 0 (e) Amount of non-cash assistance 6,693. 7,000. 9,600 (d) Amount of cash grant 7,000 6,850 008 9 6,650 (c) IRC section if applicable 46-5368055 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 23-1907729 58-0568691 27-3027238 58-1486046 58-0960309 58-0958208 (p) EIN FOUNDATION - 3525 PIEDMONT RD NE HEBREW ORDER OF DAVID FOUNDATION INC. - 300 NELL COURT - ATLANTA, JOHNNY MAC SOLDIERS FUND, INC. ATLANTA (a) Name and address of organization or government JUVENILE DIABETES RESEARCH ATLANTA LEGAL AID SOCIETY MEALS ON WHEELS ATLANTA ATLANTA, GA 30305-7023 TEMPLE KEHILLAT CHAIM BOSTON, MA 02241-9503 1705 COMMERCE DRIVE 54 ELLIS STREET NE 282 MT PARAN RD NW ATLANTA, GA 30303 ROSWELL, GA 30075 ATLANTA, GA 30318 ATLANTA, GA 30327 1145 GREEN STREET Schedule I (Form 990) P.O. BOX 419503 SCHENCK SCHOOL GA 30342

DONATIONS

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6,500.

501(C)(3)

13-3433452

40 RECTOR ST., 16TH FLOOR

NEW YORK, NY 10006

DOCTORS WITHOUT BORDERS

AMERICAN CANCER SOCIETY

250 WILLIAMS STREET

ATLANTA, GA 30303

DONATIONS

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9,580

501(C)(3)

58-0659875

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| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | nizations in the Ur | nited States (Sche | dule I (Form 990), Par T | t II.) | |
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| MARY HALL FREEDOM HOUSE P.O. BOX 501205 ATLANTA, GA 31150 | 58-2238354 | 501(C)(3) | 6,500. | 0. | | | DONATIONS |
| FLORENCE MELTON ADULT MINI-SCHOOL 310 N. HAPP ROAD, SUITE 208 NORTHFIELD, IL 60093 | 01-0725179 | 501(C)(3) | 6,400. | .0 | | | DONATIONS |
| YMCA OF METRO ATLANTA 569 MARTIN LUTHER KING JR. DR NW ATLANTA, GA 30314 | 58-0566253 | 501(C)(3) | 6,350. | 0. | | | DONATIONS |
| HADASSAH P.O. BOX 97153 WASHINGTON, DC 20090-7153 | 13-1656651 | 501(C)(3) | 6,300. | 0. | | | DONATIONS |
| SANDY SPRINGS ARTS FOUNDATION, INC 10 GLENLAKE PKWY, SUITE 130 - SANDY SPRINGS, GA 30328 | 46-1187688 | 501(C)(3) | 6,100. | 0 | | | DONATIONS |
| HISTORIC OAKLAND FOUNDATION 248 OAKLAND AVENUE SE ATLANTA, GA 30312 | 58-1276032 | 501(C)(3) | 6,100. | 0 | | | DONATIONS |
| FOCUS - FRAGILE KIDS 3825 PRESIDENTIAL PARKWAY STE 103 ATLANTA, GA 30340 | 58-1577602 | 501(C)(3) | 6,088. | 0. | | | DONATIONS |
| ZERO - TO END PROSTATE CANCER 515 KING STREET, SUITE 420 ALEXANDRIA, VA 22314 | 59-3400922 | 501(C)(3) | 6,000. | .0 | | | DONATIONS |
| BEREA COLLEGE 101 CHESTNUT STREET BEREA, KY 40404 | 61-0444650 | 501(C)(3) | 6,000. | ,0 | | _ | DONATIONS |
| | | | | | | | Schedule I (Form 990) |

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| OF |
| FEDERATION |
| JEWISH |

| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | nizations in the Ur | nited States (Sche | dule I (Form 990), Par | t II.) | |
|---|------------------|----------------------------------|-----------------------------|---|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (n) Purpose of grant or assistance |
| MD ANDERSON CANCER CENTER 1515 HOLCOMBE BLVD. UNIT 0428 HOUSTON, TX 77030-4009 | 74-6000203 | 501(C)(3) | 6,000. | .0 | | | DONATIONS |
| AMERICAN FRIENDS OF THE ALYN HOSPITAL - 122 E. 42ND ST.SUITE #1519 - NEW YORK, NY 10168 | 13-6100833 | 501(C)(3) | 5,950. | .0 | | | DONATIONS |
| THANK ISRAELI SOLDIERS 5185 MACARTHUR BLVD NW, SUITE 636 WASHINGTON, DC 20016 | 35-2374190 | 501(C)(3) | 5,860. | .0 | | | DONATIONS |
| FRIENDS OF JCC KRAKOW INC. 74 LAFAYETTE AVENUE, SUITE 101 SUFFERN, NY 10901 | 46-5714234 | 501(C)(3) | 5,860. | .0 | | | DONATIONS |
| CHEVRA AHAVAS YISRAEL-CHABAD OF TOCO HILLS - 1280 HOLLY LANE - ATLANTA, GA 30329 | 47-5581383 | 501(C)(3) | 5,800. | .0 | | | DONATIONS |
| CONGREGATION GESHER L'TORAH 4320 KIIMBALL BRIDGE ROAD ALPHARETTA, GA 30022 | 58-2391705 | 501(C)(3) | 5,696. | .0 | | | DONATIONS |
| CONGREGATION BETH YAM 4501 MEETING STREET HILTON HEAD, SC 29926 | 57-0727504 | 501(C)(3) | 5,604. | 0. | | | DONATIONS |
| HEBREW ACADEMY 22 SCHOOL ROAD EAST MARLBORO, NJ 07746 | 22-2278628 | 501(C)(3) | 5,540. | .0 | | | DONATIONS |
| UNIVERSITY OF VIRGINIA LAW SCHOOL FDN 580 MASSIE ROAD - CHARLOTTESVILLE, VA 22907 | 31-1755873 | 501(C)(3) | 5,500. | 0. | | | DONATIONS |
| | | | | | | | Schedule I (Form 990) |

| GREATER |
|------------|
| OF |
| FEDERATION |
| JEWISH |

| (a) Name and address of (b) EIN (c) IRC section organization or government (b) cost, FMV, assistance (book, FMV, assistance (book, FMV, assistance (book, FMV, applicable (c) cost, | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|----------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| LOVETT SCHOOL 4075 PACES FERRY RD NW ATLANTA, GA 30327 | 58-0619038 | 501(C)(3) | 5,500. | 0.0 | | | DONATIONS |
| CHOPIN SOCIETY OF ATLANTA 540 MORTON MILL COURT JOHNS CREEK, GA 30022 | 58-2595252 | 501(C)(3) | 5,500. | 0. | | | DONATIONS |
| PACKAGED GOOD INC. 4243 DUNWOODY CLUB DRIVE, STE 204 DUNWOODY, GA 30350 | 81-1369793 | 501(C)(3) | .002,2 | .0 | | | DONATIONS |
| ATLANTA UNION MISSION P.O. BOX 1807 ATLANTA, GA 30301 | 58-0572430 | 501(C)(3) | 5,460. | 0. | | | DONATIONS |
| MITCHELL'S PLACE 4778 OVERTON ROAD BIRMINGHAM, AL 35210 | 20-1056421 | 501(C)(3) | 5,450. | 0. | | | DONATIONS |
| LITERACY ACTION, INC. 231 PEACHTREE STREET M-100 ATLANTA, GA 30303 | 58-1053728 | 501(C)(3) | 5,350. | 0. | | | DONATIONS |
| FAMILIES AND COMMUNITIES TOGETHER RELIEF - FACT - 2246 ROSWELL ROAD - MARIETTA, GA 30062 | 47-2746306 | 501(C)(3) | 5,200. | •0 | | | DONATIONS |
| UNIVERSITY OF NC AT CHAPEL HILL/ARTS AND SCIENCE FDN 523 EAST FRANKLIN STREET - CHAPEL HILL, NC 27514 | 56-1150509 | 501(C)(3) | 5,120. | .0 | | | DONATIONS |
| | | | | | | | |
| | | | | | | | Schedule I (Form 990) |

932241 04-01-19

JEWISH FEDERATION OF GREATER

Part III

ATLANTA, INC. Schedule I (Form 990) (2019)

Page 2

58-1021791

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance 0 0 0 12,250. 202,710 39,213 (c) Amount of cash grant 35 24 5213 (b) Number of recipients GRANTS TO SUBSIDIZE PARTICIPATION IN PJ LIBRARY ISRAEL EXPERIENCE PROGRAMS FOR QUALIFIED YOUTH GRANTS TO SUBSIDIZE PARTICIPATION IN APPROVED GRANTS TO SUBSIDIZE PARTICIPATION IN JEWISH (a) Type of grant or assistance CAMPING PROGRAMS FOR QUALIFIED YOUTH PROGRAM FOR QUALIFIED YOUTH

LINE 2 PART I, SCHEDULE I, THE GRANTS MADE TO TAX EXEMPT ORGANIZATIONS ARE FOR FURTHERANCE OF

GRANTEE ORGANIZATION'S EXEMPT PURPOSE AND DO NOT REQUIRE FURTHER

GRANTS MADE TO ORGANIZATIONS THAT ARE NOT TAX EXEMPT ARE REVIEW. SUBJECT TO WRITTEN AGREEMENTS WHICH PROVIDE FOR PERIODIC REPORTING AND

SOME INSTANCES, INDEPENDENT PERFORMANCE EVALUATIONS, NI GRANTS TO INDIVIDUALS ARE PAID DIRECTLY TO APPROVED PROGRAM PROVIDERS

AND ARE CONDITIONED ON THE GRANTEE'S PARTICIPATION IN THE PROGRAM.

932102 10-26-19

Schedule I (Form 990) (2019)

Schedule I (Form 990)

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 ATLANTA, INC.

Employer identification number 58-1021791

| Pa | art I Questions Regarding Compensation | | | |
|----|--|----|-----|----|
| | <u> </u> | | Yes | No |
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, | | | |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | |
| | First-class or charter travel 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 | | |
| 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 | | |
| | | | | |
| 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 X Compensation survey or study | | | |
| | X Approval by the board or compensation committee | | | |
| | | | | |
| 4 | During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing | | | |
| | organization or a related organization: | | | |
| а | Receive a severance payment or change-of-control payment? | 4a | | х |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | | Х |
| С | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | Х |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | | |
| | | | | |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | | |
| 5 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the revenues of: | | | |
| а | The organization? | 5a | | Х |
| b | Any related organization? | 5b | | Х |
| | If "Yes" on line 5a or 5b, describe in Part III. | | | |
| 6 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the net earnings of: | | | |
| а | The organization? | 6a | | Х |
| b | 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 | | 1 |

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

Schedule J (Form 990) 2019

ATLANTA, INC.

Schedule J (Form 990) 2019

Page 2

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

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

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

| | | (B) Breakdown of | (B) Breakdown of W-2 and/or 1099-MISC compensation | SC compensation | (C) Retirement and | ple | (E) Total of columns | (F) Compensation |
|--|------|--------------------------|--|-------------------------------------|--------------------------------|----------|----------------------|--|
| (A) Name and Title | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(i)-(D) | in column (B) reported as deferred on prior Form 990 |
| (1) MANSBACH, JODI | (i) | 173,619. | 0 | 761. | 0 | 0 | 174,380. | 0 |
| CHIEF IMPACT OFFICER | Œ | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (2) ROBBINS, ERIC | Ξ | 430,542. | 0 | 2,322. | 0 | 0. | 432,864. | 0 |
| | Ξ | 0 | 0 | 0 | 0 | 0 | 0 | • 0 |
| | Ξ | | | | | | | |
| | Ξ | | | | | | | |
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| | (i) | | | | | | | |
| | (ii) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
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| | (ii) | | | | | | | |
| | Ξ | | | | | | | |
| | (ii) | | | | | | | |
| | Ξ | | | | | | | |
| | (ii) | | | | | | | |
| 00 00 00 00 00 00 00 00 00 00 00 00 00 | | | | 99 | | | Schedu | Schedule J (Form 990) 2019 |

58-1021791

ATLANTA, INC. Schedule J (Form 990) 2019

Part III Supplemental Information

| on. | | | | | | | | | | ·m 990) 2019 |
|--|--|--|--|--|--|--|--|--|--|----------------------------|
| itional informati | | | | | | | | | | Schedule J (Form 990) 2019 |
| oart for any add | | | | | | | | | | o, |
| complete this p | | | | | | | | | | |
| for Part II. Also | | | | | | | | | | |
| o, 7, and 8, and | | | | | | | | | | |
| c, 5a, 5b, 6a, 6l | | | | | | | | | | |
| 1b, 3, 4a, 4b, 4 | | | | | | | | | | |
| Part I, lines 1a, | | | | | | | | | | |
| ons required for | | | | | | | | | | |
| ion, or descripti | | | | | | | | | | |
| nation, explanat | | | | | | | | | | |
| 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. | | | | | | | | | | |
| Provide | | | | | | | | | | |

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.

JEWISH FEDERATION OF GREATER ATLANTA, INC.

Employer identification number 58-1021791

| Pai | rt I Types of Property | | | | | |
|-----|--|-------------------------------|---|---|--|----|
| | | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts | |
| 1 | Art - Works of art | | | | | |
| 2 | Art - Historical treasures | | | | | |
| 3 | Art - Fractional interests | | | | | |
| 4 | Books and publications | | | | | |
| 5 | Clothing and household goods | | | | | |
| 6 | Cars and other vehicles | | | | | |
| 7 | Boats and planes | | | | | |
| 8 | Intellectual property | | | | | |
| 9 | Securities - Publicly traded | Х | 272 | 16,393,639. | PROCEEDS OF SALES | |
| 10 | Securities - Closely held stock | | | | | |
| 11 | Securities - Partnership, LLC, or trust interests | | | | | |
| 12 | Securities - Miscellaneous | | | | | |
| 13 | Qualified conservation contribution - | | | | | |
| 14 | Historic structures Qualified conservation contribution - Other | | | | | |
| 15 | Real estate - Residential | X | 1 | 1 504 273. | APPRAISED VALUE | |
| 16 | Real estate - Commercial | | | _,, | | |
| 17 | Real estate - Other | | | | | |
| 18 | | | | | | |
| 19 | Collectibles Food inventory | | | | | |
| 20 | Drugs and medical supplies | | | | | |
| 21 | Taxidermy | | | | | |
| 22 | Historical artifacts | | | | | |
| 23 | Scientific specimens | | | | | |
| 24 | Archeological artifacts | | | | | |
| 25 | Other (OTHER - LIFE) | Х | 1 | 5.242. | APPRAISED VALUE | |
| 26 | Other () | | | , | | |
| 27 | Other (| | | | | |
| 28 | Other () | | | | | |
| 29 | Number of Forms 8283 received by the organiz | zation durin | a the tax vear for c | ontributions | | |
| | for which the organization completed Form 828 | | • | | 1 | |
| | | , | | | Yes | No |
| 30a | During the year, did the organization receive by | / contribution | on any property rep | oorted in Part I, lines 1 throu | | |
| | must hold for at least three years from the date | | | | | |
| | exempt purposes for the entire holding period? | | | · | | Х |
| b | If "Yes," describe the arrangement in Part II. | | | | | |
| 31 | Does the organization have a gift acceptance p | oolicy that r | equires the review | of any nonstandard contribu | itions? | |
| | Does the organization hire or use third parties of | | | | | |
| | contributions? | | - | • | 32a X | |
| b | If "Yes," describe in Part II. | | | | | |
| 33 | If the organization didn't report an amount in co | olumn (c) fo | r a type of propert | y for which column (a) is che | cked, | |
| | describe in Part II. | | | | | |
| | | | | | | |

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

Schedule M (Form 990) 2019

| Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. |
|---|
| SCHEDULE M, LINE 32B: |
| DONORS TRANSFER THEIR DONATED SHARES INTO A BROKERAGE ACCOUNT AT |
| CHARLES SCHWAB OWNED BY THE FEDERATION. ON A DAILY BASIS, A STAFF |
| MEMBER OF THE FEDERATION AUTHORIZES THE SELL OF ANY STOCKS RECEIVED AND |
| THE PROCEEDS ARE TRANSFERRED INTO A FEDERATION BANK ACCOUNT. |
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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

2019

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

JEWISH FEDERATION OF GREATER ATLANTA, INC.

Employer identification number 58-1021791

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THROUGHOUT GREATER ATLANTA, ISRAEL AND THE WORLD. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: -CONNECTING PEOPLE WITH ISRAEL, ITS PEOPLE AND LAND -GIVING ISRAELI AND RUSSIAN YOUTH A FOUNDATION IN JEWISH HERITAGE AND GLOBAL PEOPLEHOOD -ENSURING THE NEXT GENERATION BECOMES THE JEWISH LEADERS AND PHILANTHROPISTS OF TOMORROW WE CONCENTRATE ON THIS AREA OF IMPACT BECAUSE WE KNOW THAT THERE IS A DIRECT AND MEASURABLE LINK BETWEEN CERTAIN EXPERIENCES THAT HELP PEOPLE ENGAGE JEWISHLY AND FUTURE JEWISH IDENTITY. IN PARTICULAR, ATTENDING JEWISH OVERNIGHT CAMP. ATTENDING JEWISH DAY SCHOOL AND GOING TO ISRAEL ARE THE TOP THREE INDICATORS OF LASTING JEWISH IDENTITY. WITHIN OUR ATLANTA JEWISH COMMUNITY, THERE IS A LOWER-THAN-AVERAGE PERCENTAGE OF AGE-ELIGIBLE CHILDREN ATTENDING JEWISH OVERNIGHT CAMP, A HIGHER-THAN AVERAGE INTERMARRIAGE RATE, AND A VERY LOW PERCENT OF COMMUNITY MEMBERS WHO FEEL CONNECTED AFTER BAR OR BAT MITZVAH. THROUGH OUR EFFORTS IN JEWISH EDUCATION AND JEWISH ENGAGEMENT, WE CAN AFFECT LIFE-CHANGING CONNECTIONS TO JUDAISM FOR ENTIRE GENERATIONS, FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: -EMBRACING AND EDUCATING INDIVIDUALS WITH DISABILITIES -OFFERING INTEREST FREE LOANS FOR HIGHER EDUCATION AND FOR EMERGENCY

NEEDS

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

Schedule O (Form 990 or 990-EZ) (2019)

| Schedule O (Form 990 or 990-EZ) (2019) | Page 2 |
|--|---|
| Name of the organization JEWISH FEDERATION OF GREATER ATLANTA, INC. | Employer identification number 58-1021791 |
| -DELIVERING IMMEDIATE SUPPORT IN TIMES OF CRISIS AROUND THE WORLD, | |
| WHETHER RELATED TO NATURAL DISASTER, POLITICAL UNREST OF ECONOMIC | |
| INSTABILITY | |
| | |
| WE CONCENTRATE ON THIS AREA OF IMPACT TO HELP INDIVIDUALS WEATHER | |
| LIFE'S UNPREDICTABLE STORMS. GEORGIA IS ONE OF THE FASTEST AGING ADULT | |
| POPULATIONS IN THE COUNTRY, CREATING MANY NEEDS AS PEOPLE LIVE LONGER. | |
| FACTORS SUCH AS THE ECONOMIC DOWNTURN AND CONTINUED HIGH UNEMPLOYMENT | |
| INCREASE THE NEED FOR FINANCIAL ASSISTANCE AS WELL AS MENTAL HEALTH | |
| SERVICES. ONE IN SIX CHILDREN BORN IN THE U.S. IS DIAGNOSED WITH A | |
| DEVELOPMENTAL DISABILITY, AND IT IS NO DIFFERENT IN THE JEWISH | |
| COMMUNITY. WHILE JEWISH HOUSEHOLDS MAY HAVE A LOWER-THAN-AVERAGE RATIO | |
| OF FAMILIES LIVING IN POVERTY, THE 2013 PEW STUDY STILL SUGGESTS THAT | |
| 20% OF JEWISH HOUSEHOLDS EARN LESS THAN \$30,000 A YEAR, CREATING A NEED | |
| FOR SERVICES TO PROMOTE FINANCIAL INDEPENDENCE. WE PROVIDE FOR NEEDS, | |
| AND WE ALSO EMPOWER SELF-SUFFICIENCY, NOT JUST IN OUR LOCAL COMMUNITY | |
| BUT ALSO WORLDWIDE, PROVIDING, FOR EXAMPLE, EMPOWERMENT PROGRAMS, | |
| TUTORING AND LANGUAGE/JOB TRAINING FOR ETHIOPIAN FAMILIES WHO IMMIGRATE | |
| TO ISRAEL. | |
| | |
| FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: | |
| -ENSURING EVERY DOLLAR CONTRIBUTED IS STEWARDED EFFECTIVELY TO IMPACT | |
| AS MANY LIVES AS POSSIBLE | |
| -BRINGING PEOPLE TOGETHER THROUGH EVENTS AND EDUCATIONAL PROGRAMS | |
| CENTERED AROUND OUR MISSION | |
| WE CONCENTRATE ON THIS AREA OF IMPACT BECAUSE NO OTHER ORGANIZATION IN | |
| OUR COMMUNITY HAS THE RESPONSIBILITY OF CARING FOR JEWS GLOBALLY. WE | |
| 932212 09-06-19 | Schedule O (Form 990 or 990-EZ) (2019) |

| Name of the organization | JEWISH FEDERATION OF GREATER | Employer identification number |
|--------------------------|---|--------------------------------|
| | ATLANTA, INC. | 58-1021791 |
| HAVE THE INFRASTRUC | TURE TO ADDRESS AND FILL GAPS IN SERVICES, WHICH | |
| CREATES A MORE VIBR | ANT COMMUNITY. WORKING TOGETHER AS A COMMUNITY, WE | |
| USE RESOURCES MORE | WISELY AND HAVE A STRONGER IMPACT ON PEOPLE'S LIVES. | |
| WE LEVERAGE OUR COL | LECTIVE VOICE TO MAKE CHANGE. WE ARE THE ONLY | |
| JEWISH ATLANTA ORGA | NIZATION THAT LOOKS BEYOND ANY SINGLE ENTITY TO | |
| ENSURE THAT THE COL | LECTIVE NEEDS OF THE COMMUNITY ARE SUPPORTED. WE | |
| ENSURE A STRONG COM | MUNITY FOR TODAY, AND WE NURTURE THE LEADERS OF | |
| TOMORROW SO THAT CO | MMUNITY REMAINS VIBRANT FOR FUTURE GENERATIONS. | |
| | | |
| FORM 990, PART III, | LINE 4D, OTHER PROGRAM SERVICES: | |
| THESE PROGRAM SERVI | CES PRINCIPALLY CONSIST OF GRANTS TO ORGANIZATIONS | |
| THAT SUPPORT CULTUR | AL, SOCIAL, WELFARE AND EDUCATIONAL PROGRAMS IN THE | |
| GENERAL COMMUNITY. | | |
| EXPENSES \$ 154,101. | INCLUDING GRANTS OF \$ 4,215,973. REVENUE \$ 254,252. | |
| | | |
| FORM 990, PART VI, | SECTION A, LINE 2: | |
| LAUREN ABES | FAMILY | |
| MATT BRONFMAN | BUSINESS | |
| BETH BROWN | FAMILY | |
| HOWARD KATZ | FAMILY | |
| MICHAEL KOGON | FAMILY & BUSINESS | |
| DEBBIE KUNIANSKY | FAMILY | |
| ROBERT LEVEN | FAMILY | |
| ERIC ROBBINS | FAMILY | |
| MARK SILBERMAN | FAMILY | |
| LINDA SILBERMAN | FAMILY | |
| STANLEY SUNSHINE | FAMILY | |
| | | |

| Name of the organization JEWISH FEDERATION OF GREATER ATLANTA, INC. | Employer identification number 58-1021791 |
|---|---|
| FORM 990, PART VI, SECTION A, LINE 6: | |
| ORGANIZATION IS ORGANIZED AS A NOT-FOR-PROFIT ORGANIZATION WITH MEMBERS. | |
| FORM 990, PART VI, SECTION A, LINE 7A: | |
| ORGANIZATION HAS MEMBERS WHO ELECT ONE OR MORE MEMBERS OF THE GOVERNING | |
| BODY | |
| FORM 990, PART VI, SECTION B, LINE 11B: | |
| A COMMITTEE DESIGNATED BY THE CHAIR IS AUTHORIZED TO REVIEW THE FORM 990. | |
| A COMPLETE COPY OF THIS FORM 990 IS PROVIDED TO ALL MEMBERS OF THE | |
| GOVERNING BODY IN ATTENDANCE BEFORE FILING THE FORM. | |
| | |
| FORM 990, PART VI, SECTION B, LINE 12C: | |
| A CONFLICT OF INTEREST POLICY AND DISCLOSURE STATEMENT IS FURNISHED | |
| ANNUALLY TO EACH KEY INDIVIDUAL AND ANY NEW KEY INDIVIDUAL IS TO BE | |
| PROVIDED WITH A COPY OF THE POLICY UPON COMMENCEMENT OF HIS/HER POSITION. | |
| KEY INDIVIDUALS INCLUDE TRUSTEE, OFFICER, COMMITTEE MEMBER, AND/OR | |
| VOLUNTEER IN A POSITION TO INFLUENCE, PROVIDE INFORMATION WITH RESPECT TO, | |
| VOTE ON JFGA POLICY OR EXPENDITURES. KEY INDIVIDUALS ARE REQUIRED TO | |
| DISCLOSE THAT THEY DO NOT HAVE ANY CONFLICT OF INTEREST THAT MAY BE SEEN AS | |
| COMPETING WITH INTERESTS OR CONCERNS OF JFGA, NOR DOES ANY MEMBER OF KEY | |
| INDIVIDUAL'S IMMEDIATE FAMILY OR ANY PARTY, GROUP, OR ORGANIZATION TO WHICH | |
| THEY HAVE AN ALLEGIANCE, OR COMPETING INTEREST OR CONCERN EXCEPT AS LISTED | |
| ON THE DISCLOSURE STATEMENT. KEY INDIVIDUALS ARE REQUIRED TO PROMPTLY AND | |
| FULLY, BEFORE ANY DISCUSSION OR ACTION IS TAKEN ON THE MATTER, DISCLOSE THE | |
| CIRCUMSTANCES TO THE PRESIDENT OF THE JFGA OR TO THE CHAIR OF ANY COMMITTEE | |
| ON WHICH THEY SERVE. IN THE EVENT A CONFLICT IS DISCLOSED EITHER IN | |
| WRITING OR ORALLY, THE CONTRACT OR TRANSACTION IS CONSIDERED PROPERLY | Schedule O /Form 990 or 990-F7\ /2019 |

| Name of the organization JEWISH FEDERATION OF GREATER ATLANTA, INC. | Employer identification number 58-1021791 |
|--|---|
| AUTHORIZED, APPROVED OR RATIFIED ONLY IF THERE IS FAVORABLE VOTE OF A | |
| MAJORITY OF THE RELEVANT COMMITTEE OR BOARD. | |
| FORM 990, PART VI, SECTION B, LINE 15A: | |
| THE PROCESS FOR DETERMINING THE COMPENSATION FOR THE PRESIDENT INCLUDES | |
| REVIEW AND APPROVAL BY THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE | Е |
| TAKES INTO ACCOUNT COMPARABILITY DATA FROM 990s OF OTHER ORGANIZATIONS A | AND |
| COMPENSATION STUDY/SURVEYS WHEN DETERMINING THE BASE SALARY. COMPENSATI | ION |
| IS BASED ON COMPARABILITY DATA AND MEETING INTERNALLY ESTABLISHED GOALS. | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POL | LICY |
| AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST. | |
| | |
| FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: | |
| PASS-THROUGH INCOME FROM PARTNERSHIPS 2,850,0 | 014. |
| PENSION RELATED CHANGED OTHER THAN NET PERIODIC PENSION | |
| COST -308,6 | 691. |
| TOTAL TO FORM 990, PART XI, LINE 9 2,541,3 | 323. |
| FORM 990, PART XII, LINE 2C | |
| THE AUDIT COMMITTEE HAS RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT | |
| OF THE FEDERATION'S FINANCIAL STATEMENTS AND SELECTION OF AN | |
| INDEPENDENT ACCOUNTANT. | |
| | |
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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.

Open to Public Inspection 2019

OMB No. 1545-0047

JEWISH FEDERATION OF GREATER

Name of the organization Department of the Treasury Internal Revenue Service

ATLANTA, INC.

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

Employer identification number 58-1021791

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

| (a) | (q) | (c) | (p) | (e) | (t) |
|--|---|---|------------------------|----------------------|------------------------------|
| Name, address, and EIN (if applicable) of disregarded entity | Primary activity | Legal domicile (state or foreign country) | Total income | End-of-year assets | Direct controlling entity |
| ATLANTA JEWISH FOUNDATION PRIVATE ASSETS, | | | | | |
| LLC - 99-9999999, 1440 SPRING STREET NW, | | | | ., | JEWISH FEDERATION OF |
| ATLANTA, GA 30309 | ACCEPT ILLIQUID ASSETS | GEORGIA | | O | GREATER ATLANTA, INC. |
| | | | | | |
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| | | | | | |
| Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt | zations. Complete if the organization a | inswered "Yes" on Form 990, Pa | rt IV, line 34, becaus | e it had one or more | related tax-exempt |

organizations during the tax year.

| (a) | (q) | (၁) | (p) | (e) | (£) | (6) | 0.00 |
|--|------------------|--------------------------|-------------|--------------------|----------------------------|----------------------------------|------------------|
| Name, address, and EIN | Primary activity | Legal domicile (state or | Exempt Code | Public charity | Direct controlling | section 512(b)(13) controlled | 2(b)(13) lled |
| of related organization | | foreign country) | section | status (if section | entity | entity? | 7. |
| | | | | 501(c)(3)) | | Yes | No |
| ALEF FUND, INC 26-2919210 | | | | | | | |
| 1440 SPRING STREET NW | | | | | | | |
| ATLANTA, GA 30309 | SCHOLARSHIPS | GEORGIA | 501(C)(3) | 7 | | | × |
| BILLI AND BERNIE MARCUS FOUNDATION, INC | | | | | JEWISH FEDERATION | | |
| 58-1720888, 1440 SPRING STREET NW, ATLANTA, | | | | | OF GREATER | | |
| GA 30309 | SUPPORTING ORG | GEORGIA | 501(C)(3) | 11A | ATLANTA, INC. | | × |
| BREMAN FOUNDATION, INC - 58-6043553 | | | | | JEWISH FEDERATION | | |
| 1440 SPRING STREET NW | | | | | OF GREATER | | |
| ATLANTA, GA 30309 | SUPPORTING ORG | GEORGIA | 501(C)(3) | 11A | ATLANTA, INC. | | × |
| COHEN-KOGON CHARITABLE FUND, INC | | | | | JEWISH FEDERATION | | |
| 58-1845797, 1440 SPRING STREET NW, ATLANTA, | | | | | OF GREATER | | |
| GA 30309 | SUPPORTING ORG | GEORGIA | 501(C)(3) | 11A | ATLANTA, INC. | | × |
| For Paperwork Reduction Act Notice, see the Instructions for Form 990. | ns for Form 990. | | | | Schedule R (Form 990) 2019 | orm 990 |) 2019 |

JEWISH FEDERATION OF GREATER ATLANTA, INC.

58-1021791

Schedule R (Form 990)

Part II Continuation of Identification of Related Tax-Exempt Organizations

| | (4) | 15 | (7) | 3 | | 2, | |
|---|------------------|--|------------------------|--------------------------------------|------------------------------|----------------------------------|-----------|
| (a) | (a) | (C) | (a) | (a) | | (9) Section 512(b)(13) | (2(b)(13) |
| name, address, and EIN of related organization | Primary activity | Legal domicile (state or foreign country) | exempt Code section | Public cnarity status (if section | Direct controlling entity | controlled organization? | ation? |
| | | | | 501(c)(3)) | | Yes | ٩ |
| DOUG AND ROBYN ROSS FAMILY FOUNDATION, INC. | | | | | JEWISH FEDERATION | | |
| - 20-4337002, 1440 SPRING STREET NW, | | | | | OF GREATER | | |
| ATLANTA, GA 30309 | SUPPORTING ORG | GEORGIA | 501(C)(3) | 11A | ATLANTA, INC. | | × |
| THE HALPERN-OPPENHEIMER FAMILY FOUNDATION, | | | | | JEWISH FEDERATION | | |
| INC 58-2512118, 1440 SPRING STREET NW, | | | | | OF GREATER | | |
| ATLANTA, GA 30309 | SUPPORTING ORG | GEORGIA | 501(C)(3) | 11A | ATLANTA, INC. | | × |
| THE LEONARD AND JERRY GREENBAUM FAMILY | | | | | JEWISH FEDERATION | | |
| FOUNDATION - 58-1927976, 1440 SPRING STREET | | | | | OF GREATER | | |
| NW, ATLANTA, GA 30309 | SUPPORTING ORG | GEORGIA | 501(C)(3) | 11A | ATLANTA, INC. | | × |
| WEINSTEIN FOUNDATION, INC 58-1376003 | | | | | JEWISH FEDERATION | | |
| 1440 SPRING STREET NW | | | | | OF GREATER | | |
| ATLANTA, GA 30309 | SUPPORTING ORG | GEORGIA | 501(C)(3) | 11A | ATLANTA, INC. | | × |
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Page 2

58-1021791

ATLANTA, INC.

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Schedule R (Form 990) 2019

| | (j) (k) General or Percentage managing ownership Pariner? | | | re related | Section 512(b)(13) controlled entity? | | |
|---|---|--|--|---|--|--|--|
| | General or Emanaging partner? | | | one or mo | (h) Percentage ownership | | |
| | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | | | t, because it had | (g) Share of Pe end-of-year ov assets | | |
| | (h) Disproportionate allocations? Yes No | | | art IV, line 34 | | | |
| | (g) Share of end-of-year assets | | | Form 990, F | (f) Share of total income | | |
| | (f) Share of total Sincome er | | | ered "Yes" on | (e) Type of entity (C corp, S corp, or trust) | | |
| | | | | ation answ | | | |
| | (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | | | f the organiz | (d) Direct controlling entity | | |
| | | | | Complete i | (c) Legal domicile (state or foreign country) | | |
| | (d) Direct controlling entity | | | oration or Trust. (year. | (b) Primary activity | | |
| . | (c) Legal domicile (state or foreign country) | | | as a Corpong the tax | Prim | | |
| | (b) Primary activity | | | ganizations Taxable | Z: c | | |
| | (a) Name, address, and EIN of related organization | | | Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. | (a) Name, address, and EIN of related organization | | |

Schedule R (Form 990) 2019

932162 09-10-19

Page 3

ATLANTA, INC. Schedule R (Form 990) 2019 Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

| Note: Complete line 1 if any entity is listed in Parts II III or IV of this schedule | | | | ŕ | Yes | Ž |
|--|----------------------------|-----------------------------|--|--------------|-----|---|
| 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? | ons with one or more r | elated organizations listed | in Parts II-IV? | | 3 | |
| Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | ity | | | 1a | | × |
| Gift. grant. or capital contribution to related organization(s) | | | | 1 | | × |
| Gift, grant, or capital contribution from related organization(s) | | | | မ | × | |
| | | | | 1d | | × |
| Loans or loan guarantees by related organization(s) | | | | 1e | | × |
| | | | | | | |
| Dividends from related organization(s) | | | | # | | × |
| Sale of assets to related organization(s) | | | | 1g | | × |
| Purchase of assets from related organization(s) | | | | 4 | | × |
| | | | | ij. | × | |
| Lease of facilities, equipment, or other assets to related organization(s) | | | | 1j | | × |
| I occor of familities and instruct or other accords from valuted avanativation(s) | | | | <u></u> | | × |
| Eccess of research, equipment, or office access from cased organization (s). Performance of services or membership or fundraising solicitations for related organization (s). | ganization(s) | | | = | × | |
| Performance of services or membership or fundraising solicitations by related organization(s) | ganization(s) | | | 투 | | × |
| Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | ation(s) | | | 1r | × | |
| Sharing of paid employees with related organization(s) | | | | 10 | × | |
| Reimbursement baid to related organization(s) for expenses | | | | 9 | | × |
| Reimbursement paid by related organization(s) for expenses | | | | P | × | |
| Other transfer of cash or property to related organization(s) | | | | + | | × |
| Other transfer of cash or property from related organization(s) | | | | 18 | | × |
| If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds | who must complete t | nis line, including covered | relationships and transaction thresholds. | | | |
| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved | olved | | |
| (1) ALEF FUND, INC. | Т | 106,465. | COST | | | |
| (2) BREMAN FOUNDATION, INC. | c | 830,750. | CASH CONTRIBUTED | | | |
| (3) BREMAN FOUNDATION, INC. | Ţ | 34,811. | MANAGEMENT FEE SCHEDULE | | | |
| (4) COHEN-KOGON CHARITABLE FUND, INC. | S | 377,867. | CASH CONTRIBUTED | | | |
| (5) COHEN-KOGON CHARITABLE FUND, INC. | Ţ | 13,450. | MANAGEMENT FEE SCHEDULE | | | |
| (6) THE LEONARD AND JERRY GREENBAUM FAMILY FOUNDATION, INC. | υ | 797,334. | 797,334.CASH CONTRIBUTED | | | |
| 932163 09-10-19 | 78 | | Schedule R (Form 990) 2019 | Form | 066 | ⋈ |

JEWISH FEDERATION OF GREATER ATLANTA, INC.

58-1021791

Schedule R (Form 990)

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

| (a) Name of other organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|---|----------------------------|------------------------|---|
| (7) THE LEONARD AND JERRY GREENBAUM FAMILY FOUNDATION, INC. | Ţ | 25,660. | 660. MANAGEMENT FEE SCHEDULE |
| (8) THE HALPERN-OPPENHEIMER FAMILY FOUNDATION, INC. | ບ | 1,085,400. | 400, CASH CONTRIBUTED |
| (9) THE HALPERN-OPPENHEIMER FAMILY FOUNDATION, INC. | Т | 20,633. | 633. MANAGEMENT FEE SCHEDULE |
| (10) WEINSTEIN FOUNDATION, INC. | כ | 353,500 | 500, CASH CONTRIBUTED |
| (11) WEINSTEIN FOUNDATION, INC. | Ţ | 23,872. | 23,872,MANAGEMENT FEE SCHEDULE |
| (12) BILLI AND BERNIE MARCUS FOUNDATION | L | 10,417. | 417. MANAGEMENT FEE SCHEDULE |
| (13) BILLI AND BERNIE MARCUS FOUNDATION | ٥ | 232,904. | CASH CONTRIBUTED |
| (14) DOUG AND ROBYN ROSS FAMILY FOUNDATION, INC. | Ţ | 13,514. | 514. MANAGEMENT FEE SCHEDULE |
| (15) DOUG AND ROBYN ROSS FAMILY FOUNDATION, INC. | ບ | 197,260. | 197,260.CASH CONTRIBUTED |
| (16) | | | |
| (17) | | | |
| (18) | | | |
| (19) | | | |
| (20) | | | |
| (21) | | | |
| (22) | | | |
| (23) | | | |
| (24) | | | |
| | | | |

932225 06-28-19

Schedule R (Form 990) 2019 ATLANTA, INC.

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.

| (k) centage nership | | | | |
|--|--|--|--|--|
| General or Per managing ow partner? | | | | |
| Code V-UBI General or Percentage amount in box 20 managing of Schedule K-1 partner? (Form 1065) yes No | | | | |
| (h) Disproportionate allocations? | | | | |
| (g) Share of end-of-year assets | | | | |
| (f) Share of total income | | | | |
| (e) Are all partners sec. 501(c)(3) der Yes No | | | | |
| Predominant income (related, unrelated, excluded from tax under sections 512-514) | | | | |
| (c) Legal domicile (state or foreign country) | | | | |
| (b) Primary activity | | | | |
| (a) Name, address, and EIN of entity | | | | |

Schedule R (Form 990) 2019