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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)

 \blacktriangleright Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2021

Open to Public Inspection

AF	or th	I U 202	1 calendar year, or tax year begin	10/0	01/2021	and endin				/30/202		
B c	neck if ap	oplicable:	C Name of organization JEWISH NAT					D Employer id	entific	ation numb	er	
	Addre		(KEREN KAYEMETH LEISRA	AEL) INC.								
	chang		Doing Business As					13-165				
	Name	change	Number and street (or P.O. box if mail is	not delivered to street address	s) F	Room/suite		E Telephone r	ıumber	r		
	Initial	return	42 EAST 69TH STREET					(212)8	79 –	9300		
	Termi	inated	City or town, state or province, country, a	and ZIP or foreign postal code								
	Amen return		NEW YORK, NY 10021					G Gross receip	ots \$	732,0	038,03	35.
	Applio pendi	cation ing	F Name and address of principal officer:	RUSSELL ROBIN	ISON			H(a) Is this a gro subordinate		rn for	Yes X	No
	•	-	42 EAST 69TH STREET, NE	EW YORK, NY 1002	21			H(b) Are all subor		ncluded?	Yes	No
1	Tax-ex	empt st	atus: X 501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or	r 527	•	If "No," atta	ch a list	t. (see instruction	ons)	
J	Websi	ite: 🕨	WWW.JNF.ORG					H(c) Group exen	nption n	umber 🕨		
K	Form o	of organ	nization: X Corporation Trust	Association Other ▶		L Year of	formation	on: 1926 M	State	of legal dom	ricile:	NY
Pa	art I	Sui	mmary			•						
	1	Briefly	/ describe the organization's mission or	r most significant activities	: JEWISH	H NATION	IAL F	UND GIVE	S AI	LL		
ė			ERATIONS OF JEWS A UNIQU	-								
Governance			URE FOR THE LAND OF ISRA									
/er	2	Check	this box if the organization d	iscontinued its operations	s or disposed							
é ဗိ			er of voting members of the governing						3			34
			er of independent voting members of t						4			34
Activities &			number of individuals employed in cale						5			28
Ξ̈́			number of volunteers (estimate if necess						6			100
Ä			unrelated business revenue from Part V						7a		34,2	
			nrelated business taxable income from						7b		14,2	
								Prior Year	1.2	Curre	nt Year	
	8	Contri	ibutions and grants (Part VIII, line 1h)	1	10,036,8	03.	110.7	765,05	 57.			
nue	9	Progra	am service revenue (Part VIII, line 2g)		COPY	- 1		67,2			786,9	
Revenue			ment income (Part VIII, column (A), line		PUBLIC INS	SPECTION		30,660,7			753,06	
ž			revenue (Part VIII, column (A), lines 5,					90,5			276,66	
			revenue - add lines 8 through 11 (must			ı	1.	40,855,4	_		075,60	
			s and similar amounts paid (Part IX, colu						370,00			
			its paid to or for members (Part IX, colu						ONE	30,0		ONI
			es, other compensation, employee bene			24,976,9		27 9	303,02			
Expenses			ssional fundraising fees (Part IX, column						ONE	27,0		ONI
ben	10a	Total	fundraising expenses (Part IX, column (I	D) line 25) > 9 4	25 204				OIVE		11/	OIVI
Ж								16,916,2	71	21 1	131,56	
			expenses (Part IX, column (A), lines 11 expenses. Add lines 13-17 (must equal					84,592,8	_			
	19							56,262,5			304,57 271,02	
- S		Kevei	nue less expenses. Subtract line 18 from	ITIIII E IZ				ing of Current			of Year	<u> 25.</u>
Net Assets or Fund Balances	20	Tatal	coasts (Dort V. line 4C)									
\sse Bala	20		assets (Part X, line 16) liabilities (Part X, line 26)			• • • • •		32,275,3			559,0	
a t	21		` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					56,306,9			590,92	
	22 rt II		ssets or fund balances. Subtract line 21 gnature Block	Trom line 20	· · · · · · ·		4	75,968,3	91.	420,5	968,15	50.
			of perjury, I declare that I have examined this	is return including accompa	nvina schodule	ac and statem	onte ar	nd to the heet o	of my l	rnowledge a	nd helief	it ic
true	e, corre	ect, and	complete. Declaration of preparer (other than	officer) is based on all inform	nation of which	h preparer has	any kn	owledge.	·y .	anowicage a	na bellet,	11 13
Sig	n		Signature of officer					l Date				
Hei			3									
			Type or print name and title									
			Type preparer's name	Preparer's signature		Date		I a I	T., F	PTIN		
Paic	l						/000	Check	ן יי ∟		170	
Pre	oarer	PAUI		PAUL HAMMERSCH	IMTD,T,	05/31,			· .	P013841		
Use	Only		sname > BDO USA, LLP		018 -01			Firm's EIN		3-53815		
N/-	4h - ''		saddress > 100 PARK AVENUE I	•		<u>-</u>		Phone no.	2	12-885-		
			cuss this return with the preparer show) <u>.</u>				<u> </u>	X Yes		No
For	Paper	rwork	Reduction Act Notice, see the separat	te instructions.						Form	990 (2	U21)

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Pa	art III	Statement of Program Se	rvice Accomplishments ins a response or note to any line in thi	s Part III	х
1	Briefly o	describe the organization's m		<u> </u>	
	-	_	ZES ALL GENERATIONS OF JEW	S A UNIOUE VOICE IN	
			JTURE FOR THE LAND OF ISRA		
2			significant program services during the		
	prior Fo	orm 990 or 990-EZ? describe these new services	s on Schedule O.		Yes X No
3	services	?	ucting, or make significant changes		
4	Describ expense	es. Section 501(c)(3) and 5	m service accomplishments for each 01(c)(4) organizations are required to ny, for each program service reported.	o report the amount of grants and	
4a	(Code: SEE SO) (Expenses \$ CHEDULE O	88,265,537. including grants of \$	56,870,004.) (Revenue \$	786,946)
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other p	rogram services (Describe o		venue \$	
4e		ogram service expenses	88,265,537.	•	

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Part IV Page 3

Part	V 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
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		X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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	X	
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		X
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		X
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	X	
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	X	
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		X
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	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40 -	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	40.		
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	37	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
D	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			
	30 0	146	v	
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b	X	
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13		
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		X
17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10	v	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	X	
13		19		v
20.5	If "Yes," complete Schedule G, Part III	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		^
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
41	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	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		162	
	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	22	37	
24 a	employees? If "Yes," complete Schedule J	23	X	
2 40	\$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		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
d	to defease any tax-exempt bonds?	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		X
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?	25b		Х
26	If "Yes," complete Schedule L, Part I	230		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	202		37
b	"Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 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? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
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,	33		_X
34	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
Part	19? Note: All Form 990 filers are required to complete Schedule O	38	X	
ıaıı	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	reportable gaming (gambling) winnings to prize winners?	1c	Х	
JSA 1E1030				(2021)
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2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filled for the calonadary vage anding with or within the year covered by this return. 2a 287 b I at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? . 3a X X b If Ves. has at filed a Form 993-T for this year? If Yeb for line 2b, provide an explaination on Schedule O 3b X 4A ray mise during the calendary year, did the organization have an explaination on Schedule O 3b X 4A ray mise during the calendary year, did the organization have state in the same of the foreign country is 120XXXXII. See instructions for filing requirements for FrCGEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). Set Was the organization to a prohibitotic state view for FrCGEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Set Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicil any contributions that were not tax deductible or organization solicil any contributions that were not tax deductible? 7 or Organizations that may receive deductible contributions under section 170(c). 8 Did the organization sell. exchange, or otherwise dispose of tangible personal property for which it was required to the poyor? 9 If Yes, and the organization molity the donor of the value of the goods or services provided? 7 to Yes, indicate the number of Forms 8282 filed during the year. 9 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Septions i		2000 (2021)			age 🛡
Statements, filed for the calendar year ending with or within the year covered by this raturn. 2a	Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If 19°es, "has it filed a Form 980-T for the year? If "No" io fine 3b, provide an explanation on Schedule O. 3b X X 3a X X b If "Yes," has it filed a Form 980-T for the year? If "No" io fine 3b, provide an explanation on Schedule O. 3b X X 4a At any time during the calendary year, dith explanation and an animates it, or a signature or to ther authority over a financial account; in a foreign country № 1587,82E. 5a Was the organization set for fincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at explanation of the organization have annual gross receipts that are normally greater than \$100,000, and did the organization societ any contributions that the way so is a party to a prohibited contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions and services provided to the payor? 7 Organizations that may receive deductible contributions under section 170(c). 8 If 'Yes,' idid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as payment in excess of \$75 made party ty as a contribution and party for goods and services provided to the payor? 7 Organizations that may receive deductible contributions under section 170(c). 8 If 'Yes,' indicate the number of Forms 8282 filed during the year. 9 Did the organization federal payment of the year year perimiting, directly organization federal	2a	· · · · · · · · · · · · · · · · · · ·			
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to effect Sea instructions. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?. 5b If "Yes," has it filed a Form 990-T for this year? If "No" to line 80, provide an explanation on Schedule 0 5b It "Yes," the standard prear, did the organization have an interest in, or a signature or other authority over, a financial account; or the financial accounts; or the financial ac		Statements, filed for the calendar year ending with or within the year covered by this return 287			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a fimancial account in a foreign country (such as a bank account, servicines account, or other authority over, a fimancial account in a foreign country \$12RAEL \$1 \text{ "Yes"} is die a granization and the organization thank the sense instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). \$2 Was the organization thank to the property to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction and the organization solicit any contributions with a twe so is a party to a prohibited contributions? 6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions? 6c 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? 7c Organizations that may receive deductible contributions under section 170(c). 8 If If Yes, did the organization notify the donor of the value of the goods or services provided? 7d If Yes, did the organization of the payor? 7a If If Yes, did the organization of the payor? 7b If If Yes, did the organization of the payor and the good or services provided? 7c Organization services can be payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7d If Yes, did the organization of the payor? 7d If Yes, did the organization of the payor and the payor and	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b If "Yes," has it field a Form 990-T for this year" If "No" to line 3b, provide an explanation or Schedule O		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
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)? b If Yes, "enter the name of the foreign country \$128A2E 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? c If Yes's to line 5a or 5b, did the organization that it was or is a party to a prohibition file Form 8886-77 c If Yes's to line 5a or 5b, did the organization file Form 8886-77 c If Yes's to line 5a or 5b, did the organization file Form 8886-77 c Organization solicit any contributions that were not tax deductible as charitable contributions? c Je organization solicit any contributions that were not tax deductible as charitable contributions? c Je organization solicit any contributions that were not tax deductible as charitable contributions? c Je organization self the payor? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a potential payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 7 Organization receive a charity of the value of the yeal payment in excess of \$75 made partly search payment in the payment in the payor? 5 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Po Lix of the organization received a contribution of qualified indirectly, to pay premiums on a personal benefit contract? 7 Po Lix of the organization received a contribution of qualified indirectly or indirectly on a personal benefit contract? 7 Po Lix organization received a contribution of qualified indirectly organization file form					
a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b if Yes, "neter the name of the foreign country ►1SRAEL See instructions for filling 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? c if Yes 'to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelfer transaction? c if Yes 'to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelfer transaction? 5b			3b	X	
b If "Yes," enter the name of the foreign country ▶ ISRAEL See instructions for filling requirements for FICEN From 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?. 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes" to line 5a or 5b, did the organization file Form 8868-77. 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?. 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gitts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8b If "Yes," 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? 8b If "Yes," did the organization notify the donor of the value of the goods or services provided? 9c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c If the organization received a contribution of qualified intellectual property, did the foreign 8899 as required to file forms 8993 are qualified intellectual property, did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c If the organization received any funds, directly or indirectly, on a personal benefit contract? 9c If the organization received any funds, directly or indirectly, on a personal benefit contract? 9c If the organization received any funds, directly or indirectly, on a personal benefit contract? 9c If the organization received any fund for the property of the form	4a				
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		activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		

Form 990 (2021) JEWISH NATIONAL FUND 13-1659627 Page 6 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instruction	
Chack if Schodula O contains a response or note to any line in this Part VI	7.

Sect	ion 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	1 a 34			
	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		1 b 34			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relati	ionship with			
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under	er the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other per	rson?	3		X
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 ass		5		X
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect				
	one or more members of the governing body?		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by		-		37
_	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertained in the contemporaneously document the meetings held or written actions undertained in the contemporaneously document the meetings held or written actions undertained in the contemporaneously document the meetings held or written actions undertained in the contemporaneously document the meetings held or written actions undertained in the contemporaneously document the meetings held or written actions undertained in the contemporaneously document the meetings held or written actions undertained in the contemporaneously document the meetings held or written actions undertained in the contemporaneously document the meetings held or written actions undertained in the contemporaneously document the contemp	aken during			
	the year by the following:		8a	Х	
а	The governing body?		8b	X	
ь	Each committee with authority to act on behalf of the governing body?		0.0	- 1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	e reached at	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Intern			.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	[10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of suc				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purp	-	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	·			
12a			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests tha	at could give			
	rise to conflicts?		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the police	cy? If "Yes,"			
	describe on Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation are		45-	37	
а	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b	Λ	
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
ıva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a	- 1	16a		X
h	with a taxable entity during the year?				
b	participation in joint venture arrangements under applicable federal tax law, and take steps to sa				
	organization's exempt status with respect to such arrangements?		16b		
Secti	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶ SEE SCHEDULE O				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 99	90, and 990-T	(sect	ion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply		,		. ,
	Own website	edule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documer	nts, conflict of	inter	est p	olicy,
	and financial statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and records	>		
	MITCHEL ROSENZWEIG 78 RANDALL AVENUE ROCKVILLE CENTRE, NY 11570				

516-678-6805

1997MY 702V

Form 990 (2021) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, **Independent Contractors**

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.s
- 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. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any	box,	unles er and	Position check more than one ess person is both an and a director/trustee)			an tee)	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-NEC)	organization and related organizations
(1) RUSSELL ROBINSON	40.00									
CEO	NONE			х				794,697.	NONE	63,951.
(2) MITCHEL ROSENZWEIG	40.00							,	-	
CFO	NONE			Х				360,520.	NONE	39,415.
(3) MATTHEW BERNSTEIN	40.00									· ·
CHIEF PLANNED GIVING OFFICER	NONE				X			322,182.	NONE	43,762.
(4) STEPHEN BACH	40.00									
CHIEF ADMINISTRATIVE OFFICER	NONE				X			291,612.	NONE	41,320.
(5) RICHARD KROSNICK	40.00									
CHIEF DEVELOPMENT OFFICER	NONE				Х			292,108.	NONE	37,082.
(6) DIANE SCAR	40.00									
NATIONAL CAMPAIGN DIRECTOR	NONE					X		250,608.	NONE	37,156.
(7) SHARON FREEDMAN	40.00									
NATIONAL CAMPAIGN DIRECTOR	NONE					X		248,958.	NONE	28,268.
(8) YAEL KANE	40.00									
CHIEF ISRAEL ADVOCACY AND LEAD	NONE					X		231,036.	NONE	34,146.
(9) DEBBIE FREEDMAN	40.00									
EXECUTIVE VP, GREATER NY	NONE					X		224,045.	NONE	24,695.
(10) MICHAEL FEINMAN	40.00									
EXECUTIVE DIRECTOR	NONE					Х		203,816.	NONE	33,464.
(11) RONALD S. LAUDER	3.00									
CHAIRPERSON EMERITUS	1.00	Х		Х				NONE	NONE	NONE
(12) DR. SOL LIZERBRAM	5.00									
PRESIDENT	NONE	X		Х				NONE	NONE	NONE
(13) JEFFREY E. LEVINE	3.00									
CHAIRPERSON OF THE BOARD	NONE	X		Х				NONE	NONE	NONE
(14) MICHAEL BLANK	3.00									
TREASURER	NONE	X		Х				NONE	NONE	NONE

Form **990** (2021)

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Form 990 (2021) Page **8**

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	yee	es,	and H	ligl	hest Compensat	ed Employees (d	continue	ed)	
(A)	(B)			((C)			(D)	(E)		(F)	
Name and title	Average			Pos	ition			Reportable	Reportable	Es	stimated	
	hours per	,				than or		compensation	compensation from		nount of	f
	week (list any hours for	1				is both a or/truste		from	related		other pensati	on
	related		$\overline{}$					the organization	organizations (W-2/1099-MISC)		om the	011
	organizations	dire	iti l	Officer	y en	hes	Former	(W-2/1099-MISC)	(11 2, 1000 111100)	_	anizatio	
	below dotted line)	ual	tion		Key employee	st co	_				d related anization	
	iiiie)	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				org.	2111241101	10
		ee	ste			nsa						
			Ψ			ited						
15) MYRA CHACK-FLEISCHER	3.00											
SECRETARY	NONE	X		Χ				NONE	NONE			NONE
16) DR. ROBERT BENEDON	3.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
17) ISAAC BLACHOR	3.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
18) EDWARD BLANK	3.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
19) BARBARA BURRY	3.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
20) STEVEN CRYSTAL	3.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
(21) TONI DUSIK	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
22) CHARLES S. FAX	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
23) BARUCH FELLNER, ESQ.	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
24) SCOTT H. GENDELL	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
(25) DAVID GREENBAUM	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
1b Sub-total							▶	3,219,582.	NONE		383,	<u>259.</u>
c Total from continuation sheets to Part VII, S							\blacktriangleright	NONE	NONE			NONE
d Total (add lines 1b and 1c)								3,219,582.	NONE		383,	<u>259.</u>
2 Total number of individuals (including but not		hose	liste	d ab		,	re	ceived more than	\$100,000 of			
reportable compensation from the organizatio	n ►					59						
											Yes	No
3 Did the organization list any former office										_		
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ina	lividu	ıal						3		
4 For any individual listed on line 1a, is the	sum of rep	ortab	ole c	om	pen	sation	n ar	nd other compens	sation from the			
organization and related organizations gr	eater than	\$15	50,00	00?	lf	"Yes	," (complete Schedu	le J for such			
individual										4		
5 Did any person listed on line 1a receive or												
for services rendered to the organization? If "Y	es." comple	te Scl	nedu	ıe J	for	such i	per	son		5	1	

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form 990 (2021) Page 8

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ye	es,	and H	ligl	hest Compensat	ed Employees (d	continued)
(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average hours per	(do i	not c		sition	e than oi	ne	Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any	box,	unles	ss pe	erson	is both	an	from	related	other
	hours for					or/truste		the	organizations	compensation
	related organizations	Individual trustee or director	stitu	Officer	Key employee	Highest cc employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	dual	tion	=	mplc	st cc	4	(11 27 1000 111100)		and related
	line)	trust	al tru		yee)mpe				organizations
		lee	Institutional trustee			compensated				
						ted.				
(26) VIVIAN GROSSMAN	3.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(27) BENJAMIN GUTMANN	3.00	.,						NONE	NONTE	NONE
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(28) MICHAEL H. JACOBSON BOARD MEMBER	3.00							NONE	NONTE	NONE
29) HAROLD L. KAPLAN	3.00	X						NONE	NONE	NONE
BOARD MEMBER	NONE	x						NONE	NONE	NONE
(30) MICHAEL KESSLER	3.00	21						IVOIVE	NONE	110111
BOARD MEMBER	NONE	X						NONE	NONE	NONE
31) JOSEPH KORN	3.00								-	
BOARD MEMBER	NONE	Х						NONE	NONE	NONE
32) MICHAEL LEDERMAN	3.00									
BOARD MEMBER	NONE	Х						NONE	NONE	NONE
(33) ROBERT B. LEVINE	3.00									
BOARD MEMBER	2.50	X						NONE	NONE	NONE
(<u>34) NINA PAUL</u>	3.00	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(35) PENNY ROSEN	3.00	.,						NONE	NONTE	NONE
BOARD MEMBER	3.00	X						NONE	NONE	NONE
(36) SCOTT N. SCHREIBER, ESQ. BOARD MEMBER	NONE	X						NONE	NONE	NONE
1b Sub-total	NONE	21	l					IVOIVE	NONE	110111
c Total from continuation sheets to Part VII, S	ection A		• •	• •	• •		-			
d Total (add lines 1b and 1c)	-						•			
2 Total number of individuals (including but not			liste	d a	bov	e) who	re	ceived more than	\$100,000 of	
reportable compensation from the organizatio	n ▶									
										Yes No
3 Did the organization list any former office										
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ina	livid	ual						3
4 For any individual listed on line 1a, is the										
organization and related organizations gr										
individual										4
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y										5
Section B. Independent Contractors	co, comple	10 001	ieut	41 0 0	, 101	Sucit	U U I.	30 <i>11</i>		
Complete this table for your five highest com	pensated i	ndepe	ende	ent	con	tracto	rs t	hat received more	than \$100.000 o	f
compensation from the organization. Report of										

year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form 990 (2021)												Page 8
Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ye	es,	and F	ligl	hest Compensat	ed Employees (d	ontinue	ed)	
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	١,,			sition			Reportable	Reportable		timated	
	hours per week (list any	1 '				e than o is both		compensation	compensation from		ount of other	i
	hours for		id a director/trustee)				from the	related organizations		pensati	on	
	related	or Ind	악 등 등 약			Highest co	Fol	organization	(W-2/1099-MISC)		om the	
	organizations	livid	litu	icer	y en	ploy	Forme	(W-2/1099-MISC)		_	anizatio	
	below dotted line)	dividual t	Institutional		Key employee	t co	~				d related Inization	
	lille)	Individual trustee or director	al tn		yee	compensated ee				orga	iiiiZaliOi	13
		lee	trustee			sane						
			е			ated						
37) KENNETH SEGEL	3.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NON
38) RHODA SMOLOW	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NON
39) DR. JOEL SPALTER	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NON
40) MYRON D. STAYMAN	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NON
41) RONALD WERNER	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NON
42) ROBERT M. WIGODA, ESQ.	3.00							110112	1.01.2			
BOARD MEMBER	NONE	X						NONE	NONE			NON:
43) JOSEPH WOLFSON	3.00											
BOARD MEMBER	5.00	X						NONE	NONE			NON
44) ALAN WOLK	3.00											
BOARD MEMBER	NONE	X						NONE	NONE			NON
	·	1										
	-†											
	+	1										
1h Sub-total												
1b Sub-total c Total from continuation sheets to Part VII, \$	Section A		• •	• •	• •							
d Total (add lines 1b and 1c)	· =				• •							
2 Total number of individuals (including but not							re	ceived more than	\$100 000 of			
reportable compensation from the organization						o,			Ψ. σσ,σσσ σ.			
											Yes	No
3 Did the organization list any former office	car directo	or or	tri	ıcta	Δ.	kov o	mn	Jovee or highes	t compensated			
employee on line 1a? If "Yes," complete Sched										3		Х
4 For any individual listed on line 1a, is the organization and related organizations gr												
individual										4	Х	
										-	21	
5 Did any person listed on line 1a receive or for services rendered to the organization? <i>If "</i>)										5		Х
Section B. Independent Contractors	oo, comple	.0 001	1000	.,	, ,01	GUGIT	اتام	<u>.</u>				
Complete this table for your five highest con	npensated i	ndene	ende	nt	con	tracto	rs t	hat received more	than \$100 000 o	of		
compensation from the organization. Report												
year.						,			<u> </u>			
(Δ)								(B)		(C)		

y can.		
(A) SEE SCHEDULE O Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 8 8

Form 990 (2021) JEWISH NATIONAL FUND 13-1659627 Page 9

Part VIII Statement of Revenue

Par	t VII		nco or noto to an	viling in this Bort \	/111		
		Check if Schedule O contains a respo	inse or note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
Gra Nou	b	Membership dues					
S, (С	Fundraising events 1c	1,752,700.				
aft	d	Related organizations 1d					
i, ini	е	Government grants (contributions) 1e					
io S	f	All other contributions, gifts, grants,					
but		and similar amounts not included above . 1f	109,012,357.				
ĒŞ	g	Noncash contributions included in					
Ser	١.	lines 1a-1f <u>1g</u>		110 555 055			
	h	Total. Add lines 1a-1f		110,765,057.			
ø.			Business Code				
<u>Ķ</u>	2a	MISSION INCOME (TOURS)	900099	786,946.	786,946.		
Ser	b						
Z S	С						
gra Re	d						
Program Service Revenue	е						
п.	f	All other program service revenue		F06 046			
	g	Total. Add lines 2a-2f		786,946.			
	3	Investment income (including dividends,		10 400 000		34,265.	10,464,723.
		other similar amounts)	. [10,498,988. NONE		34,205.	10,464,723.
	4 5	Income from investment of tax-exempt bone		NONE			
	3	Royalties	(ii) Personal	NONE			
			+ ''				
	6a	Greek reme I I I I I	<u> </u>				
	b	Less: rental expenses 6b Rental income or (loss) 6c 342,107	. NONE				
	C	rtoritai moomo er (isse)		342,107.			342,107.
	d	Net rental income or (loss)	(ii) Other	342,107.			342,107.
	7a	sales of assets	(ii) Other				
		other than inventory 7a 603,644,775					
ø.	b	Less: cost or other basis	-				
venue	"	.	. 588.				
ķ		and sales expenses 7b 615,896,236 Gain or (loss) 7c -12,251,461					
å	d	Net gain or (loss)		-12,252,049.			-12,252,049.
Other R		` '		12,232,013.			12/232/0131
ŏ	8a	Gross income from fundraising events (not including \$ 1,752,700.					
		trains (mar maraning +					
		of contributions reported on line 1c) See Part IV line 18 8a	5,946,890.				
	<u> </u>	1c). See Part IV, line 18 8a Less: direct expenses 8b	3,065,609.				
	b	Net income or (loss) from fundraising events		2,881,281.			2,881,281.
	9a	Gross income from gaming					
	Ja	activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses 9b	NONE				
	C	Net income or (loss) from gaming activities		NONE			
	10a	Gross sales of inventory, less					
	'Va	returns and allowances	NONE				
	b	Less: cost of goods sold					
	C	Net income or (loss) from sales of inventory		NONE			
S			Business Code				
e go	11a	MISCELLANEOUS INCOME	900099	53,272.			53,272.
Miscellaneous Revenue	b						
ell:	C						
<u>်</u>	d	All other revenue					
Σ		Total. Add lines 11a-11d		53,272.			
	12	Total revenue. See instructions		113,075,602.	786,946.	34,265.	1,489,334.

Form **990** (2021)

JSA 1E1051 1.000 1997MY 702V

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX						
Do	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D)		
	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses		
	Grants and other assistance to domestic organizations			general enpended			
•	and domestic governments. See Part IV, line 21	10,264,260.	10,264,260.				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	791,589.	791,589.				
3	Grants and other assistance to foreign						
	organizations, foreign governments, and	45 014 155	45 014 155				
	foreign individuals. See Part IV, lines 15 and 16	45,814,155.	45,814,155.				
	Benefits paid to or for members	NONE					
5	Compensation of current officers, directors, trustees, and key employees	2,748,176.	1,703,869.	467,190.	577,117.		
6	Compensation not included above to disqualified						
	persons (as defined under section 4958(f)(1)) and	170177					
_	persons described in section 4958(c)(3)(B)	NONE	11 700 040	2 251 401	4 050 001		
	Other salaries and wages	19,038,422.	11,728,940.	3,251,401.	4,058,081.		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,441,625.	926,539.	228,711.	286,375.		
9	Other employee benefits	3,118,062.	1,979,733.	499,512.	638,817.		
10	Payroll taxes	1,456,725.	932,304.	233,076.	291,345.		
11	Fees for services (nonemployees):						
	Management	NONE		00.010			
	Legal	80,249.	10.680	80,249.			
	Accounting	186,536.	12,670.	173,866.			
	Lobbying	NONE					
	Professional fundraising services. See Part IV, line 17.	NONE 2,647,867.		2,647,867.			
	Investment management fees	2,047,007.		2,047,007.			
y	Other. (If line 11g amount exceeds 10% of line 25, column	2,792,234.	2,506,096.		286,138.		
12	(A), amount, list line 11g expenses on Schedule O.) Advertising and promotion	1,087,907.	780,367.	109,499.	198,041.		
13	Office expenses	3,893,953.	2,613,120.	393,769.	887,064.		
14	Information technology	NONE		,	· · · · · ·		
15	Royalties	NONE					
16	Occupancy	2,923,743.	2,097,984.	351,952.	473,807.		
17	Travel	928,748.	642,575.	110,404.	175,769.		
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials	NONE					
19	Conferences, conventions, and meetings	925,692.	746,780.	103,830.	75,082.		
20	Interest	NONE					
21	Payments to affiliates	NONE					
22	Depreciation, depletion, and amortization	692,688.	477,955.	69,269.	145,464.		
23	Insurance	382,805.	328,895.	40,382.	13,528.		
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 O.)						
_	MISSIONS	2,365,269.	2,232,562.	128,539.	4,168.		
-	TAXES & LICENSES	740,254.	630,813.	46,259.	63,182.		
	SPEAK/HONORARIUM FEES & PROM	669,622.	457,572.	82,478.	129,572.		
	EQUIPMENT AND LEASES	600,469.	419,684.	76,261.	104,524.		
	All other expenses	213,527.	177,075.	19,322.	17,130.		
	Total functional expenses. Add lines 1 through 24e	105,804,577.	88,265,537.	9,113,836.	8,425,204.		
26		, ,	, , , , , , , , , , , , , , , , ,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, -,		
					- 000 (222)		

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Part X Balance Sheet

	ai t A	Check if Schedule O contains a response or note to any line in this P	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	4,834,444.	1	3,952,459.
	2	Savings and temporary cash investments	69,396,344.	2	93,704,826.
	3	Pledges and grants receivable, net	50,032,819.	3	48,687,248.
	4	Accounts receivable, net	NONE	4	NON
	5	Loans and other receivables from 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	NONE	5	NONI
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONI
ts	7	Notes and loans receivable, net	150,375.	7	150,000.
Assets	8	Inventories for sale or use	NONE	8	NONI
Ř	9	Prepaid expenses and deferred charges	1,063,510.	9	1,036,399.
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 31, 292, 261.			
	b	Less: accumulated depreciation	17,610,376.	10c	16,937,169.
	11	Investments - publicly traded securities	276,963,342.	11	211,960,256.
	12	Investments - other securities. See Part IV, line 11	3,100,677.	12	3,439,176.
	13	Investments - program-related. See Part IV, line 11.	NONE		NONE
	14	Intangible assets	NONE		NONE
	15	Other assets. See Part IV, line 11	109,123,478.	15	101,691,546.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	532,275,365.	16	481,559,079.
	17	Accounts payable and accrued expenses	3,766,741.	17	2,329,260.
	18	Grants payable	4,959,343.	18	4,011,571.
	19	Deferred revenue	NONE		NONE
	20	Tax-exempt bond liabilities	NONE		NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE		NONE
w	22	Loans and other payables to any current or former officer, director,	NONE	<u> </u>	IVOIVI
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ij		controlled entity or family member of any of these persons	NONE	22	NONE
<u>e</u>	23	Secured mortgages and notes payable to unrelated third parties	4,784,689.	23	5,000,000.
	24	Unsecured notes and loans payable to unrelated third parties	NONE		NONE
	25	Other liabilities (including federal income tax, payables to related third	NONE	24	INOINI
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
		·	42,796,195.	25	41,250,098.
	26	of Schedule D	56,306,968.	26	52,590,929.
	20	Organizations that follow FASB ASC 958, check here ► X	30,300,900.	20	52,590,929.
Ses		and complete lines 27, 28, 32, and 33.			
aŭ	27	Net assets without donor restrictions	382,311,986.	27	244 257 002
Fund Balances	28	Net assets with donor restrictions.	93,656,411.	28	344,357,892. 84,610,258.
Б	20	Organizations that do not follow FASB ASC 958, check here ▶	93,030,411.	20	04,010,230.
		and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
Assets or	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSE		Retained earnings, endowment, accumulated income, or other funds			
t A	31	Total net assets or fund balances	475 060 205	31	420 060 150
Net	32 33		475,968,397.	32	428,968,150.
	၁၁	Total liabilities and net assets/fund balances	532,275,365.	33	481,559,079.

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Form 990 (2021) Page **12**

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		13,0		
2	Total expenses (must equal Part IX, column (A), line 25)	1	.05,8	04,	<u>577</u> .
3	Revenue less expenses. Subtract line 2 from line 1		7,2	71,	<u>025</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	4	175,9	68,	<u>397</u> .
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)		1,0	<u>63,</u>	<u>432</u> .
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	4	128,9	68,	<u> 150</u> .
Part	·				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain	on			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	d or			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		01-	3.7	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited of	on a			
	separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
	— · — · ·				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		2c	X	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?.		20		
	If the organization changed either its oversight process or selection process during the tax year, explain	n on			
0 -	Schedule O.	41			
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	tne	3a		Х
L	Single Audit Act and OMB Circular A-133?	the	Ja		77
b	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2021)

SCHEDULE A (Form 990)

Department of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Internal Revenue Service Go to www.irs

Name of the organization JEWISH NATIONAL FUND

Employer identification number

(K.	ERE.	N KAYEMETH LEISRAEL) INC.				13-1	059027
Pa	rt I	Reason for Public Cha	rity Status. (All	organizations must	comple	te this p	art.) See instructions	S.
The	org	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	neck only	one box.)	
1		A church, convention of chu	urches, or associa	tion of churches desc	ribed in s	section 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90).)		
3		A hospital or a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and st	tate:	•				
5		An organization operated		a college or universit	y owne	d or ope	erated by a governme	ental unit described in
		section 170(b)(1)(A)(iv). (C		•	•		, ,	
6		A federal, state, or local go	• •	rnmental unit describe	d in sec t	tion 170(b)(1)(A)(v).	
7	X	An organization that norma						om the general public
	described in section 170(b)(1)(A)(vi). (Complete Part II.)							
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)						
9		An agricultural research or	ganization describe	ed in section 170(b)(1)(A)(ix)	operated	d in conjunction with a	land-grant college
		or university or a non-land-	grant college of ag	griculture (see instruct	ions). E	nter the	name, city, and state o	f the college or
		university:						
10		An organization that norma receipts from activities rela support from gross investm acquired by the organization	ited to its exempt finent income and upon after June 30, 1	unctions, subject to c nrelated business tax 975. See section 509	ertain ex able inco (a)(2). (0	xceptions ome (les Complete	s; and (2) no more than s section 511 tax) from e Part III.)	n 331/3 % of its
11	_	An organization organized	•	•	•		` '` '	
12		An organization organized a	•	-	-			
		one or more publicly suppo	_					
		the box on lines 12a throug					•	=
а		Type I. A supporting orga			-			
		the supported organization				ajority of	f the directors or truste	es of the
		$_$ supporting organization. $oldsymbol{`}$						
b		Type II. A supporting org	· ·					- · · ·
		control or management of			the sam	e persor	ns that control or mar	age the supported
		organization(s). You must	-					
С		oxdot Type III functionally integral						lly integrated with,
		$_{_}$ its supported organizatior		•				
d		Type III non-functionally			-			
		that is not functionally into			-		•	d an attentiveness
		requirement (see instruct	•	-				
е		Check this box if the orga					* * * * * * * * * * * * * * * * * * * *	I, Type III
	_	functionally integrated, or						
T		ter the number of supported						
<u>g</u>		ovide the following information	1					6.0 4
	(I) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization our governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
				above (see instructions))	docu	ment?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Tot	al							

13-1659627

Schedule A (Form 990) 2021 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	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	72,035,087.	81,230,434.	85,126,908.	110,036,803.	110,765,057.	459,194,289.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE	
4	Total. Add lines 1 through 3	72,035,087.	81,230,434.	85,126,908.	110,036,803.	110,765,057.	459,194,289.	
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)						79,497,437.	
6	Public support. Subtract line 5 from line 4						379,696,852.	
	tion B. Total Support	(=) 2017	(b) 2040	(=) 2010	(4) 2020	(=) 2024	(f) Total	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	72,035,087. 10,574,000.	11,321,972.	85,126,908. 10,627,818.	10,036,803.	110,765,057.	459,194,289. 53,905,283.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on			5,534.		2,881,281.	2,886,815.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)SEE.SUPP.PAGE	3,500.	57,323.	58,628.	68,559.	53,272.	241,282.	
11	Total support. Add lines 7 through 10						516,227,669.	
12	Gross receipts from related activities, etc. (s	,				12	2,050,344.	
13	First 5 years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup			, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)	
	-			44		14	73.55 %	
14 15	Public support percentage for 2021 (li Public support percentage from 2020		-			15	72.75 %	
	331/3% support test - 2021. If the org							
	box and stop here . The organization q 331/3% support test - 2020 . If the org	ualifies as a pub	licly supported	organization			► X	
	this box and stop here. The organization	on qualifies as a	publicly suppor	ted organizatioi	n		▶ 🔲	
17a	10%-facts-and-circumstances test - 2	2021. If the org	anization did no	t check a box	on line 13, 16a	a, or 16b, and li	ne 14 is	
	10% or more, and if the organization	n meets the fac	cts-and-circumst	ances test, che	ck this box an	id stop here. E	xplain in	
	Part VI how the organization meets	the facts-and-c	ircumstances te	st. The organiz	ation qualifies	as a publicly so	upported	
	organization						▶ 📖	
b	10%-facts-and-circumstances test - 2	2020. If the org	ganization did no	ot check a box	on line 13, 16	a, 16b, or 17a,	and line	
	15 is 10% or more, and if the organization	zation meets the	e facts-and-circu	ımstances test,	check this box	and stop here	. Explain	
	in Part VI how the organization meets	s the facts-and-	-circumstances t	est. The organi	zation qualifies	as a publicly so	upported	
	organization							
18	Private foundation. If the organization instructions							

Page 2

Schedule A (Form 990) 2021 Page **3**

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.)

				, , , , , , , , , , , , , , , , , , ,	•	,	
	tion A. Public Support	(-) 0047	(h) 0040	(-) 0040	(4) 0000	(-) 0004	(6) T-4-1
_	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
3	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						
ıa	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
13	(Explain in Part VI.) Total support. (Add lines 9, 10c, 11,		+				
13	and 12.)						
14	First 5 years. If the Form 990 is for	the organizati	ion's first secon	l third fourth	or fifth tay ve	ar as a section	501(c)(3)
	organization, check this box and stop here .	ŭ	•		•		` ` ` `
Sec	tion C. Computation of Public Supp						
15	Public support percentage for 2021 (line 8,		•	mn (f))		15	%
16	Public support percentage from 2020 Schee	dule A, Part III, lii	ne 15			16	%
Sec	tion D. Computation of Investment						
17	Investment income percentage for 2021 (lin			13, column (f))		17	%
18	Investment income percentage from 2020 S					18	%
	331/3% support tests - 2021. If the org						
	17 is not more than 331/3 %, check this	-					
b	331/3% support tests - 2020. If the orga						
	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization of	did not check	a box on line 1	4, 19a, or 19b.	, check this bo	x and see instru	uctions >

JSA 1E1221 1.000 Schedule A (Form 990) 2021 Page **4**

Part IV Supporting Organizations

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

Section A. All	Supporting	Organizations
----------------	------------	----------------------

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

Yes No 3с 4a 4b 4c 5a 5b 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021 Page 5

Part	V 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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		•		
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		
Secti	on 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		
Secti	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously	_		
_	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
•		2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.		,	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instr		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
4	the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	24		
_		2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2021 JSA 1E1230 1.000 1997MY 702V

Schedule A (Form 990) 2021 Page **6**

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nization	s	
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizations r	nust complete Sectio	ns A through E.
Se	ction 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		
Se	ction B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Se	ction C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functiona	Ily integra	ited Type III supporting	g organization
	(see instructions).	, ,		- -

Schedule A (Form 990) 2021

 Schedule A (Form 990) 2021
 Page 7

Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Sect	ion D - Distributions				Current Year				
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1					
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed						
	organizations, in excess of income from activity			2					
3	3 Administrative expenses paid to accomplish exempt purposes of supported organizations 3								
4	Amounts paid to acquire exempt-use assets	4							
5	Qualified set-aside amounts (prior IRS approval required - p	provide details in Part VI)		5					
6	Other distributions (describe in Part VI). See instructions.		(6					
7	Total annual distributions. Add lines 1 through 6.			7					
8	Distributions to attentive supported organizations to which	the organization is resp	onsive						
	(provide details in Part VI). See instructions.	8							
9	9 Distributable amount for 2021 from Section C, line 6								
10	Line 8 amount divided by line 9 amount		1	0					
			/ii)		(iii)				

Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
C	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2017			
b	Excess from 2018			
С	Excess from 2019			
d	Excess from 2020			
е	Excess from 2021			

Schedule A (Form 990) 2021

Schedule A (Form 990 or 990-EZ) 2021 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part

III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II - OTHER INCO)ME					
DESCRIPTION	2017	2018	2019	2020	2021	TOTAL
MISCELLANEOUS REVENUE	3,500.	57,323.	58,628.	68,559.	53,272.	241,282.
TOTALS	3,500.	57,323.	58,628.	68,559.	53,272.	241,282.
:				=========		

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2021

Employer identification number

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-PF.

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

JEWISH NATIONAL FUND (KEREN KAYEMETH LEISRAEL) INC 13-1659627 Organization type (check one): Filers of: Section: |X|Form 990 or 990-EZ 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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it

must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

27

Name of organization JEWISH NATIONAL FUND
(KEREN KAYEMETH LEISRAEL) INC.

Employer identification number 13-1659627

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.								
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
1_	N/A	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
2	N/A	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
3	N/A	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
4	N/A	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
5_	N/A	\$\$_2,552,706.	Person X Payroll Noncash						

(Complete Part II for noncash contributions.)

Person Payroll

Noncash
(Complete Part II for noncash contributions.)

(d)

Type of contribution

(c) Total contributions

\$

(a)

No.

(b)

Name, address, and ZIP + 4

Name of organization JEWISH NATIONAL FUND

(KEREN KAYEMETH LEISRAEL) INC.

Employer identification number

13-1659627

	(KEREN KAYEMETH LEISRAEL) INC.	13-	-1059027
Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(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
	-		
		\ \$	
(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
		_	
			1

Page 4 Schedule B (Form 990) (2021)

Name of organization JEWISH NATIONAL FUND (KEREN KAYEMETH LEISRAEL) INC. 13-1659627 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Schedule B (Form 990) (2021)

Employer identification number

SCHEDULE D (Form 990)

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.

Open to Public

OMB No. 1545-0047

Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Name of the organization Employer identification number JEWISH NATIONAL FUND (KEREN KAYEMETH LEISRAEL) INC. 13-1659627 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 133 1 16,553,474. 2 Aggregate value of contributions to (during year) 6,345,492. 3 Aggregate value of grants from (during year) 28,332,886. Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 X Yes funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose X Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a а 2b 2c Number of conservation easements on a certified historic structure included in (a) С Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Pa	rt III Organizations Maintaini	ng Collections of	Art, Histo	rical Tre	asures,	or Other	Similar Ass	ets (c	ontinued	<u>, </u>
3	Using the organization's acquisition	n, accession, and	other recor	ds, check	any of	the follow	ring that mak	e sign	ificant us	e of its
	collection items (check all that app	ly):		_						
а	Public exhibition		d	Loan o	or exchan	ge prograi	m			
b	Scholarly research		е	Other						
С	Preservation for future generations									
4	Provide a description of the organ	nization's collections	s and expla	in how t	hey furth	er the or	ganization's e	exempt	purpose	in Part
	XIII.									
5	During the year, did the organization	on solicit or receive o	donations o	f art, histo	orical trea	sures, or	other similar	_		
	assets to be sold to raise funds rath	ner than to be maint	ained as pa	rt of the o	organizati	on's collec	ction?		Yes	No
	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1 a	Is the organization an agent, trus			-				not _	_	
	included on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement i	n Part XIII and com	plete the fol	lowing tab	ole:					
							Aı	mount		
С	Beginning balance					С				
d	Additions during the year					d				
e	Distributions during the year					е				
f	Ending balance					f		4.0	V	N.
	Did the organization include an am If "Yes," explain the arrangement i							_	Yes	No
		II Part Alli. Check ii	ere ii trie ex	фіапаціон	nas beer	provided	On Part Alli .			
Га	rt V Endowment Funds. Complete if the organiza	ation answered "Ye	es" on Fori	m 990 F	Part IV/ li	ne 10				
	Complete ii the organiza	(a) Current year	(b) Prior			ears back	(d) Three years	shack	(e) Four ye	ars hack
4.	Davissian of seas halossa	9,335,385.		9,106.		6,207.	6,995,8			0,222.
1a	Beginning of year balance	404,488.		0,000.		0,000.	700,0			0,000.
b	Contributions	404,400.	43	0,000.	40	0,000.	700,0	000.	30	0,000.
С	Net investment earnings, gains,	-1,158,790.	93	88,579.	1.8	7,962.	286,8	ana	3.0	1,177.
	and losses	1,130,130.	, ,	70,375.	10	7,702.	200,0	300.		
d	Grants or scholarships									
е	Other expenditures for facilities	133,086.	20	2,300.	19	5,063.	206,5	500.	17	5,500.
	and programs	1337000.	20	2,300.		3,003.	2007	-		37300.
f	Administrative expenses	8,447,997.	9.33	5,385.	8.16	9,106.	7,776,2	207.	6.99	5,899.
g 2	End of year balance									-,
a	Board designated or quasi-endown		%	f (iiile Tg,	COIGITITI (a)) Helu as	•			
b	Permanent endowment ▶ 100.0									
С	Term endowment ► NONE									
	The percentages on lines 2a, 2b, a	and 2c should equal	100%.							
3a	Are there endowment funds not in			tion that	are held	and admir	nistered for the	9		
	organization by:								Ye	s No
	(i) Unrelated organizations								3a(i)	X
	(ii) Related organizations								3a(ii)	Х
b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	ed as require	ed on Sch	edule R?				3b	
4	Describe in Part XIII the intended u	uses of the organiza	ition's endo	wment fur	nds.					
Pa	rt VI Land, Buildings, and Equ	uipment.	oo" on Eor	m 000 I	Oort I\/ I	no 110 (Soo Form Of)() Do	rt V lina	10
	Complete if the organization of property		r other basis		or other basis		cumulated		Book value	
			stment)		ther)		eciation	(*)	, Doon value	
1 a	Land				47,500				1,147	
b	Buildings				37,824		08,858.		15,528	
С	Leasehold improvements				11,211		09,974.			,237.
d	Equipment			9,2	95,726	. 9,0	36,260.		259	,466.
<u>e</u>	Other				/5: ::	12 :				
Tota	II. Add lines 1a through 1e. (Column	(d) must equal Fori	m 990, Part	X. columi	า (B), line	10c.)	▶		16,937	,169.

Schedule D (Form 990) 2021

JSA 1E1269 1.000

Schedule D (F	Form 990) 2021 JEWISH NATIONA	L FUND		13-1659627	7 Page
Part VII	Investments - Other Securities.				
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line	11b. See Form 990, Part X, line	e 12.
	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation: Cost or end-of-year market value	
(1) Financia	al derivatives				
(2) Closely	held equity interests				
(A)					
(B)					
(C) (D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments - Program Related.				
	Complete if the organization answered	l "Yes" on Form 990	, Part IV, line	11c. See Form 990, Part X, line	e 13.
	(a) Description of investment	(b) Book value		(c) Method of valuation:	
				Cost or end-of-year market value	
<u>(1)</u>					
(2)					
(3)					
(4)					
<u>(5)</u>					
<u>(6)</u>					
<u>(7)</u> (8)					
(9)					
	n (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answered	l "Yes" on Form 990	, Part IV, line	11d. See Form 990, Part X, line	e 15.
	(a) De	scription		(b) Book	value
(1)INV. I	HELD UNDER SPLIT-INT.			95,620	0,463.
	MENT IN REAL ESTATE				7,165.
	RTY HELD FOR SALE				4,000
	ICIAL INTEREST IN TRUST				5,986
	SURRENDER VALUE OF INSUR.				2,254
	OUS COINS AND MEDALS				3,510
	ITY DEPOSITS				3,014
(8)OTHER	IT RECEIVABLE				8,457. 6,697
	umn (b) must equal Form 990, Part X, col. (B) l	ine 15.)			
Part X	Other Liabilities.			101/03	1,310.
	Complete if the organization answered	l "Yes" on Form 990	, Part IV, line	11e or 11f. See Form 990, Par	t X,
	line 25.				
1.	(a) Descrip	tion of liability		(b) Book	value
(1) Feder	al income taxes				
	-INTEREST AGREEMENTS			41,250	0,098.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					

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

1997MY 702V 33

41,250,098.

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	56,156,463.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) 2d 1,063,432.		
e	Add lines 2a through 2d	2e	-54,271,272.
3	Subtract line 2e from line 1	3	110,427,735.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
·	Investment expenses not included on Form 990, Part VIII, line 7b 4a 2,647,867.		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	2,647,867.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	113,075,602.
Part		ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	103,156,710.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	103,156,710.
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 2,647,867.		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	2,647,867.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	105,804,577.
Provid	XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4b and 2b; Part III, lines 1a and 2b; Part III, lines 1a and 4b and 2b; Part III, lines 1a and 2b; Part III,		
z, Pan	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	iation	•
SEE	SUPPLEMENTAL PAGE		
-			

Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4:

THE PRIMARY OBJECTIVE OF THE ENDOWMENT IN THE NEAR TERM IS TO PRESERVE

THE NORMAL MARKET VALUE OF ITS ASSETS IN ORDER TO LIMIT REALIZED AND

UNREALIZED INVESTMENT LOSSES. THE SECONDARY OBJECTIVE OF THE ENDOWMENT IS

TO GROW THE VALUE OF ITS ASSETS AT A MODEST RATE TO ALLOW FOR CONTINUED

SUPPORT OF JNF'S OPERATIONS.

SCHEDULE D, PART X, LINE 2:

JEWISH NATIONAL FUND ADOPTED THE PROVISIONS OF ASC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. UNDER ASC 740, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL NOT BE SUSTAINED. THE IMPLEMENTATION OF ASC 740 HAD NO IMPACT ON THE ORGANIZATION'S FINANCIAL STATEMENTS. THE ORGANIZATION DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT WILL RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. THE ORGANIZATION HAS FILED FOR AND RECEIVED INCOME TAX EXEMPTIONS IN THE JURISDICTIONS WHERE IT IS REQUIRED TO DO SO. ADDITIONALLY, THE ORGANIZATION HAS FILED IRS FORM 990 TAX RETURNS, AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHEN IT IS REQUIRED. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING AUTHORITIES.

 Schedule D (Form 990) 2021
 JEWISH NATIONAL FUND
 13-1659627
 Page 5

Part XIII Supplemental Information (continued)

SCHEDULE D, PART XI, LINE 2D:

CHANGES IN VALUE OF SPLIT-INTEREST AGREEMENTS\$1,063,432

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

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

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Part I

Name of the organization JEWISH NATIONAL FUND

(KEREN KAYEMETH LEISRAEL) INC. 13-1659627 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1	For grantmakers. Does the orgother assistance, the grantees' award the grants or assistance?	eligibility for t	he grants or		tion criteria used to	X Yes No					
2	For grantmakers. Describe in I outside the United States.	Part V the org	anization's pro	ocedures for monitoring t	he use of its grants and	d other assistance					
3	Activities per Region. (The follow	ving Part I, line 3 table can be duplicated if additional space is needed.)									
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region					
(1)	MIDDLE EAST AND NORTH AFRICA	1	7	GRANTMAKING		45,814,155.					
(2)	MIDDLE EAST AND NORTH AFRICA	NONE	NONE	INVESTMENTS		225,000.					
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
(11)											
(12)											
(13)											
(14)											
(15)											
(16)											
(17)											
3a	Subtotal	1	7.			46,039,155.					
b	Total from continuation sheets to Part I										
С	Totals (add lines 3a and 3b)	1.	7.			46,039,155.					

 Schedule F (Form 990) 2021
 JEWISH NATIONAL FUND
 13-1659627
 Page 2

Part II	Grants and Other	Assistance to	Organizations or Entition	es Outside the United State	s. Complete if the organization	answered "Yes" on Form 990
	Part IV. line 15. for	any recipient v	who received more than	\$5.000. Part II can be duplicate	ed if additional space is needed	

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				GENERAL					
(1)			MIDDLE EAST/NORTH AFRICA	SUPPORT	147,046.	WIRE			
				GENERAL					
(2)			MIDDLE EAST/NORTH AFRICA	SUPPORT	50,000.	WIRE			
				GENERAL					
(3)			MIDDLE EAST/NORTH AFRICA	SUPPORT	115,000.	WIRE			
				GENERAL					
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT	70,000.	WIRE			
				GENERAL					
(5)			MIDDLE EAST/NORTH AFRICA	SUPPORT	481,000.	WIRE			
				GENERAL					
(6)			MIDDLE EAST/NORTH AFRICA	SUPPORT	37,500.	WIRE			
				GENERAL					
(7)			MIDDLE EAST/NORTH AFRICA	SUPPORT	100,000.	WIRE			
				GENERAL					
(8)			MIDDLE EAST/NORTH AFRICA	SUPPORT	37,000.	WIRE			
				GENERAL					
(9)			MIDDLE EAST/NORTH AFRICA	SUPPORT	75,000.	WIRE			
				GENERAL					
(10)			MIDDLE EAST/NORTH AFRICA	SUPPORT	8,000.	WIRE			
				GENERAL					
(11)			MIDDLE EAST/NORTH AFRICA	SUPPORT	50,000.	WIRE			
				GENERAL					
(12)			MIDDLE EAST/NORTH AFRICA	SUPPORT	110,000.	WIRE			
				GENERAL					
(13)			MIDDLE EAST/NORTH AFRICA	SUPPORT	20,000.	WIRE			
				GENERAL					
(14)			MIDDLE EAST/NORTH AFRICA	SUPPORT	264,000.	WIRE			
				GENERAL					
(15)			MIDDLE EAST/NORTH AFRICA	SUPPORT	10,025,000.	WIRE			
				GENERAL					
(16)			MIDDLE EAST/NORTH AFRICA	SUPPORT	339,250.	WIRE			

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a ta	ax	
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	> _	61
3	Enter total number of other organizations or entities	•	

Schedule F (Form 990) 2021

		== ====================================	9
Part II	Grants and Other Assistance to Organizations or	r Entities Outside the United States. Complete if the organization answered "Yes" on Form	m 990
<u> </u>	Part IV, line 15, for any recipient who received more	e than \$5,000. Part II can be duplicated if additional space is needed.	

1	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
	òrganization	section and EIN (if applicable)		grant	cash grant	cash disbursement	noncash assistance	of noncash assistance	valuation (book, FMV, appraisal, other)
				GENERAL					
(1)			MIDDLE EAST/NORTH AFRICA	SUPPORT	63,860.	WIRE			
				GENERAL					
(2)			MIDDLE EAST/NORTH AFRICA	SUPPORT	151,000.	WIRE			
				GENERAL					
(3)			MIDDLE EAST/NORTH AFRICA	SUPPORT	1,169,654.	WIRE			
				GENERAL					
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT	142,000.	WIRE			
				GENERAL					
(5)			MIDDLE EAST/NORTH AFRICA	SUPPORT	1,200,000.	WIRE			
				GENERAL					
(6)			MIDDLE EAST/NORTH AFRICA	SUPPORT	227,050.	WIRE			
				GENERAL					
(7)			MIDDLE EAST/NORTH AFRICA	SUPPORT	1,325,000.	WIRE			
				GENERAL					
(8)			MIDDLE EAST/NORTH AFRICA	SUPPORT	250,000.	WIRE			
				GENERAL					
(9)			MIDDLE EAST/NORTH AFRICA	SUPPORT	71,000.	WIRE			
				GENERAL					
(10)			MIDDLE EAST/NORTH AFRICA	SUPPORT	3,125,000.	WIRE			
				GENERAL					
(11)			MIDDLE EAST/NORTH AFRICA	SUPPORT	53,200.	WIRE			
				GENERAL					
(12)			MIDDLE EAST/NORTH AFRICA	SUPPORT	202,725.	WIRE			
				GENERAL					
(13)			MIDDLE EAST/NORTH AFRICA	SUPPORT	75,000.	WIRE			
				GENERAL					
(14)			MIDDLE EAST/NORTH AFRICA	SUPPORT	719,261.	WIRE			
				GENERAL					
(15)			MIDDLE EAST/NORTH AFRICA	SUPPORT	620,475.	WIRE			
				GENERAL					
(16)			MIDDLE EAST/NORTH AFRICA	SUPPORT	1,927,787.	WIRE			

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

Ochicadic i	(1 0111 330) 202 EWISH NATIONAL PONE	,	13 1037027						r agc 🛋
Part II	Grants and Other Assis	tance to Organiza	tions or Entities Outsid	de the United	d States. Complet	te if the org	anization answere	d "Yes" on	Form 990,
	Part IV, line 15, for any r	ecipient who recei	ved more than \$5,000. P	'art II can be	duplicated if addition	onal space is	needed.		
									I

1	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
•	organization	section and EIN (if applicable)	(c) Region	grant	cash grant	cash disbursement	noncash assistance	of noncash assistance	valuation (book, FMV, appraisal, other)
				GENERAL					
(1)			MIDDLE EAST/NORTH AFRICA	SUPPORT	498,000.	WIRE			
				GENERAL					
(2)			MIDDLE EAST/NORTH AFRICA	SUPPORT	695,000.	WIRE			
				GENERAL					
(3)			MIDDLE EAST/NORTH AFRICA	SUPPORT	163,500.	WIRE			
				GENERAL					
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT	23,110.	WIRE			
				GENERAL					
(5)			MIDDLE EAST/NORTH AFRICA	SUPPORT	35,100.	WIRE			
				GENERAL					
(6)			MIDDLE EAST/NORTH AFRICA	SUPPORT	129,000.	WIRE			
				GENERAL					
(7)			MIDDLE EAST/NORTH AFRICA	SUPPORT	362,000.	WIRE			
				GENERAL					
(8)			MIDDLE EAST/NORTH AFRICA	SUPPORT	237,864.	WIRE			
				GENERAL					
(9)			MIDDLE EAST/NORTH AFRICA	SUPPORT	465,000.	WIRE			
				GENERAL					
(10)			MIDDLE EAST/NORTH AFRICA	SUPPORT	100,000.	WIRE			
				GENERAL					
(11)			MIDDLE EAST/NORTH AFRICA	SUPPORT	3,356,893.	WIRE			
				GENERAL					
(12)			MIDDLE EAST/NORTH AFRICA	SUPPORT	724,205.	WIRE			
				GENERAL					
(13)			MIDDLE EAST/NORTH AFRICA	SUPPORT	760,000.	WIRE			
				GENERAL					
(14)			MIDDLE EAST/NORTH AFRICA	SUPPORT	25,000.	WIRE			
				GENERAL					
(15)			MIDDLE EAST/NORTH AFRICA	SUPPORT	2,188,153.	WIRE			
				GENERAL					
(16)			MIDDLE EAST/NORTH AFRICA	SUPPORT	1,712,000.	WIRE			

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

	(Form 990) 2021 EWISH NATIONAL		13-1659627	do the Unite	d Ctatas Comple	to if the orga	nization analys	rad "Vaa" an	Page 2					
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990 Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.													
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other					
				GENERAL										
(1)			MIDDLE EAST/NORTH AFRICA	SUPPORT	3,048,869.	WIRE								
				GENERAL										
(2)			MIDDLE EAST/NORTH AFRICA	SUPPORT	525,000.	WIRE								
				GENERAL										
(3)			MIDDLE EAST/NORTH AFRICA	SUPPORT	437,160.	WIRE								
				GENERAL										
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT	98,384.	WIRE								
				GENERAL										
(5)			MIDDLE EAST/NORTH AFRICA	SUPPORT	35,000.	WIRE								
				GENERAL										
(6)			MIDDLE EAST/NORTH AFRICA	SUPPORT	807,928.	WIRE								
				GENERAL										
(7)			MIDDLE EAST/NORTH AFRICA	SUPPORT	24,000.	WIRE								
				GENERAL										
(8)			MIDDLE EAST/NORTH AFRICA	SUPPORT	686,250.	WIRE								
				GENERAL										
(9)			MIDDLE EAST/NORTH AFRICA	SUPPORT	21,000.	WIRE								
				GENERAL										
(10)			MIDDLE EAST/NORTH AFRICA	SUPPORT	262,500.	WIRE								
				GENERAL										
(11)			MIDDLE EAST/NORTH AFRICA	SUPPORT	1,905,000.	WIRE								
				GENERAL										
(12)			MIDDLE EAST/NORTH AFRICA	SUPPORT	400,000.	WIRE								
				GENERAL										
(13)			MIDDLE EAST/NORTH AFRICA	SUPPORT	2,830,000.	WIRE								
(14)														
(15)														

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

(16)

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 JEWISH NATIONAL FUND
 13-1659627
 Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
10)							
11)							
12)							
13)							
14)							
15)							
16)							
17)							
18)							

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

"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)

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Yes

1997MY 702V

Supplemental Information Part V

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE F, PART I, LINE 2:

THE JEWISH NATIONAL FUND ("JNF") IS DEVOTED TO PROMOTING AND FURTHERING THE CULTURAL, PHYSICAL, SOCIAL, MEDICAL, AGRICULTURAL AND GENERAL WELFARE OF THE PEOPLE OF ISRAEL. ONE OF THE PRINCIPAL WAYS JNF ACCOMPLISHES THIS MISSION IS BY GRANTING FUNDS TO SUPPORT PROJECTS AND ORGANIZATIONS IN ISRAEL. ALL FUNDS GRANTED (AND REPORTED ON SCHEDULE F) ARE MADE TO ORGANIZATIONS LOCATED IN ISRAEL FOR THE PURPOSES OF BETTERING THE ISRAELI SOCIETY. JNF TAKES ITS RESPONSIBILITY OF MONITORING THESE PROJECTS VERY SERIOUSLY AND UNDERTAKES RIGOROUS PROCESSES TO ENSURE THAT THE FUNDS GRANTED ARE USED FOR THE PURPOSES INTENDED.

JNF ESTABLISHED THE ISRAEL RELATIONS COMMITTEE WHICH TRAVELS ANNUALLY TO ISRAEL TO STUDY IN-DEPTH THE NEEDS, REVIEW ONGOING PROJECTS, AND EVALUATE FUTURE PLANS. ISRAEL PROJECTS ARE CARRIED OUT BY JNF BOARD- APPROVED SELECT ISRAEL NOT-FOR-PROFIT ORGANIZATIONS. JNF STAFF IN ISRAEL MONITOR THE PROGRESS OF PROJECTS TO ENSURE THAT THEY ARE BEING IMPLEMENTED PROPERLY. REPRESENTATIVES IN ISRAEL SEND MONTHLY REPORTS BACK TO JNF ON

Part V Supplei

V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

THE STATUS OF ALL FUNDED PROJECTS IN ISRAEL.

SCHEDULE F, PART II:

JEWISH NATIONAL FUND MADE GRANTS TO THE FOLLOWING ORGANIZATIONS:

ADAM V'ADAMA HIGH SCHOOL \$264,000

IN COOPERATION WITH JNF, HASHOMER HACHADASH RECENTLY OPENED ADAM V'ADAMA LEADERS OF THE LAND HIGH SCHOOL AT HATZEVA TO TEACH STATE-OF-THE-ART ENVIRONMENTAL SCIENCE AND AGRICULTURAL SECURITY.

ALEH NEGEV (ADI NEGEV) \$10,025,000

A STATE-OF-THE-ART REHABILITATIVE VILLAGE IN THE NEGEV, ALEH NEGEV OFFERS UNPARALLELED CARE FOR PEOPLE WITH SEVERE DISABILITIES, EMPOWERING RESIDENTS AND OUTPATIENTS TO HELP THEM REACH THEIR POTENTIAL FOR COMMUNICATION AND DEVELOPMENT.

AMMUNITION HILL \$339,250

Supplemental Information Part V

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

AMMUNITION HILL VIVIDLY PORTRAYS THE SIEGE OF JERUSALEM IN THE '67 WAR AND SERVES AS AN EDUCATIONAL CENTER OF THE CRUCIAL BATTLE WAGED THERE FOR THE REUNIFICATION OF JERUSALEM.

AMUTAT DERECH ERETZ \$63,860

OPERATION OF AN EDUCATIONAL PROGRAM FOR YOUTH, SIX MONTHS PRIOR TO THEIR INDUCTION INTO THE MILITARY, TO CREATE A SUBSTANTIAL CHANGE IN THEIR LIVES WHICH WILL BE EXPRESSED IN MORE SIGNIFICANT MILITARY SERVICE, PURSUIT OF ACADEMIC EDUCATION AND INTEGRATION INTO FOCI OF INFLUENCE AND LEADERSHIP IN ISRAELI SOCIETY.

ARAD MUNICIPALITY \$151,000

ARAD IS A CITY IN THE SOUTHERN DISTRICT OF ISRAEL. IT IS LOCATED ON THE BORDER OF THE NEGEV AND THE JUDEAN DESERTS. JNF CONTINUES TO FUND THE YEHOSHAFAT PARK, ARAD MUSIC CONSERVATORY AND CAM TECH PROGRAMS.

ARAVA BUILDING AND DEVELOPMENT LTD \$147,046

JEWISH NATIONAL FUND-USA, THE UNIVERSITY OF ARIZONA, AND ISRAEL'S ARAVA

Supplemental Information Part V

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

REGIONAL COUNCILS HAVE FORMED THE KASSER JOINT INSTITUTE FOR FOOD, WATER AND ENERGY SECURITY WITH THE MISSION OF INTRODUCING INNOVATIVE TECHNOLOGY THAT BUILDS CAPACITY FOR FOOD, WATER, AND ENERGY SECURITY IN VULNERABLE COMMUNITIES IN ARID AND HYPER-ARID ENVIRONMENTS - WITH A FOCUS ON AFRICA. LEVERAGING THE EXISTING FACILITIES AND RESOURCES OF THE UNIVERSITY OF ARIZONA AND THE ARAVA REGION, THE JOINT INSTITUTE WILL PROMOTE APPLIED RESEARCH AND STUDENT TRAINING PROGRAMS. OVER THE NEXT FIVE YEARS, THE KASSER JOINT INSTITUTE WILL ESTABLISH MULTI-DISCIPLINARY PROGRAMS IN AFRICA TO PROVIDE TECHNOLOGY TRANSFER, APPLIED RESEARCH, KNOWLEDGE, TRAINING, ONGOING GUIDANCE, AND EDUCATION.

ARAVA INSTITUTE FOR ENVIRONMENTAL STUDIES \$1,169,654 THE ARAVA INSTITUTE FOR ENVIRONMENTAL STUDIES IS A WORLD-CLASS TEACHING AND RESEARCH CENTER IN SOUTHERN ISRAEL THAT PREPARES MUSLIM, CHRISTIAN, AND JEWISH STUDENTS TO COOPERATIVELY ADDRESS THE SHARED ENVIRONMENTAL CHALLENGES OF THE MIDDLE EAST.

ARAVA REGIONAL COUNCIL- CENTRAL ARAVA \$142,000

Part V Supplen

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

AS PART OF ITS BLUEPRINT NEGEV CAMPAIGN TO MAKE THE NEGEV HABITABLE TO

THE NEXT GENERATION OF ISRAEL'S RESIDENTS, JNF IS INVESTING IN THE ARAVA

IN AN EFFORT TO DOUBLE THE POPULATION OF THE REGION OVER THE NEXT DECADE.

THESE PROJECTS INCLUDE AN AQUATICS CENTER AND SPORTS CENTER.

ASSOCIATION FOR EMPLOYMENT DEVELOPMENT FOR THE NEGEV \$1,200,000

THE LAUDER EMPLOYMENT CENTER OFFERS COMPREHENSIVE CAREER SERVICES AND

PROVIDES GUIDANCE AND RESOURCES TO STUDENTS AND ALUMNI FOCUSED ON STAYING

IN THE NEGEV WORKING WITH BEN GURION UNIVERSITY.

ASSOCIATION FOR ISRAEL BASEBALL \$227,050

PROJECT BASEBALL GIVES THE CHILDREN OF ISRAEL AN OPPORTUNITY TO LEARN LIFE LESSONS WHILE BUILDING LASTING FRIENDSHIPS. JNF IS CURRENTLY CONSTRUCTING A FIELD FOR BASEBALL AND OTHER SPORTS IN BEIT SHEMESH.

ASSOCIATION FOR THE CULINARY INSTITUTE \$1,325,000

BASED IN THE HEART OF ISRAEL'S GALILEE THE GALILEE CULINARY INSTITUTE
BEING CONSTRUCTED BY JNF IS A ONE-OF-A-KIND CULINARY INSTITUTION THAT

Supplemental Information Part V

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

COMBINES CULINARY AND RESTAURANT EXPERTISE, TOURISM AND ENTREPRENEURSHIP.

BEER SHEVA MUNICIPALITY - LAKES PROJECTS \$250,000 MANY YEARS AGO, JNF RECOGNIZED THE DEVELOPMENT AND EXPANSION OF BE'ER SHEVA AS THE KEY TO MAKING THE NEGEV AN ATTRACTIVE PLACE FOR A NEW GENERATION OF ISRAELIS TO CALL HOME. JNF'S EFFORTS IN BE'ER SHEVA, HAVE CHANGED THE FACE OF THE CITY, AND, IN THE PAST INCLUDED THE RIVERPARK AND AMPHITHEATER.

BEIT SHEMESH BASEBALL \$71,000

SINCE 1994 BEIT SHEMESH HAS BEEN AN ACTIVE CITY FOR THE ISRAEL ASSOCIATION OF BASEBALL. THE MAJORITY OF THE PLAYERS ARE MADE UP OF NEW CITIZENS (IE OLIM) THAT IMMIGRATED FROM AMERICA & CANADA. JNF IS CONSTRUCTING A BASEBALL FIELD IN BEIT SHEMESH.

BEN GURION HERITAGE INSTITUTE \$50,000

THE HOME AND MUSEUM OF THE FIRST PRIME MINISTER OF ISRAEL. THE HEART OF THE HOUSE IS BEN-GURION'S STUDY WITH A LIBRARY OF 5,000 BOOKS (MOST OF

Schedule F (Form 990) 2021

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

HIS BOOKS REMAINED IN HIS HOUSE IN TEL AVIV, WHERE TILL TODAY THERE ARE OVER 22,000 BOOKS) COVERING HIS FIELDS OF INTEREST: JUDAISM AND THE BIBLE, PHILOSOPHY, HISTORY, GEOGRAPHY, THE IDF SECURITY AND MORE. THE LIBRARY REFLECTS HIS WIDE RANGE OF INTERESTS, AND THE MANY LANGUAGES HE SPOKE. IN THIS ROOM, BEN-GURION WROTE HIS MEMOIR, WHICH HE DEDICATED MOSTLY FOR ISRAEL'S YOUTH AND NEXT GENERATION.

BEYACHAD FUND \$3,125,000

SUPPORT AND DEVELOP AREAS IN NEGEV AND GALILEE. TO DATE JNF AND ITS
HOUSING DEVELOPMENT FUND HAVE DEVELOPED OVER 1300 HOUSING SITES PROVIDING
THE NECESSARY FUNDS TO COMMUNITIES FOR GROUND INFRASTRUCTURE COSTS.

BNEI SHIIMON REGIONAL COUNCIL \$115,000

RENOVATION AND EXPANSION OF WINGATE ADVENTURE PARK IN COMMUNITY OF GIVOT BAR

CHABAD OF DEAD SEA - BE INSCRIBED PROJECT \$53,200

PARTICIPATION IN THE SACRED ACT OF WRITING A SCROLL ON TOP OF MASADA.

Dort V Occasion

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

CHIMES ISRAEL \$70,000

FOR OVER 25 YEARS, CHIMES ISRAEL HAS BEEN THE LEADER IN DEVELOPING AND PROVIDING EXCEPTIONAL SUPPORT AND REHABILITATION SERVICES TO PEOPLE WITH SPECIAL NEEDS OF ALL AGES FROM NEWBORNS TO SENIORS, WITH INTELLECTUAL, DEVELOPMENTAL AND MENTAL DISABILITIES, REGARDLESS OF RACE, NATIONALITY OR RELIGION.

COOPERATIVE ASSOCIATION HALUTZA DAIRY \$2,830,000

DEAD SEA AND ARAVA SCIENCE CENTER \$202,725

THE UNIVERSITY OF ARIZONA (UA), JEWISH NATIONAL FUND, AND ISRAEL'S

PREMIER AGRICULTURE REGION (THE ARAVA) SIGNED A TRILATERAL MEMORANDUM OF

UNDERSTANDING (MOU) TO ESTABLISH THE JNF JOINT INSTITUTE FOR GLOBAL FOOD,

WATER, AND ENERGY SECURITY.

EILOT REGION- JOINT INSTITUTE FOR GLOBAL FOOD, WATER AND ENERGY SECURITY \$75,000

Schedule F (Form 990) 2021

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

THE JOINT INSTITUTE WILL INTRODUCE INNOVATIVE TECHNOLOGY AND BUILD CAPACITY FOR FOOD, WATER, AND ENERGY SECURITY IN VULNERABLE COMMUNITIES IN AFRICA AND AROUND THE WORLD.

ERETZ-IR - LAUDER EMPLOYMENT CENTER \$719,261

ERETZ-IR WORKS CLOSELY WITH THE LAUDER EMPLOYMENT CENTER IN PROVIDING

EMPLOYMENT OPPORTUNITIES THROUGHOUT THE NEGEV AND GALIL. IT AIMS TO

IMPROVE THE COMMUNAL FABRIC OF THE NEGEV THROUGH BUILDING NEW COMMUNITIES

AND STRENGTHENING EXISTING ONES, PROMOTING A SUSTAINABLE LOCAL ECONOMY

AND DEVELOPING CRUCIAL INFRASTRUCTURE AND SERVICES WHICH ARE LACKING IN

ISRAEL'S PERIPHERY.

FRIENDS OF PORIYA HOSPITAL ASSOCIATION \$481,000

OVERLOOKING THE SEA OF GALILEE, THE MEDICAL CENTER IS A THRIVING HUB OF MEDICAL EXCELLENCE AND PERSONAL COMMITMENT, SERVING THE CULTURALLY-DIVERSE POPULATION OF THE GALILEE AND THE JORDAN VALLEY.

FUND FOR DEVELOPING SDEROT - INDOOR RECREATION CENTER & OUTDOOR PARK FOR

Part V Supplem

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

CHILDREN \$620,475

JNF RENOVATED A 21,000 SQUARE FOOT SECURE INDOOR PLAYGROUND AND COMMUNITY CENTER. IN ADDITION, JNF IS CURRENTLY CONSTRUCTING A RESILIENCE CENTER IN SDEROT TO HELP THE COMMUNITY DEAL WITH STRESS AND ANXIETY FROM TERROR ATTACKS.

GUSH ETZION FDN \$37,500

THE GUSH ETZION FOUNDATION WAS ESTABLISHED IN 1997 TO ASSIST AND PROMOTE THE COMMUNITIES AND RESIDENTS OF GUSH ETZION.

HA'AMUTA LEKIDUM TOSHVEI HEVEL ESHKOL \$1,927,787

THE ESHKOL REGIONAL COUNCIL IS A REGIONAL COUNCIL IN THE NORTH-WESTERN NEGEV, IN ISRAEL'S SOUTHERN DISTRICT. THE REGION HAS BEEN A FREQUENT TARGET OF ROCKET ATTACKS AND INCENDIARY DEVICES FROM THE NEARBY GAZA STRIP, CAUSING FREQUENT DAMAGE TO FARMS AND SOME STRUCTURES WITHIN THE REGION. JNF'S PROJECTS INCLUDE THERAPY RESILIENCE CENTERS SECURITY AND FIREFIGHTING EQUIPMENT AND AN AFTER SCHOOL INDOOR RECREATION AND SCIENCE CENTER.

Schedule F (Form 990) 2021

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

HALUTZIT \$498,000

HALUTZA IS COMPRISED OF THREE COMMUNITIES: NAVEH, BNEI NETZARIM, AND SHLOMIT. PROJECTS HAVE INCLUDED THE HALUTZA MEDICAL CENTER, THE HALUTZA STUDENT PROGRAM, THE NAVEH SYNAGOGUE PROJECT, AND THE YOUNG FARMER'S INCUBATOR PROJECT.

HUGAY SAYARUT \$695,000

GREEN HORIZONS, KNOWN IN ISRAEL AS HUGEY SAYARUT, OFFERS OUTDOOR

EDUCATIONAL ACTIVITIES TO ISRAELI YOUTH IN GRADES 5-12. THE

TRANSFORMATIVE PROGRAM TAKES PARTICIPANTS ON HIKING AND CAMPING TRIPS

THROUGHOUT THE COUNTRY TO BUILD INTERPERSONAL AND LEADERSHIP SKILLS AND

FOSTER A STRONG CONNECTION TO THE LAND OF ISRAEL.

ISRAEL AIRFORCE ASSOCIATION \$163,500

RECREATION PROJECTS DESIGNATED FOR THE ISRAEL AIR FORCE WITHIN VARIOUS

AIR FORCE BASES WHERE JNF PREVIOUSLY CONSTRUCTED AN OUTDOOR WETLANDS AND

AMPHITHEATER.

Part V S

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

ISRAEL ASSOCIATION OF OCEANOGRAPHY \$23,110

DEVELOPING RESEARCH AND DEVELOPMENT IN THE PROTECTION OF ISRAEL'S MARINE, COASTAL AND FRESHWATER RESOURCES.

ISRAEL-ASIA CENTER \$35,100

ACTIVITIES DEDICATED TO BUILDING A SHARED FUTURE BETWEEN ISRAEL AND ASIA.

WORKING IN JOINT COOPERATION WITH THE ISRAEL ASIA CENTER.

JERUSALEM FOUNDATION \$129,000

THE JERUSALEM FOUNDATIONS MISSION IS TO SHAPE A MODERN, OPEN AND VIBRANT CITY BY CREATING COMMUNAL STRENGTH FOR ALL JERUSALEM RESIDENTS AND INSPIRING NEW GENERATIONS TO TAKE PART IN JERUSALEM'S FUTURE.

KEREN LEPITUAH SHLOMIT \$362,000

IN THE WESTERN NEGEV JNF IS CURRENTLY CONSTRUCTING A COMMUNITY CENTER FOR THE RESIDENTS OF SHLOMIT. IT WILL INCLUDE A 400 SEAT AUDITORIUM AND A CENTER FOR PERFORMING ARTS.

Schedule F (Form 990) 2021

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

KIBBUTZ KEREM SHALOM \$237,864

KIBBUTZ KEREM SHALOM IS LOCATED IN THE SOUTHWEST CORNER OF ISRAEL, 30

YARDS FROM THE GAZA BORDER. ABOUT 30 FAMILIES LIVE ON THE KIBBUTZ,

INCLUDING ALMOST 100 CHILDREN. THE RESIDENTS ARE YOUNG AND OLD, RELIGIOUS

AND SECULAR. WORKING CLASS PEOPLE. THERE IS LIMITED INDUSTRY ON THE

KIBBUTZ. MOST RESIDENTS WORK IN LOCAL AGRICULTURE AND TEACHING. OTHERS

HOLD JOBS IN NEIGHBORING COMMUNITIES. THE INFRASTRUCTURE OF THE KIBBUTZ

WITH THE HELP OF JNF HAS BEEN RENEWED.

KIRYAT SHEMONA - FOOD TECH CENTER -MINT PROPERTIES \$465,000

THE JNF FOOD INNOVATION CENTER WILL BE HOME TO RESEARCHERS DEVELOPING

FOOD SECURITY, AGRI-TECH, AND NEW HEALTHIER PRODUCTS TO HELP FEED THE

WORLD. UTILIZING THE STRATEGIC PARTNERING OF TEL HAI COLLEGE AND THE

REGIONAL RESEARCH CENTERS FOR AGRICULTURE AND WATER IN THE UPPER EASTERN

GALILEE, AND JEWISH NATIONAL FUND'S COLLABORATION IS POISED TO MAKE THE

UPPER EASTERN GALILEE A MAJOR WORLD FOOD CAPITOL.

Part V Supple

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

KIRYAT SHMONA MUNICIPALITY - MEDICAL CENTER PLANNING \$100,000

IN THE NORTHERN CITY OF KIRYAT SHEMONA JNF IS STEPPING IN TO IMPROVE THE QUALITY OF LIFE FOR RESIDENTS IN THE AREA; HELPING TO ESTABLISH MUCH-NEEDED MEDICAL SERVICES INCLUDING URGENT CARE, X-RAYS AND IMAGING, PEDIATRICS, AND A 24-HOUR PHARMACY.

KKL - AFFORESTATION AND OTHER \$3,356,893

AS AN INNOVATOR IN GREEN INNOVATIONS AND A PIONEER IN FOREST CREATION,

JNF HAS PLANTED MORE THAN 240 MILLION TREES IN ISRAEL, PROVIDING LUSCIOUS

BELTS OF GREEN COVERING MORE THAN 250,000 ACRES, AND INVESTS IN

AGRICULTURAL INFRASTRUCTURE DEVELOPMENT, RESEARCH, SOIL CONSERVATION, AND

FIREFIGHTING.

LOTEM INTEGRATED NATURE STUDIES \$724,205

LOTEM BRINGS PEOPLE WITH SPECIAL NEEDS CLOSER TO NATURE THROUGH FIELD TRIPS, ACCESSIBLE HIKES IN JNF'S FIRST INCLUSIVE PARK, AND CREATIVE WORKSHOPS IN NATURE, ADAPTED TO THE NEEDS OF PARTICIPANTS AND FOR PEOPLE OF ALL AGES.

Part V Sup

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

MAKOM LEKULAM KIDUM/NATIONAL COUNCIL ACTIVIST COMMUNITIES \$760,000 PROVIDING SOCIAL SERVICES TO BOTH NEW AND STRUGGLING COMMUNITIES TO INCREASE THE QUALITY OF LIFE AND ATTRACT NEW RESIDENTS.

MASLAN \$25,000

THE AIM OF MASLAN IS TO COMBAT THE SEXUAL AND DOMESTIC VIOLENCE IN THE NEGEV REGION.

MIDRESHET SDE BOKER \$100,000

MIDRESHET SDE BOKER, IS AN EDUCATIONAL CENTER AND BOARDING SCHOOL IN SOUTHERN ISRAEL. LOCATED IN THE NEGEV NEXT TO KIBBUTZ SDE BOKER, A LEADERSHIP PROGRAM WAS DEVELOPED AND FUINDED AT THE FIELD SCHOOL.

MOAAZA EZORIT HOF ASHKELON \$37,000

FIRE EQUIPMENT AND SAFETY EQUIPMENT FOR THE REGION.

NEFESH B'NEFESH \$2,188,153

Part V Suppleme

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

NEFESH B'NEFESH IS DEDICATED TO REVITALIZING ALIYAH BY REMOVING OR
MINIMIZING THE FINANCIAL, PROFESSIONAL, LOGISTICAL AND SOCIAL OBSTACLES
OF THE MOVE TO ISRAEL. JNF IS CURRENTLY CONSTRUCTING AND PARTNERING WITH
NEFESH B'NEFESH IN CREATING THE JERUSALEM ALIYA CENTER.

NEOT KEDUMIN \$75,000

NEOT KEDUMIM, THE BIBLICAL LANDSCAPE RESERVE IN ISRAEL IS A BIBLICAL GARDEN AND NATURE PRESERVE LOCATED NEAR MODI'IN, MIDWAY BETWEEN JERUSALEM AND TEL AVIV.

NETZARIM DEVELOPMENT (CHALUTZA MEDICAL CENTER) \$1,712,000

BENI NETZARIM IS ONE OF THREE COMMUNITIES IN HALUTZA WHICH IS LOCATED IN

THE NORTHWEST NEGEV ON ISRAEL'S BORDERS WITH EGYPT AND GAZA. JNF

CONSTRUCTED A MEDICAL CENTER TO PROVIDE MEDICAL SERVICES FOR THE REGION.

NEW GUARD ASSOCIATION \$3,048,869

ESTABLISHED IN 2007, HASHOMER HACHADASH, OR "THE NEW GUARDIANS," IS A VOLUNTEER ORGANIZATION DEDICATED TO SAFEGUARDING THE LAND IN THE NEGEV

Supplemental Information Part V

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

AND GALILEE AND UPHOLDING THE ZIONIST IDEALS ON WHICH THE STATE OF ISRAEL WAS FOUNDED. AS PART OF BLUEPRINT NEGEV AND GO NORTH, JNF HAS PARTNERED WITH HASHOMER HACHADASH TO TRAIN YOUNG JEWISH ZIONIST LEADERS ABOUT THE LAND OF ISRAEL AND THEIR CONNECTION TO ISRAEL, TO SUPPORT ITS VARIOUS PROGRAMMING AND OPPORTUNITIES FOR GLOBAL JEWRY TO STRENGTHEN THEIR BOND WITH THE LAND OF ISRAEL.

OLD AKKO & NAZARETH DEVELOPMENT COMPANY \$8,000 THE COMPANY'S AIM IS TO IMPLEMENT THE TASKS OUTLINED IN THE COMPANY'S STATUTE, NAMELY DEVELOP THE OLD CITY AND MAKE IT AN INTERNATIONAL TOURIST CITY.

OTZEM PRE- MILITARY TORAH ACADEMY \$50,000 FUNDS TO SUPPORT CONSTRUCTION TOWARDS THE ESTABLISHMENT OF AN OUTDOOR ADVENTURE PARK AT MECHINA IN NAVEH.

RAMAT HANEGEV REGION - YOUNG ADULT CENTER \$525,000

Schedule F (Form 990) 2021

Part V Supplemental Information

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RED MOUNTAIN THERAPEUTIC RIDING CENTER (GROFIT) \$437,160

RED MOUNTAIN THERAPEUTIC RIDING CENTER PROVIDES WEEKLY HORSEBACK RIDING THERAPY TO MORE THAN 200 CHILDREN AND ADULTS WITH PHYSICAL AND MENTAL DISABILITIES AS WELL AS EMOTIONAL AND BEHAVIORAL ISSUES IN ISRAEL'S REMOTE ARAVA REGION.

RENEWABLE ENERGY- EILAT \$98,384

THIS EILAT-EILOT RENEWABLE ENERGY INITIATIVE PROMOTES THE USE AND DEVELOPMENT OF RENEWABLE ENERGY AS A REGIONAL DEVELOPMENT CATALYST. THE GOAL IS TO TRANSFORM THE REGION INTO AN INTERNATIONAL CENTER FOR RESEARCH AND DEVELOPMENT OF TECHNOLOGIES THAT PRODUCE RENEWABLE ENERGY.

RIMON SCHOOL OF MUSIC \$110,000

THE SCHOOLS MISSION IS TO SERVE AS A CREATIVE CENTER OF INSPIRATION, ENCOURAGING STUDENTS TO EXPLORE, LEARN AND TRAIN, DEVELOPING PROFESSIONAL CAREERS IN MUSIC.

SHA'AR HANEGEV REGIONAL COUNCIL \$35,000

Schedule F (Form 990) 2021

Part V Supplemental Information

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CONSTRUCTION OF TREATMENT ROOMS, WAITING AREA, AND AN ACCESSIBLE BATHROOM

IN THE COMMUNITY RESILIENCE CENTER. INCLUDES FURNISHING, FULL A/V

APPARATUS, AND UNIQUE PEDIATRIC TREATMENT TOOLS SUCH AS SENSORY

EQUIPMENT.

SOCIETY OF FRIENDS FOR THE PRESERVATION OF HISTORICAL SITES IN ISRAEL (SPIHS) \$807,928

SOCIETY FOR PRESERVATION OF ISRAEL HERITAGE SITES WORKS TO LOCATE,
RESTORE, AND PRESERVE HERITAGE SITES ACROSS ISRAEL, INCLUDING THE ATLIT
IMMIGRATION CAMP AND THE AYALON INSTITUTE.

TARBUT MOVEMENT \$24,000

TARBUT IS A NATIONAL MOVEMENT OF PIONEERING YOUNG ARTISTS WHO RESIDE AND WORK AS TARBUT COMMUNITIES (URBAN KIBBUTZIM) IN WEAKENED TOWNS AND CITIES THROUGHOUT ISRAEL.

TEL AVIV UNIVERSITY \$20,000

TEL AVIV UNIVERSITY IS THE LARGEST, MOST COMPREHENSIVE AND MOST DYNAMIC

Supplemental Information Part V

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

RESEARCH AND TEACHING INSTITUTION IN ISRAEL, OFFERING THE COUNTRY'S MOST DIVERSIFIED RANGE OF STUDY AND RESEARCH FIELDS.

WESTERN GALILEE NOW \$686,250

WGN IS A CONSORTIUM OF SMALL TOURISM OPERATORS AND ARTISANAL BUSINESSES WHICH PROMOTES AWARENESS AND APPRECIATION FOR THE REGION'S BOUTIQUE WINES, FOOD, ART AND PRODUCE, ALONG WITH ITS CULTURAL DIVERSITY, HISTORIC TRADITIONS, AND OPERATES THE JNF VISITOR CENTER IN AKKO.

WOMAN TO WOMAN \$21,000

THE SHELTER PROVIDES PHYSICAL HAVEN AND EMOTIONAL SECURITY FOR ALL WOMEN ALL OVER THE COUNTRY.

YAD EZER LAHAVER \$262,500

THE FOUNDATION RUNS A 'WARM HOME' FOR HOLOCAUST SURVIVORS, SOUP KITCHENS FOR NEEDY FAMILIES AND CHILDREN AT RISK. AS A RULE THE FOUNDATION STRIVES TO HELP EVERY PERSON IN DISTRESS WHO TURNS TO THEM, AND NOT TO TURN AWAY ANY EMPTY-HANDED PERSON.

Schedule F (Form 990) 2021

1E1502 1.000

JSA

Supplemental Information Part V

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

YAD LAYELED HAMEYUCHAD \$1,905,000

INTEGRATES YOUTH WITH DISABILITIES INTO THE ISRAEL DEFENSE FORCES (IDF) AND LATER ON INTO ISRAEL SOCIETY.

YERUHAM ECONOMIC DEVELOPMENT \$400,000

YERUCHAM, ONE OF SIX TOWNS ESTABLISHED IN 1951 IN THE NORTHERN NEGEV, IS LOCATED LESS THAN HALF AN HOUR FROM BE'ER SHEVA. THE TOWN IS SITUATED IN A RIDGE BETWEEN TWO NATURAL RESOURCES, THE LARGE YERUCHAM LAKE PARK AND THE MACHTESH YERUCHAM (YERUCHAM CRATER). JNF IS ESTABLISHING A CENTRAL PARK IN THE TOWN OF YERUCHAM.

Schedule F (Form 990) 2021

JSA 1E1502 1.000

1997MY 702V 64

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

FORM 990, SCHEDULE F, PART IV:

THE JEWISH NATIONAL FUND INVESTS IN VARIOUS ALTERNATIVE INVESTMENTS, BOTH DOMESTICALLY AND INTERNATIONALLY. WHILE THE FUND MAY OWN THESE INVESTMENT VEHICLES, ITS OWNERSHIP IN (OR TRANSFERS TO) THESE INVESTMENTS MAY NOT RISE TO THE THRESHOLDS REQUIRED FOR FILING FORMS 926 OR 5471. TO THE EXTENT THAT THE FUND IS REQUIRED TO FILE EITHER FORM, THEY ARE SUBMITTED ALONG WITH ITS FORM 990-T, BUSINESS INCOME TAX RETURN.

Schedule F (Form 990) 2021

1997MY 702V

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public

Inspection

OMB No. 1545-0047

Employer identification number JEWISH NATIONAL FUND (KEREN KAYEMETH LEISRAEL) INC. Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events C g In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization contributions? col. (i) Yes No 1 2 3 6 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		grood recorpto greater than 40,000	0.								
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events					
			NY DINNER (event type)	PHILA. DINNER (event type)	(total number)	(add col. (a) through col. (c))					
ē			(event type)	(event type)	(total number)						
Revenue	1	Gross receipts	1,175,452.	711,978.	5,812,160.	7,699,590.					
Re	2	Less: Contributions	451,000.	140,500.	1,161,200.	1,752,700.					
		Gross income (line 1 minus line 2).	724,452.		4,650,960.	5,946,890.					
	4	Cash prizes	,			, ,					
		Noncash prizes									
ses		Rent/facility costs	CF 22F	15,000	071 000	1 051 417					
Sens	Ü	Rentinacinty costs	65,325.	15,000.	971,092.	1,051,417.					
Direct Expenses	7	Food and beverages	12,060.	29,064.	1,496,646.	1,537,770.					
Dire	8	Entertainment	36,369.	17,775.	381,703.	435,847.					
	9	Other direct expenses	17,002.	23,573.		40,575					
	10	Direct expense summary. Add lin	es 4 through 9 in colu	mn (d)		3,065,609.					
		Net income summary. Subtract li				2,881,281.					
Pa	rt l	Gaming. Complete if the org \$15,000 on Form 990-EZ, lin		Yes" on Form 990, I	Part IV, line 19, or	reported more than					
a)		\$ 10,000 0m 0m 000 22, m		(b) Pull tabs/instant		(d) Total gaming (add					
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)					
Revenue	1	Gross revenue									
ses	2	Cash prizes									
≅xper	3	Noncash prizes									
Direct Expenses	4	Rent/facility costs									
	5	Other direct expenses									
	6	Volunteer labor	Yes % No	Yes% No	Yes% No						
	7	Direct expense summary. Add lin	es 2 through 5 in colu	mn (d)							
	8	Net gaming income summary. Su	ubtract line 7 from line	1, column (d)							
9 a	ì	Enter the state(s) in which the orgalis the organization licensed to con If "No," explain:	anization conducts ga duct gaming activities	in each of these state	es?	Yes No					
10a k		Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No If "Yes," explain:									

Schedule G (Form 990) 2021

1997MY 702V 67

Sched	ule G (Form 990 or 990-EZ) 2021	13-1659627	7 Page 3
11	Does the organization conduct gaming activities with nonmembers?		$\overline{}$
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		
	formed to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility	13a	%
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books	and	
	records:		
	Name ►		
	Address >		
15 a	Does the organization have a contract with a third party from whom the organization receives g		
	revenue?		No
D	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ a	ind the	
_	amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:		
С	if res, enter name and address of the third party.		
	Nama N		
	Name ►		
	Address >		
	Address ►		
16	Gaming manager information:		
	Name ▶		
	Gaming manager compensation ▶\$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming pro		
	retain the state gaming license?	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt orga	nizations	
Par	or spent in the organization's own exempt activities during the tax year > \$ tV Supplemental Information. Provide the explanation required by Part I, line 2b, columns	(iii) and (v), and	
гаг	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition	` ' ' ' '	
	(see instructions).	iai iiiioiiiiatioii	
FORI	M 990, SCHEDULE G, PART II - EVENT ACTIVITIES:		
1 010	N 990, Bendbold O, I'mi II Byllin neilyllidd		
THE	JEWISH NATIONAL FUND OPERATES THROUGHOUT THE UNITED STATES IN PURSUIT		
	ITS CHARITABLE MISSION. THE ORGANIZATION CONDUCTS HUNDREDS OF SPECIAL		
	NT AND FUNDRAISING ACTIVITIES IN MULTIPLE JURISDICTIONS AND SO		
	TURING THE PRECISE INFORMATION FOR THE SCHEDULE G IS QUITE DIFFICULT.		
	ORGANIZATION ATTRIBUTES APPROXIMATELY 15% OF ALL SPECIAL EVENT		
	DRAISING INCOME AS BEING DERIVED FROM THE GOODS AND SERVICES COMPONENT		
	THE TICKET PRICE AND THUS THE COLUMN C BREAKOUT OF REVENUE (FOR THE		
	EVENTS) HAS BEEN CALCULATED USING THIS ALLOCATION METHODOLOGY.		
	ENSES ATTRIBUTABLE TO THESE EVENTS HAVE NOT BEEN CLASSIFIED AS THE		
	ER VOLUME OF EVENTS MAKES THIS VERY DIFFICULT TO CAPTURE ACCURATELY.		

Schedule G (Form 990 or 990-EZ) 2021

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

2021

OMB No. 1545-0047

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization JEWISH NATIONAL FUND)					Employer identificati	on number				
(KEREN KAYEMETH LEISRAEL) INC.						13-1659627					
Part I General Information on Grants an	d Assistance	е				'					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?											
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 noncash assistance	(h) Purpose of grant or assistance				
(1) AGUDATH ISRAEL OF AMERICA											
42 BROADWAY NEW YORK, NY 10004	13-5604164	501(C)(3)	50,000.				GENERAL SUPPORT				
(2) ALEH ISRAEL FOUNDATION											
PO BOX 4911 NEW YORK, NY 10185	30-0456686	501(C)(3)	250,000.				GENERAL SUPPORT				
(3) ALEXANDER MUSS INSTITUTE FOR ISRAEL EDU.											
78 RANDALL AVE ROCKVILLE CENTRE, NY 11570	59-0173782	501(C)(3)	2,125,727.				GENERAL SUPPORT				
(4) ALGEMEINER, INC											
788 EASTERN PKWY BROOKLYN, NY 11213	81-1236747	501(C)(3)	14,400.				GENERAL SUPPORT				
(5) ALS ASSOCIATION GOLD											
PO BOX 565 AGOURA HILLS, CA 91376	95-4163338	501(C)(3)	8,000.				GENERAL SUPPORT				
(6) ALZHEIMER DISEASE RESEARCH FDN											
34 WASHINGTON ST WELLESELY HILLS, MA 02481	52-2396428	501(C)(3)	8,000.				GENERAL SUPPORT				
(7) AMERICA FRIENDS OF RABBINICAL COLLEGE											
510 2ND ST LAKEWOOD, NJ 08701	13-3503955	501(C)(3)	35,000.				GENERAL SUPPORT				
(8) AMERICAN ASSOCIATES BEN GURION UNIVERSITY											
1001 AVE OF THE AMERICAS NEW YORK, NY 10018	23-7270753	501(C)(3)	20,200.				GENERAL SUPPORT				
(9) AMERICAN COMMITTEE FOR THE WEIZMANN INSTIT.											
633 THIRD AVE NEW YORK, NY 10017	13-1623886	501(C)(3)	12,200.				GENERAL SUPPORT				
(10) AMERICAN FRIENDS OF DAAS AHARON											
1527 CEDARWOOD DR LAKEWOOD, NJ 08701	82-4726889	501(C)(3)	10,000.				GENERAL SUPPORT				
(11) AMERICAN FRIENDS OF HEBRON YESHIVA											
1220 BROADWAY NEW YORK, NY 10001	13-6400352	501(C)(3)	10,000.				GENERAL SUPPORT				
(12) AMERICAN FRIENDS OF LEKET ISRAEL INC											
PO BOX 2090 TEANECK, NJ 07666	20-8202424	501(C)(3)	18,000.				GENERAL SUPPORT				
2 Enter total number of section 501(c)(3) and	government	organizations lis	ted in the line 1 tal	ole			144				
3 Enter total number of other organizations lis	ted in the line	1 table			<u> </u>	<u></u>					

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization JEWISH NATIONAL FUND	Employer identification number										
(KEREN KAYEMETH LEISRAEL) INC.	KEREN KAYEMETH LEISRAEL) INC.										
Part I General Information on Grants an	d Assistanc	е				•					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?											
Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.											
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 noncash assistance	(h) Purpose of grant or assistance				
(1) AMERICAN FRIENDS OF MAGEN DAVID ADOM											
6505 WILSHIRE BLVD LOS ANGELES, CA 90048	13-1790719	501(C)(3)	37,128.				GENERAL SUPPORT				
(2) AMERICAN FRIENDS OF MOSDOT ZERA YITZCHAK											
924 AVENUE O BROOKLYN, NY 11230	20-0793026	501(C)(3)	30,000.				GENERAL SUPPORT				
(3) AMERICAN FRIENDS OF SHALVA											
315 FIFTH AVENUE NEW YORK, NY 10016	56-2676533	501(C)(3)	8,000.				GENERAL SUPPORT				
(4) AMERICAN FRIENDS OF YAD ELIEZER											
410 GLENN RD JACKSON, NJ 08527	11-3459952	501(C)(3)	10,000.				GENERAL SUPPORT				
(5) AMERICAN FRIENDS OF YESHIVAT KOL TZOFAYICH											
25050 TWICKENHAM DRIVE BEACHWOOD, OH 44122	81-4354713	501(C)(3)	7,200.				GENERAL SUPPORT				
(6) AMERICAN GEERZ FOR LIFE											
3350 DRENNAN INDUSTRIAL LOOP N, COLORADO	47-5273403	501(C)(3)	213,519.				GENERAL SUPPORT				
(7) AMERICAN JEWISH COMMITTEE											
165 E 56TH ST NEW YORK, NY 10022	13-5563393	501(C)(3)	10,250.				GENERAL SUPPORT				
(8) ATLANTA JEWISH FEDERATION											
1440 SPRING STREET ATLANTA, GA 30309	58-1021791	501(C)(3)	15,000.				GENERAL SUPPORT				
(9) ATLANTA JEWISH FILM SOCIETY											
PO BOX 746371 ATLANTA, GA 30374	47-1260411	501(C)(3)	15,000.				GENERAL SUPPORT				
(10) BAIS MEDRASH EAST FIFTH INC											
419 E 5TH ST LAKEWOOD, NJ 08701	47-2308521	501(C)(3)	100,000.				GENERAL SUPPORT				
(11) BARNARD COLLEGE											
3009 BROADWAY NEW YORK, NY 10027	13-1628149	501(C)(3)	12,500.				GENERAL SUPPORT				
(12) BEIT SHLOMO INC											
1002 QUENTIN RD STE BROOKLYN, NY 11223	83-3062903	501(C)(3)	20,000.				GENERAL SUPPORT				
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	•	•									

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization JEWISH NATIONAL FUND	Employer identificat	Employer identification number									
(KEREN KAYEMETH LEISRAEL) INC.	13-1659627	13-1659627									
Part I General Information on Grants	and Assistanc	е									
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?											
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 noncash assistance	(h) Purpose of grant or assistance				
(1) BELEV ECHAD INC											
1766 2ND AVENUE NEW YORK, NY 10128	81-1569698	501(C)(3)	10,000.				GENERAL SUPPORT				
(2) BIRTHRIGHT ISRAEL FOUNDATION											
PO BOX 21615 NEW YORK, NY 10087	13-4092050	501(C)(3)	47,000.				GENERAL SUPPORT				
(3) BOCA RATON SYNAGOGUE											
7900 MONTOYA CIR N BOCA RATON, FL 33433	59-2446537	501(C)(3)	9,075.				GENERAL SUPPORT				
(4) BRANDEIS HILLEL DAY SCHOOL - MARIN											
180 N SAN PEDRO SAN RAFAEL, CA 94903	47-1253063	501(C)(3)	36,750.				GENERAL SUPPORT				
(5) BROTHERS FOR LIFE											
270 SOUTH HANFORD ST SEATTLE, WA 98134	91-2105756	501(C)(3)	25,000.				GENERAL SUPPORT				
(6) CARMEI HAIR INTERNATIONAL											
PO BOX 6084 CHICAGO, IL 91060	20-2069157	501(C)(3)	20,000.				GENERAL SUPPORT				
(7) CENTRAL FUND OF ISRAEL											
980 6TH AVENUE NEW YORK, NY 10018	13-2992985	501(C)(3)	514,500.				GENERAL SUPPORT				
(8) CHABAD JEWISH CENTER CHICO											
440 W 4TH ST CHICO, CA 95928	26-3335331	501(C)(3)	25,000.				GENERAL SUPPORT				
(9) CHABAD LUBAVITCH OF MYRTLE BEACH											
2803 N OAK ST MYRTLE BEACH, SC 29577	57-0852427	501(C)(3)	19,800.				GENERAL SUPPORT				
(10) CHABAD OF PARKLAND											
7170 LOXAHATCHEE RD PARKLAND, FL 33067	65-0946383	501(C)(3)	50,000.				GENERAL SUPPORT				
(11) CHABAD OF ROSLYN											
75 POWERHOUSE RD ROSLYN HEIGHTS, NY 11577	11-3235171	501(C)(3)	121,000.				GENERAL SUPPORT				
(12) CHABAD ON CAMPUS INTERNATIONAL											
719 EASTERN PARKWAY BROOKLYN, NY 11213	20-0078855	501(C)(3)	21,251.				GENERAL SUPPORT				
2 Enter total number of section 501(c)(3) as	nd government	organizations lis	sted in the line 1 tal	ble							
3 Enter total number of other organizations	listed in the line	1 table									

Department of the Treasury

Name of the organization JEWISH NATIONAL FUND

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.

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OMB No. 1545-0047

20**21**

Open to Public Inspection

Schedule I (Form 990) 2021

Employer identification number

(KEREN KAYEMETH LEISRAEL) INC.						13-1659627				
Part I General Information on Grants and	d Assistanc	е								
1 Does the organization maintain records to so	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	d' eligibility for the grant	s or assistance, and				
the selection criteria used to award the grant	s or assistand	e?					Yes No			
2 Describe in Part IV the organization's proced										
Part II Grants and Other Assistance to D	omestic Or	ganizations ar	nd Domestic Gov	vernments. Com	nplete if the organiz	ation answered "Y	/es" on Form 990			
Part IV, line 21, for any recipient the		_								
or government	(b) EIN	(if applicable)	grant grant	cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	noncash assistance	or assistance			
_(1) CHABAD-LUBAVITCH OF DELAWARE INC										
1811 SILVERSIDE RD WILMINGTON, DE 19810	22-2842237	501(C)(3)	30,000.				GENERAL SUPPORT			
(2) CHAI 4EVER										
1221 MADISON AVE LAKEWOOD, NJ 08701	46-4175755	501(C)(3)	15,000.				GENERAL SUPPORT			
(3) CHAYENU										
1526 UNION STREET BROOKLYN, NY 11213	80-0375542	501(C)(3)	8,000.				GENERAL SUPPORT			
(4) CHAZAK										
150 E 65TH ST NEW YORK, NY 10065	37-1972043	501(C)(3)	13,000.				GENERAL SUPPORT			
(5) CHOCHMAT SHLOMO USA INC										
17 WAVERLY PL MOSEY, NY 10952	04-3643224	501(C)(3)	20,000.				GENERAL SUPPORT			
(6) COMMITTEE FOR ACCURACY IN MIDDLE EAST REPOR										
PO BOX 35040 BRIGHTON, MA 02135	52-1332702	501(C)(3)	75,000.				GENERAL SUPPORT			
(7) COMMUNITY OF FRANCISCAN FRIARS OF THE RENEW										
421 EAST 155TH ST BRONX, NY 10455	13-3450836	501(C)(3)	15,000.				GENERAL SUPPORT			
(8) CONG MAGEN DAVID OF WEST DEAL										
395 DEAL RD OCEAN, NJ 07712	22-2177210	501(C)(3)	15,000.				GENERAL SUPPORT			
(9) CONGREGATION BETH AM										
5050 DEL MAR HEIGHTS RD SAN DIEGO, CA 92130	95-3754483	501(C)(3)	50,000.				GENERAL SUPPORT			
(10) CONGREGATION BETH SHALOM INC										
1801 BAYNARD BLVD WILMINGTON, DE 19802	51-0072863	501(C)(3)	20,000.				GENERAL SUPPORT			
(11) CONGREGATION CHEVRA SHAS										
1569 45TH ST BROOKLYN, NY 11219	23-7293069	501(C)(3)	18,000.				GENERAL SUPPORT			
(12) CONGREGATION EMANU-EL REDLANDS										
1495 FORD STREET REDLANDS, CA 92373	95-2113598	501(C)(3)	90,406.				GENERAL SUPPORT			
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole						
3 Enter total number of other organizations list	ted in the line	1 table	<u>.</u>	<u> </u>	<u> </u>	<u> </u>				

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

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Name of the organization JEWISH NATIONAL FUND	Employer identificat	Employer identification number									
(KEREN KAYEMETH LEISRAEL) INC.						13-1659627					
Part I General Information on Grants a	nd Assistanc	е				<u>'</u>					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?											
Part IV, line 21, for any recipient		_					,				
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 noncash assistance	(h) Purpose of grant or assistance				
(1) CONGREGATION NEVE SHALOM											
250 GROVE AVENUE METUCHEN, NJ 08840	22-1599193	501(C)(3)	12,520.				GENERAL SUPPORT				
(2) CONGREGATION RODEF SHOLOM OF MARIN											
170 N SAN PEDRO RD. SAN RAFAEL, CA 94903	94-6030040	501(C)(3)	70,000.				GENERAL SUPPORT				
(3) FJC											
520 EIGHTH AVE NEW YORK, NY 10018	13-3848582	501(C)(3)	18,000.				GENERAL SUPPORT				
(4) FLORIDA BREAST CANCER											
11900 BISCAYNE BLVD NORTH MIAMI, FL 33181	01-0694045	501(C)(3)	8,000.				GENERAL SUPPORT				
(5) FRIENDS OF CHABAD OF BOCA RATON											
17950 MILITARY TRAIL BOCA RATON, FL 33496	65-0591634	501(C)(3)	10,000.				GENERAL SUPPORT				
(6) FRIENDS OF ETHIOPIAN JEWS											
PO BOX 960059 BOSTON, MA 02196	06-1512486	501(C)(3)	12,289.				GENERAL SUPPORT				
(7) FRIENDS OF IDF											
6505 WILSHIRE BLVD LOS ANGELES, CA 90048	13-3156445	501(C)(3)	10,000.				GENERAL SUPPORT				
(8) FRIENDS OF LUBAVITCH											
7037 FRERET ST NEW ORLEANS, LA 70118	72-0791958	501(C)(3)	5,400.				GENERAL SUPPORT				
(9) FRIENDS OF OHEL SHELOMOH											
525 E 89TH STREET NEW YORK, NY 10128	13-4130696	501(C)(3)	11,000.				GENERAL SUPPORT				
(10) FRIENDS OF OROT FUND INC											
111 JOHN ST RM 1720 NEW YORK, NY 10038	83-2166765	501(C)(3)	20,000.				GENERAL SUPPORT				
(11) FRIENDS OF THE ARAVA INSTITUTE											
1320 CENTRE STREET NEWTON CENTRE, MA 02459	11-3485736	501(C)(3)	58,000.				GENERAL SUPPORT				
(12) FRIENDS OF THE ARAVA INSTITUTE											
1320 CENTRE STREET NEWTON CENTRE, MA 02459	11-3485736	501(C)(3)	50,000.				GENERAL SUPPORT				
2 Enter total number of section 501(c)(3) and	d government	organizations lis	sted in the line 1 ta	ble							
3 Enter total number of other organizations li	sted in the line	1 table									

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Department of the Treasury

Name of the organization JEWISH NATIONAL FUND

Internal Revenue Service

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

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OMB No. 1545-0047

2021

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Schedule I (Form 990) 2021

Employer identification number

(KEREN KAYEMETH LEISRAEL) INC.						13-1659627	
Part I General Information on Grants ar	nd Assistanc	е					
1 Does the organization maintain records to s	substantiate th	ne amount of the	e grants or assista	nce, the grantees	s' eligibility for the grant	s or assistance, and	
the selection criteria used to award the gran	nts or assistand	e?					Yes No
2 Describe in Part IV the organization's proce	edures for mor	nitoring the use	of grant funds in th	e United States.			
Part II Grants and Other Assistance to I	Domestic Or	ganizations a	nd Domestic Gov	vernments. Con	nplete if the organiz	ation answered "Y	es" on Form 990,
Part IV, line 21, for any recipient		•					,
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) FRIENDS OF THE ISRAEL DEFENSE FORCES							
60 EAST 42ND ST NEW YORK, NY 10165	13-3156445	501(C)(3)	16,250.				GENERAL SUPPORT
(2) FRIENDS OF UNITED HATZALAH							
208 EAST 51ST ST NEW YORK, NY 10022	11-3533002	501(C)(3)	120,000.				GENERAL SUPPORT
(3) FUEL FOR TRUTH, INC.							
47 ELDERBERRY RD SYOSSET, NY 11791	30-0129917	501(C)(3)	102,000.				GENERAL SUPPORT
(4) FUENTE LATINA							
7300 BISCAYNE BLVD MIAMI, FL 33138	47-1624899	501(C)(3)	8,000.				GENERAL SUPPORT
(5) GINDI MAIMONDIES ACADEMY							
8511 BEVERLY PLACE LOS ANGELES, CA 90048	95-3214146	501(C)(3)	6,000.				GENERAL SUPPORT
(6) GLOBAL VILLAGE PROJECT							
PO BOX 1548 DECATUR, GA 30031	26-4152199	501(C)(3)	10,000.				GENERAL SUPPORT
(7) GOTTESMAN RTW ACADEMY							
146 DOVER CHESTER RD RANDOLPH, NJ 07869	22-1833220	501(C)(3)	500,000.				GENERAL SUPPORT
(8) GREAT BIG YELLOW HOUSE							
1601 QUENTIN RD BROOKLYN, NY 11229	83-2927568	501(C)(3)	10,000.				GENERAL SUPPORT
(9) HEROES TO HEROES FOUNDATION							
96 LINWOOD PLAZA FORT LEE, NJ 07024	27-2037965	501(C)(3)	400,000.				GENERAL SUPPORT
(10) HILLEL FOUNDATION							
800 8TH STREET WASHINGTON, DC 20001	52-1844823	501(C)(3)	23,400.				GENERAL SUPPORT
(11) HOLOCAUST MEMORIAL FOUNDATION OF ILLINOIS							
9603 WOODS DRIVE SKOKIE, IL 60077	36-3156154	501(C)(3)	6,000.				GENERAL SUPPORT
(12) HUNTINGTON HOSPITAL							
270 PARK AVE HUNTINGTON, NY 11743	11-1630914	501(C)(3)	10,000.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ble		. •	
3 Enter total number of other organizations lis	sted in the line	1 table					

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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Name of the organization JEWISH NATIONAL FUND							Employer identification number	
(KEREN KAYEMETH LEISRAEL) INC.	13-1659627							
Part I General Information on Grants a	nd Assistanc	e						
 Does the organization maintain records to the selection criteria used to award the gra Describe in Part IV the organization's process Part II Grants and Other Assistance to 	nts or assistand edures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No	
Part IV, line 21, for any recipient		_					,	
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 noncash assistance	(h) Purpose of grant or assistance	
(1) IMAGINATION PRODUCTION								
11110 W OAKLAND PK BLVD SUNRISE, FL 33351	26-1264680	501(C)(3)	10,000.				GENERAL SUPPORT	
(2) IRANIAN AMERICAN JEWISH FEDERATION OF NY								
770 MIDDLE NECK RD GREAT NECK, NY 11024	01-0651843	501(C)(3)	30,000.				GENERAL SUPPORT	
(3) ISRAEL CAMPUS COALITION								
PO BOX 34640 WASHINGTON, DC 20043	30-0664947	501(C)(3)	850,000.				GENERAL SUPPORT	
(4) JACK M BARRACK HEBREW ACADEMY								
272 SOUTH BRYN MAWR AVE BRYN MAWR, PA 19010	23-1352614	501(C)(3)	357,258.				GENERAL SUPPORT	
(5) JELF								
4549 CHAMBLEE DUNWOODY RD ATLANTA, GA 30338	58-0568686	501(C)(3)	20,000.				GENERAL SUPPORT	
(6) JEWISH CENTER OF ATLANTIC BEACH								
PARK ST NASSAU AVE ATLANTIC BEACH, NY 11509	11-1752015	501(C)(3)	6,000.				GENERAL SUPPORT	
(7) JEWISH FAMILY & CAREER SERVICES								
4549 CHAMBLEE DUNWOODY RD ATLANTA, GA 30338	58-1479212	501(C)(3)	27,000.				GENERAL SUPPORT	
(8) JEWISH FEDERATION OF CHICAGO								
30 S WELLS ST CHICAGO, IL 60606	36-2167761	501(C)(3)	15,000.				GENERAL SUPPORT	
(9) JEWISH FEDERATION OF CINCINNATI								
8499 RIDGE ROAD CINCINNATI, OH 45236	31-0537174	501(C)(3)	35,000.				GENERAL SUPPORT	
(10) JEWISH FEDERATION OF DELAWARE								
101 GARDEN OF EDEN RD WILMINGTON, DE 19803	51-0064315	501(C)(3)	10,000.				GENERAL SUPPORT	
(11) JEWISH FEDERATION OF GREATER WASHINGTON								
6101 EEXECUTIVE BLVD	53-0212445	501(C)(3)	7,200.				GENERAL SUPPORT	
(12) JEWISH FUNDERS NETWORK								
150 WEST 30TH ST NEW YORK, NY 10001	23-2742482	501(C)(3)	125,000.				GENERAL SUPPORT	
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations li	•	•						

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

Employer identification number

13-1659627

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization JEWISH NATIONAL FUND

(KEREN KAYEMETH LEISRAEL) INC.

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

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

Open to Public ► Attach to Form 990. Inspection

Part I General Information on Grants ar	nd Assistanc	е					
1 Does the organization maintain records to	substantiate th	ne amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the gran	nts or assistand	e?					Yes No
2 Describe in Part IV the organization's proce	edures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to	Domestic Or	ganizations a	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" on Form 990,
Part IV, line 21, for any recipient	that received	more than \$5	,000. Part II can I	be duplicated if a	additional space is r	needed.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) JEWISH NEWS SERVICE							
PO BOX 610100 NEWTON, MA 02461	45-0949784	501(C)(3)	53,000.				GENERAL SUPPORT
(2) JINSA							
1101 14TH STREET NW WASHINGTON, DC 20005	52-1233683	501(C)(3)	22,500.				GENERAL SUPPORT
(3) KEREN TIFERET MENACHEM							
4921 NW 65TH AVE LAUDERHILL, FL 33319	85-3852853	501(C)(3)	20,000.				GENERAL SUPPORT
(4) LAKE GEORGE LAND CONSERVANCY							
PO BOX 1250 BOLTON LANDING, NY 12814	22-2902944	501(C)(3)	20,000.				GENERAL SUPPORT
(5) LAW FARE PROJECT							
633 THIRD AVE NEW YORK, NY 10017	27-2402908	501(C)(3)	55,000.				GENERAL SUPPORT
(6) LAWRENCE FAMILY JCC							
4126 EXECUTIVE DRIVE LA JOLLA, CA 92037	95-1985444	501(C)(3)	7,500.				GENERAL SUPPORT
(7) MACCABI USA							
1511 WALNUT STREET PHILADELPHIA, PA 19102	13-1810938	501(C)(3)	250,000.				GENERAL SUPPORT
(8) MARC LUSTGARTEN PANCREATIC CANCER FDN							
415 CROSSWAYS PARK DR WOODBURY, NY 11797	31-1611837	501(C)(3)	8,000.				GENERAL SUPPORT
(9) MARCUS JEWISH COMMUNITY CENTER OF ATLANTA							
5342 TILLY MILL ROAD DUNWOODY, GA 30338	58-0566126	501(C)(3)	12,000.				GENERAL SUPPORT
(10) MEDIA WATCH							
42 EAST 69TH STREET NEW YORK, NY 10021	57-1134998	501(C)(3)	48,928.				GENERAL SUPPORT
(11) MEMRI							
PO BOX 27837 WASHINGTON, DC 20036	52-2068483	501(C)(3)	22,500.				GENERAL SUPPORT
(12) MERKOS LINYONEI CHINUCH LUBAVITCH OF IL							
2833 W HOWARD ST CHICAGO, IL 60645	26-1763882	501(C)(3)	15,000.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole		. •	
3 Enter total number of other organizations lis	sted in the line	1 table					

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. Name of the organization JEWISH NATIONAL FUND

OMB No. 1545-0047

Open to Public Inspection

Schedule I (Form 990) 2021

Employer identification number

(KEREN KAYEMETH LEISRAEL) INC.						13-1659627	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to s the selection criteria used to award the grant Describe in Part IV the organization's process 	ts or assistand	e?			• •		Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient t		•					es" on Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) MICHAEL J FOX FOUNDATION							
PO BOX 4777 NEW YORK, NY 10163	13-4141945	501(C)(3)	8,000.				GENERAL SUPPORT
(2) MITZVAH MAN FOUNDATION							
4419 13TH AVE BROOKLYN, NY 11219	27-1865978	501(C)(3)	6,000.				GENERAL SUPPORT
(3) MOHONK PRESERVE, INC.							
PO BOX 715 NEW PALTZ, NY 12561	14-1609484	501(C)(3)	50,000.				GENERAL SUPPORT
(4) MY CHILD'S CANCER							
437 MADISON AVE NEW YORK, NY 10022	47-1443808	501(C)(3)	10,000.				GENERAL SUPPORT
(5) NATIONAL COUNCIL OF YOUNG ISRAEL - LA							
9317 W PICO BLVD LOS ANGELES, CA 90035	95-3075173	501(C)(3)	18,800.				GENERAL SUPPORT
(6) NATIONAL COUNCIL OF YOUNG ISRAEL - WOODMERE							
859 PENINSULA BLVD WOODMERE, NY 11598	11-2062398	501(C)(3)	14,500.				GENERAL SUPPORT
(7) NATIONAL SOCIETY FOR HEBREW DAY SCHOOLS							
620 FOSTER AVE BROOKLYN, NY 11230	13-5564128	501(C)(3)	20,000.				GENERAL SUPPORT
(8) NEW JERSEY YMHA							
21 PLYMOUTH ST FAIRFIELD, NJ 07004	22-1487266	501(C)(3)	36,000.				GENERAL SUPPORT
(9) OHR TORAH STONE INSTITUTIONS OF ISRAEL							
49 W 45TH ST NEW YORK, NY 10036	13-3275531	501(C)(3)	29,000.				GENERAL SUPPORT
(10) ORTHODOX UNION'S OU- JLIC YAHNEH							
11 BROADWAY NEW YORK, NY 10004	13-5623717	501(C)(3)	150,000.				GENERAL SUPPORT
(11) PENN HILLEL							
215 SOUTH 39TH ST PHILADELPHIA, PA 19104	23-1365179	501(C)(3)	20,000.				GENERAL SUPPORT
(12) REUT, USA							
21550 OXNARD ST WOODLAND HILLS, CA 91367	20-3585888	501(C)(3)	75,000.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	ŭ	· ·					

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

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

Schedule I (Form 990) 2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization JEWISH NATIONAL FUND

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.

Open to Public Inspection Employer identification number

(KEREN KAYEMETH LEISRAEL) INC.						13-1659627	
Part I General Information on Grants a	nd Assistanc	е					
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assista	nce, the grantees	deligibility for the grant	s or assistance, and	
the selection criteria used to award the gra	nts or assistand	e?					Yes No
2 Describe in Part IV the organization's proc	edures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to	Domestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" on Form 990.
Part IV, line 21, for any recipient		_					,
				· ·	· · · · · · · · · · · · · · · · · · ·		(h) Durage of great
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
_(1) RIMON CLUB							
1055 RIVERTON DR SAN CARLOS, CA 94070	46-1334084	501(C)(3)	10,000.				GENERAL SUPPORT
(2) RODNEY STREET TENNIS AND TUTORING ASSOC.							
101 GARDEN OF EDEN RD WILMINGTON, DE 19803	01-0652445	501(C)(3)	10,000.				GENERAL SUPPORT
(3) SCOTTSDALE TORAH CENTER							
13402 N SCOTTDALE RD SCOTTSDALE, AZ 85254	11-3750517	501(C)(3)	7,500.				GENERAL SUPPORT
(4) SEACREST FOUNDATION							
211 SAXONY ROAD ENCINITAS, CA 92024	30-0119295	501(C)(3)	10,000.				GENERAL SUPPORT
(5) SHAAREI TESHOUVA							
915 AVENUE O BROOKLYN, NY 11230	13-7120571	501(C)(3)	10,000.				GENERAL SUPPORT
(6) SHELTER INC							
PO BOX 5368 CONCORD, CA 94250	68-0117241	501(C)(3)	20,000.				GENERAL SUPPORT
(7) SHLOMOS TENT							
13920 LANDSTAR BLVD ORLANDO, FL 32824	46-4921810	501(C)(3)	20,000.				GENERAL SUPPORT
(8) SHRINERS HOSPITALS FOR CHILDREN							
PO BOX 31356 CINCINNATI, OH 45227	36-2193608	501(C)(3)	8,000.				GENERAL SUPPORT
(9) SIXTH & I							
600 I STREET NW WASHINGTON, DC 20001	33-1036146	501(C)(3)	50,000.				GENERAL SUPPORT
(10) SONOMA COUNTY CHABAD JEWISH CENTER							
2461 SUMMERFIELD ROAD SANTA ROSA, CA 95404	02-0673727	501(C)(3)	120,000.				GENERAL SUPPORT
(11) ST. JUDE CHILDREN'S RESEARCH HOSPITAL							
262 DANNY THOMAS PL MEMPHIS, TN 38105	62-0646012	501(C)(3)	8,000.				GENERAL SUPPORT
(12) STAND WITH US							
PO BOX 811355 BOCA RATON, FL 33481	01-0566033	501(C)(3)	50,000.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and	d government	organizations lis	sted in the line 1 tal	ble		•	
3 Enter total number of other organizations I	isted in the line	1 table	<u> </u>	<u> </u>	<u> </u>	<u>.</u> . >	

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

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

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

Schedule I (Form 990) 2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization JEWISH NATIONAL FUND

► Attach to Form 990.

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

Open to Public Inspection Employer identification number

(KEREN KAYEMETH LEISRAEL) INC.						13-1659627	
Part I General Information on Grants and	d Assistanc	е					
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	deligibility for the grant	s or assistance, and	
the selection criteria used to award the grant	s or assistand	e?					Yes No
2 Describe in Part IV the organization's proced							
Part II Grants and Other Assistance to D	omestic Or	nanizations ar	nd Domestic Gov	vernments Com	nlete if the organiz	ation answered "V	
Part IV, line 21, for any recipient the		_					C3 OH FOIH 330,
			1	· ·	·		
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 noncash assistance	(h) Purpose of grant or assistance
_(1) STANDWITHUS							
PO BOX 341069 LOS ANGELES, CA 90034	01-0566033	501(C)(3)	25,000.				GENERAL SUPPORT
(2) TAMID ISRAEL							
8705 COLLESVILLE RD SILVER SPRING, MD 20910	27-0546893	501(C)(3)	250,000.				GENERAL SUPPORT
(3) TEMPLE BETH EL							
3610 DUNDEE ROAD NORTHBROOK, IL 60062	36-2261619	501(C)(3)	21,000.				GENERAL SUPPORT
(4) TEMPLE BETH TIKVA							
9955 COLEMAN RD. ROSWELL, GA 30075	58-1754983	501(C)(3)	35,000.				GENERAL SUPPORT
(5) TEMPLE EMANUEL OF CLOSTER							
180 PIERMONT RD CLOSTER, NJ 07624	22-1589223	501(C)(3)	10,350.				GENERAL SUPPORT
(6) THE AMERICAN FRIENDS OF MIGDAL OHR							
1325 AVE OF THE AMERICAS NEW YORK, NY 10019	13-3389558	501(C)(3)	20,000.				GENERAL SUPPORT
(7) THE CENTER FOR INDEPENDENT DOCUMENTARY							
1300 SOLIDERS FIELD ROAD BRIGHTON, MA 02135	04-2738458	501(C)(3)	10,000.				GENERAL SUPPORT
(8) TIERRASANATA FOUNDATION							
BOX 406 SAN DIEGO, CA 92124	26-2581124	501(C)(3)	12,000.				GENERAL SUPPORT
(9) TIKVA CHILDRENS HOME							
8 HENDERSON DR WEST CALDWELL, NJ 07006	22-3779212	501(C)(3)	25,200.				GENERAL SUPPORT
(10) UN WATCH							
PO BOX 5872 WASHINGTON, DC 20016	45-1683502	501(C)(3)	40,000.				GENERAL SUPPORT
(11) UNION OF ORTHODOX JEWISH CONGREGATION							
9831 W PICO BLVD LOS ANGELES, CA 90035	13-5623717	501(C)(3)	37,500.				GENERAL SUPPORT
(12) UNITED JEWISH APPEAL FED. OF JEWISH PHILAN.							
130 E 59TH ST NEW YORK, NY 10022	51-0172429	501(C)(3)	30,150.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ble		▶	
3 Enter total number of other organizations lis	ted in the line	1 table	<u>.</u>	<u>.</u>	<u> </u>	<u></u> . ▶	

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization JEWISH NATIONAL FUND

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

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

Open to Public ► Attach to Form 990. Inspection Employer identification number

(KEREN KAYEMETH LEISRAEL) INC.						13-1659627	
Part I General Information on Grants a	nd Assistanc	е					
1 Does the organization maintain records to	substantiate th	ne amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	
the selection criteria used to award the gra			-	_			Yes No
2 Describe in Part IV the organization's proce							
Part II Grants and Other Assistance to	Domestic Or	ganizations a	nd Domestic Gov	vernments Com	nlete if the organiz	ation answered "\	
Part IV, line 21, for any recipient		_					C3 0111 01111 000,
				· ·	•		
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNITED JEWISH FEDERATION OF UTAH							
2 N MEDICAL DR SALT LAKE CITY, UT 84113	87-0282380	501(C)(3)	10,000.				GENERAL SUPPORT
(2) UNITED STATES SAILING FOUNDATION						İ	
1 ROGER WILLIAMS UNI. WAY BRISTOL, RI 02089	22-2667411	501(C)(3)	50,000.				GENERAL SUPPORT
(3) UNIVERSITY OF ARIZONA FOUNDATION						İ	
1111 N CHERRY AVE TUCSON, AZ 85721	86-6050388	501(C)(3)	172,862.				GENERAL SUPPORT
(4) UNIVERSITY OF MARYLAND						İ	
4603 CALVERT RD COLLEGE PARK, MD 20740	52-2197313	501(C)(3)	10,000.				GENERAL SUPPORT
(5) UNIVERSITY OF VERMONT						İ	
411 MAIN STREET BURLINGTON, VT 05401	45-1556038	501(C)(3)	100,000.				GENERAL SUPPORT
(6) VALLEY CENTER FIRE						İ	
28234 LILAC ROAD VALLEY CENTER, CA 92082		GOVERNMENT	10,000.				GENERAL SUPPORT
(7) WEST COAST KOLLEL						İ	
1901 AVE OF THE STARS LOS ANGELES, CA 90067	88-1279294	501(C)(3)	100,000.				GENERAL SUPPORT
(8) WOMEN'S CANCER RESOURCE CENTER						İ	
2908 ELLSWORTH ST BERKELEY, CA 94705	94-3131204	501(C)(3)	15,000.				GENERAL SUPPORT
(9) YESHIVA OF LOS ANGELES GIRLS HIGH SCHOOL						İ	
1619 S ROBERTSON BLVD LOS ANGELES, CA 90035	20-3081128	501(C)(3)	72,000.				GENERAL SUPPORT
(10) YOUNG AMERICA'S FOUNDATION						İ	
11480 COMMERCE PARK DRIVE RESTON, VA 20191	23-7042029	501(C)(3)	25,000.				GENERAL SUPPORT
(11) YULA GIRLS HIGH SCHOOL						İ	
1619 S ROBERTSON BLVD LOS ANGELES, CA 90035	20-3081128	501(C)(3)	250,000.				GENERAL SUPPORT
(12) ZERO-THE END PF PROSTRATE CANCER						İ	
515 KING ST ALEXANDRIA, VA 22314	59-3400922	501(C)(3)	8,000.			I	GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and	d government	organizations lis	sted in the line 1 tal	ole		▶	
3 Enter total number of other organizations li	sted in the line	1 table				>	

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

Schedule I (Form 990) 2021

Schedule I (Form 990) (2021) JEWISH NATIONAL FUND 13-1659627 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 scholarships	263	791,589.			
2					
3					
4					
5					
6					
7					

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

SCHEDULE I, PART I, LINE 2:

THE JEWISH NATIONAL FUND PRINCIPALLY ONLY MAKES GRANTS TO NOT-FOR-PROFIT ORGANIZATIONS OUTSIDE THE UNITED STATES (IN ISRAEL). HOWEVER,

OCCASIONALLY, JNF WILL SEND FUNDS THAT ARE INTENDED TO SUPPORT AN ISRAELI ORGANIZATION TO ITS U.S. BASED "FRIENDS OF" ORGANIZATION. IN ADDITION,

JNF WILL SUPPORT U.S. ORGANIZATIONS THAT ADOPT A SIMILAR TAX-EXEMPT MISSION AS JNF SO LONG AS THE ORGANIZATION DEMONSTRATES A PROJECT THAT SATISFIES JNF'S PROGRAMMATIC STANDARDS. JNF ENSURES THAT ALL GRANT RECIPIENTS ARE SECTION 501(C)(3) ORGANIZATIONS AND WILL REQUIRE PERIODIC

Schedule I (Form 990) (2021) JEWISH NATIONAL FUND 13-1659627 Page 2

Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	
	Part III can be duplicated if additional space is needed.	

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
_ 2					
3					
_4					
_ 5					
_ 6					
_7					

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

REPORTS FROM THE GRANTEE INFORMING JNF OF THE STATUS ON FUNDED PROJECTS.

SCHEDULE I, PART III:

JNF PROVIDES CERTAIN SCHOLARSHIPS TO STUDENTS OR EDUCATORS AS IT RELATES
TO JNF'S MISSION. ONE TYPE OF SCHOLARSHIP GIVEN BY JNF IS BASED ON THE
RECOMMENDATIONS OF THE INDIVIDUAL'S SCHOOL, WHICH IS REVIEWED AND
APPROVED BY JNF. ANOTHER TYPE OF SCHOLARSHIP IS FOR THE JNF FACULTY
FELLOWSHIP PROGRAM WHEREBY JNF REVIEWS APPLICATIONS AND APPROVES ON A
CASE BY CASE BASIS AND THEN WORKS WITH THOSE EDUCATORS UPON THEIR RETURN

Schedule I (Form 990) (2021)

Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
_ 2					
3					
_4					
_ 5					
_ 6					
_7					

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

FROM ISRAEL.

Compensation InformationFor 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

Department of the Treasury Internal Revenue Service Name of the organization

(KEREN KAYEMETH LEISRAEL) INC.

JEWISH NATIONAL FUND

Employer identification number 13-1659627

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 Travel for companions Tax indemnification and gross-up payments Discretionary spending account Payments for business use of personal use Personal services (such as maid, chauffeur, chef) 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 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? 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 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: Receive a severance payment or change-of-control payment? 4 Dearticipate in or receive payment from an equity-based compensation arrangement? If "Yes" on yof 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not	Part	Questions Regarding Compensation			
990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel				Yes	No
First-class or charter travel Travel for companions Tax indemnification and gross-up payments Tax indemnification and gross-up payments Tax indemnification and gross-up payments Tax indemnification and gross-up payments Tax indemnification and gross-up payments Tax indemnification and gross-up payments Tax indemnification and gross-up payments Tax indemnification and gross-up payments Tax indemnification fees Personal services (such as maid, chauffeur, chef) 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 If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reveal and the explain or provision of all of the expenses described above? If "No," complete Part III to explain If any of the boxes on line 1 are checked, did the organization follow a written policy regarding payment or reveal and in the explain of the organization or all of the explain organization or all of the expenses described above? If "No," complete Part III to explain in Carolina (Complete Part III) If "Yes" to any of the following the organization used to establish the compensation of the organization or a related organization or a related organization or a related organization. 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. 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: Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The organization? Tax The o	1a				
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Discretionary spending account		Travel for companions Payments for business use of personal residence			
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organization or a related organization: a Receive a severance payment or change-of-control payment?		X Form 990 of other organizations X Approval by the board or compensation committee			
organization or a related organization: a Receive a severance payment or change-of-control payment?	4	During the year did any person listed on Form 900. Part VII. Section A line 1a, with respect to the filing			
a Receive a severance payment or change-of-control payment?	-				
b Participate in or receive payment from a supplemental nonqualified retirement plan?	а		4a		Х
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b Any related organization?	а		5a		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: a The organization?	b		5b		Х
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b Any related organization? 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. 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. 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		compensation contingent on the net earnings of:			
b Any related organization? 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. 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. 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	а	The organization?	6a		Х
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	b		6b		Х
payments not described on lines 5 and 6? If "Yes," describe in Part III					
payments not described on lines 5 and 6? If "Yes," describe in Part III	7	For persons listed on Form 990. Part VII. Section A. line 1a. did the organization provide any nonfixed			
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			7		Х
in Part III	8				
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
		in Part III	8		Х
Regulations section 53.4958-6(c)? 9	9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
		Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2021

Schedule J (Form 990) 2021 JEWISH NATIONAL FUND 13-1659627 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.

(A) Name and Title		(B) Breakdown of W-2 a	nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(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	
MATTHEW BERNSTEIN	(i)	322,182.	NONE	NONE	34,372.	9,390.	365,944.	NONE	
1 CHIEF PLANNED GIVING OFFICER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
STEPHEN BACH	(i)	289,574.	NONE	2,038.	30,450.	10,870.	332,932.	NONE	
2 CHIEF ADMINISTRATIVE OFFICER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
YAEL KANE	(i)	231,036.	NONE	NONE	24,764.	9,382.	265,182.	NONE	
3 CHIEF ISRAEL ADVOCACY AND LEAD	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
MICHAEL FEINMAN	(i)	203,816.	NONE	NONE	22,459.	11,005.	237,280.	NONE	
4 EXECUTIVE DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
SHARON FREEDMAN	(i)	247,681.	NONE	1,277.	25,996.	2,272.	277,226.	NONE	
5 NATIONAL CAMPAIGN DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
DIANE SCAR	(i)	250,608.	NONE	NONE	27,118.	10,038.	287,764.	NONE	
6 NATIONAL CAMPAIGN DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
DEBBIE FREEDMAN	(i)	224,045.	NONE	NONE	23,585.	1,110.	248,740.	NONE	
7 EXECUTIVE VP, GREATER NY	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
RUSSELL ROBINSON	(i)	793,070.	NONE	1,627.	57,242.	6,709.	858,648.	NONE	
8 CEO	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
MITCHEL ROSENZWEIG	(i)	358,989.	NONE	1,531.	35,787.	3,628.	399,935.	NONE	
9 CFO	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
RICHARD KROSNICK	(i)	290,589.	NONE	1,519.	30,450.	6,632.	329,190.	NONE	
10 CHIEF DEVELOPMENT OFFICER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
	(i)								
	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

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.

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number 13-1659627

JEWISH NATIONAL FUND

FORM 990 PART VI, SECTION A, LINE 6:

THE MEMBERS OF THE ORGANIZATION ARE THE DIRECTORS OF JNF-USA, A 501(C)(3) RELATED ORGANIZATION.

FORM 990 PART VI, SECTION A, LINE 7A:

THE MEMBERS OF THE CORPORATION HAVE THE RIGHT TO ELECT THE DIRECTORS OF THE CORPORATION AND AMEND THE ORGANIZATION'S BY-LAWS.

FORM 990, PART VI, SECTION B, LINE 11:

THE FORM 990 WAS PREPARED BY A NATIONALLY RECOGNIZED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. BEFORE FILING, THE FORM 990 IS REVIEWED BY MANAGEMENT AND DISTRIBUTED TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENT. IF ANY ISSUES SHOULD ARISE, IT IS DISCUSSED WITH THE CFO. IF THERE ARE CHANGES, IT IS RECIRCULATED TO THE BOARD OF DIRECTORS FOR APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C:

THE JEWISH NATIONAL FUND'S ("JNF") CONFLICT OF INTEREST POLICY EXISTS TO PROTECT JNF AND ASSIST THE STAFF, VOLUNTEERS, AND MEMBERS OF ITS GOVERNING ENTITIES IN MAKING ETHICAL DECISIONS THAT BENEFIT JNF AS A WHOLE, NOT JUST A PARTICULAR INDIVIDUAL OR PARTIES ASSOCIATED WITH JNF. THIS POLICY IS INTENDED TO SUPPLEMENT, BUT NOT REPLACE ANY APPLICABLE STATE LAWS THAT GOVERN CONFLICTS OF INTEREST. AS A PUBLICLY FUNDED ORGANIZATION, THE ETHICAL CONDUCT MUST BE OF THE HIGHEST STANDARDS. NOT ONLY SHOULD ACTUAL CONFLICT OF INTEREST BE AVOIDED BUT ALSO THE

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.

OMB No. 1545-0047 **Open to Public** Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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13-1659627 JEWISH NATIONAL FUND APPEARANCE OF, PERCEPTION OF, OR POTENTIAL FOR A CONFLICT OF INTEREST AS

A PERSON ASSOCIATED WITH JNF, THERE IS DUTY TO DISCLOSE, ON AN ANNUAL BASIS OR WHEN A SITUATION ARISES, OTHER OBLIGATIONS THAT MIGHT PREVENT ONE FROM ACTING IN THE BEST INTEREST OF JNF AND THEN REMOVE ONESELF FROM DISCUSSIONS, ACTIONS, VOTES OR OTHER ACTIVITIES IN RELATION TO THE CONFLICT SHOULD AN ISSUE ARISE THAT COULD BE POTENTIAL CONFLICT OF INTEREST, THERE IS A DUTY TO JNF TO NOTIFY A SUPERIOR, OR A GOVERNING ENTITY CHAIR, OF THE SITUATION.

THE APPROPRIATE PARTIES WOLLD INVESTIGATE AND MAKE A DETERMINATION DEPENDING UPON THEIR DETERMINATION, THE PARTY MAY BE ASKED TO REMOVE HIS/HERSELF FROM PARTICIPATION IN DISCUSSIONS OR VOTES RELATED TO THE CONFLICT OR POTENTIAL CONFLICT. THE POTENTIAL CONFLICT OF INTEREST WILL BE INVESTIGATED BY THE APPROPRIATE PARTIES IF IT RELATES TO A MEMBER OF THE GOVERNING ENTITY, OR THE SENIOR STAFF, THEN IT WILL BE TURNED OVER TO THE ADMINISTRATION COMMITTEE THAT IS NOT INVOLVED IN THE CONFLICT IF IT INVOLVES A MEMBER OF THE STAFF OR A VOLUNTEER, A COMMITTEE AND OTHER APPROPRIATE SENIOR STAFF WILL MAKE THE DETERMINATION.

ONCE THE COMMITTEE HAS MADE ITS DETERMINATION AND PRESENTS ALTERNATIVES, THE PARTIES INVOLVED MAY BE ASKED TO- ABSTAIN FROM VOTING ON THE ACTION -REMOVE YOURSELVES FROM ANY DISCUSSION RELATING TO THE CONFLICT - REFRAIN FROM DISCUSSING THE ISSUE WITH OTHER COWORKERS, VOLUNTEERS OR GOVERNING ENTITY SO AS NOT TO INFLUENCE THEIR ACTIONS - CONSIDER OTHER ACTIONS, DEPENDING ON THE SITUATION CONFLICT OF INTEREST STATEMENTS ARE COMPLETED

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.

OMB No. 1545-0047

2021

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Employer identification number

JEWISH NATIONAL FUND

13-1659627

YEARLY BY ALL PERSONNEL AND ARE REVIEW BY MANAGEMENT TO MONITOR POSSIBLE CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15:

JNF HAS ADOPTED PROCEDURES TO ENSURE THAT THE COMPENSATION IT PAYS TO ITS

TOP EXECUTIVE (RUSSELL ROBINSON) AND THE REST OF ITS MANAGEMENT TEAM AND

STAFF IS COMMENSURATE WITH THE INDUSTRY IN WHICH IT SERVES. THE CEO'S

COMPENSATION IS DETERMINED BY JNF'S COMPENSATION COMMITTEE AFTER

REVIEWING VARIOUS PERFORMANCE BASED METRICS AND THE COMPENSATION OF

SIMILARLY SITUATED EXECUTIVES AT PEER INSTITUTIONS. JNF LAST CONDUCTED A

COMPENSATION STUDY FOR MR. ROBINSON IN 2019 AND UTILIZED THOSE

RECOMMENDATIONS TO DETERMINE HIS COMPENSATION. ALL COMPENSATION DECISIONS

ARE MEMORIALIZED IN THE COMPENSATION COMMITTEE MEETING MINUTES. FOR ALL

OTHER INDIVIDUALS REPORTED ON THE FORM 990, COMPENSATION IS DETERMINED BY

THE CEO. JNF'S BUDGET & FINANCE COMMITTEE DETERMINES THE ANNUAL SALARY

BUDGET WHICH MUST THEN BE APPROVED BY THE FULL BOARD OF DIRECTORS. THE

CEO UTILIZES THE ANNUAL BUDGET COMPENSATION POOL TO DETERMINE SALARY

INCREASES FOR ALL JNF EMPLOYEES (INCLUSIVE OF THE EXECUTIVES).

FORM 990, PART VI, SECTION C, LINE 19:

UPON REQUEST, THE ORGANIZATION WILL MAKE AVAILABLE ONLY THOSE DOCUMENTS REQUIRED TO BE DISCLOSED UNDER THE PUBLIC INSPECTION LAWS.

FORM 990, PART X, LINE 32, NET ASSETS:

AMOUNTS UNAVAILABLE FOR GENERAL EXPENDITURES WITHIN ONE YEAR, DUE TO:

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.

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number

e of the organization	Employer identification number
WISH NATIONAL FUND	13-1659627
RESTRICTED BY DONORS WITH PURPOSE RESTRICTIONS	\$19,514,963
RESTRICTED BY DONORS WITH TIME RESTRICTIONS	53,659,599
RESTRICTED BY DONORS IN PERPETUITY	11,435,696
TOT AMTS UNAVAILABLE FOR GENERAL EXPENDITURES W/IN 1 YEAR	\$84,610,258
AMOUNTS UNAVAILABLE TO MANAGEMENT WITHOUT BOARD'S APPROVAL:	:
BOARD DESIGNATED FOR BORUCHIN ISRAEL ADVOCACY CENTER	112,602,764
BOARD DESIGNATED FOR JNF INITIATIVES FUND	55,587,613
BOARD DESIGNATED FOR BUILDINGS FUND	3,090,014
TOT AMTS UNAVAILABLE TO MANAGEMENT W/OUT BOARD'S APPROVAL	
TOTAL FIN. ASSETS AVAILABLE TO MGMT. FOR GENERAL EXPENDITUR	
NET ASSETS	\$428,968,150

LIQUIDITY MANAGEMENT:

THE ORGANIZATION MAINTAINS A POLICY OF STRUCTURING ITS FINANCIAL ASSETS

TO BE AVAILABLE AS ITS GENERAL EXPENDITURES, LIABILITIES, AND OTHER

OBLIGATIONS COME DUE.

ADDITIONALLY, THE ORGANIZATION HAS BOARD-DESIGNATED NET ASSETS WITHOUT DONOR RESTRICTIONS THAT, WHILE THE ORGANIZATION DOES NOT INTEND TO SPEND

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.

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JEWISH NATIONAL FUND 13-1659627

THESE FOR PURPOSES OTHER THAN THOSE IDENTIFIED, THE AMOUNTS COULD BE MADE AVAILABLE FOR CURRENT OPERATIONS, IF NECESSARY.

FORM 990, PART XI, LINE 9:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS\$1,063,432

Name of the organization

JEWISH NATIONAL FUND

Employer identification number

13-1659627

FORM 990, PART III - PROGRAM SERVICE

LINE 4A, PROGRAM SERVICE

A NONPROFIT ORGANIZATION AND UNITED NATIONS NGO (NON-GOVERNMENTAL ORGANIZATION), JEWISH NATIONAL FUND (JNF) GIVES ALL GENERATIONS OF JEWS A UNIQUE VOICE IN BUILDING A PROSPEROUS FUTURE FOR THE LAND AND PEOPLE OF ISRAEL. JNF BEGAN IN 1901 AS A DREAM AND VISION TO REESTABLISH A HOMELAND IN ISRAEL FOR JEWISH PEOPLE EVERYWHERE. JEWS THE WORLD OVER COLLECTED COINS IN ICONIC BLUE BOXES, PURCHASING LAND AND PLANTING TREES UNTIL ULTIMATELY, THEIR DREAM OF A JEWISH HOMELAND WAS A REALITY.

JNF STRIVES TO BRING AN ENHANCED QUALITY OF LIFE TO ALL OF ISRAEL'S RESIDENTS AND TRANSLATE THESE ADVANCEMENTS TO THE WORLD BEYOND. JNF IS "GREENING" THE DESERT WITH MILLIONS OF TREES, BUILDING THOUSANDS OF PARKS ACROSS ISRAEL, CREATING QUALITY OF LIFE OPPORTUNITIES IN ISRAEL'S NORTH AND SOUTH FOR NEW GENERATIONS OF ISRAELIS TO CALL HOME, BOLSTERING ISRAEL'S WATER SUPPLY, HELPING DEVELOP INNOVATIVE ARID AGRICULTURE TECHNIQUES, AND EDUCATING BOTH YOUNG AND OLD ABOUT THE FOUNDING AND IMPORTANCE OF ISRAEL AND ZIONISM.

IN 2022 JEWISH NATIONAL FUND ENTERED ITS 121ST YEAR AS ONE OF THE WORLD'S OLDEST JEWISH NON-PROFITS AND IS AS RELEVANT TODAY AS THE DAY IT WAS FOUNDED.

JNF IS SYNONYMOUS WITH THE BLUE BOX AND PLANTING TREES IN ISRAEL WHILE ITS WORK HAS EVOLVED INTO SEVEN MAJOR PROGRAM AREAS, EACH WITH ITS OWN MAJOR GOALS AND PARTNERSHIPS WITHIN ISRAEL THAT HELP BRING TO REALITY THE PROJECTS THAT ARE MAINLY DONOR-DESIGNATED.

CONTINUING ON WORK BEGUN IN 2013, JNF'S ONE BILLION DOLLAR ROADMAP FOR THE NEXT DECADE CAMPAIGN, HAS CREATED GROUND-BREAKING NEW VENTURES FOCUSING ON CONNECTING THE NEXT GENERATION TO ISRAEL, BUILDING COMMUNITIES IN ISRAEL'S FRONTIER REGIONS OF THE NEGEV AND GALILEE, CREATING INFRASTRUCTURE FOR ECOLOGY, SPECIAL NEEDS, HERITAGE PRESERVATION, AND SO MUCH MORE.

JNF ENHANCES QUALITY OF LIFE BY BUILDING NEW COMMUNITIES AND BOLSTERING EXISTING ONES. JNF'S BLUEPRINT NEGEV CAMPAIGN IS ATTRACTING HUNDREDS OF THOUSANDS OF NEW RESIDENTS TO THE NEGEV DESERT WHILE ITS GO NORTH CAMPAIGN FOCUSES ON THE COMMUNITIES OF NORTHERN ISRAEL. THE ORGANIZATION'S WORK IN COMMUNITY BUILDING

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FORM 990, PART III - PROGRAM SERVICE

INCLUDES THE BE'ER SHEVA RIVER PARK, SDEROT INDOOR RECREATION CENTER, CENTRAL ARAVA MEDICAL CENTER, ESHKOL RESILIENCE CENTER, PROJECT WADI ATTIR, HALUTZA, THE GALILEE CULINARY INSTITUTE BY JNF, A FOOD TECH HUB, AND SO MUCH MORE.

JNF IS THE LARGEST PROVIDER OF ZIONIST EDUCATION PROGRAMS IN THE U.S. AND OFFERS A MYRIAD OF WAYS TO CONNECT YOUNG AMERICANS TO ISRAEL. ITS ISRAEL EDUCATION AND ADVOCACY PROGRAMS TAKE PEOPLE FROM BIRTH TO THE BOARDROOM ON THEIR JEWISH AND ZIONIST JOURNIES. THEY START IN KINDERGARTEN AND CONTINUE THROUGH COLLEGE LIFE AND BEYOND, ENGAGING, EDUCATING, AND HELPING STUDENTS FOSTER A GREATER CONNECTION AND COMMITMENT TO THE LAND AND PEOPLE OF ISRAEL. JNF'S ISRAEL CONTINUUM PROGRAMMING INCLUDES THE CAMPUS FELLOWSHIP, CARAVAN FOR DEMOCRACY, ALTERNATIVE BREAK, TAGLIT-BIRTHRIGHT ISRAEL, FACULTY FELLOWSHIP PROGRAM IN ISRAEL, ALEXANDER MUSS HIGH SCHOOL IN ISRAEL, B'NAI MITZVAH PROJECTS, PLANT YOUR WAY TO ISRAEL, AND GREEN HORIZONS.

WITH THE ALEXANDER MUSS HIGH SCHOOL IN ISRAEL (MUSS), WHICH, SINCE 1972, HAS BEEN PIONEERING THE ACADEMIC AND EXPERIENTIAL STUDY OF ISRAEL AND JEWISH HISTORY AT THE HIGH SCHOOL LEVEL, JNF SETS THE GOAL OF FURTHER GROWING AND ENHANCING JEWISH CONTINUITY AND ISRAEL CONNECTIVITY AMONGST YOUTH BY OFFERING SEMESTER ABROAD PROGRAMS TO BETTER ENRICH EACH STUDENT'S KNOWLEDGE BASE AND BETTER PREPARE THEM FOR COLLEGE LIFE. TO DATE, OVER 30,000 STUDENTS HAVE BENEFITED FROM AN EDUCATION AT MUSS AND MANY STUDENTS HAVE RECEIVED A FELLOWSHIP OR GRANT TOWARDS THEIR TUITION. IN 2022, THE SCHOOL CELEBRATED ITS 50TH ANNIVERSARY.

JNF AND ITS PARTNERS SUPPORT MANY AFFILIATES IN ISRAEL INCLUDING BUT NOT LIMITED TO: GREEN HORIZONS, HALUTZA COMMUNITIES, HASHOMER HACHADASH, THE ARAVA INSTITUTE FOR ENVIRONMENTAL STUDIES, THE ARAVA INTERNATIONAL CENTER FOR AGRICULTURE TRAINING, SPECIAL IN UNIFORM, MAKOM, NEFESH B'NEFESH, THE SOCIETY FOR THE PRESERVATON OF ISRAEL'S HERITAGE SITES, THE GUSH ETZION VISITOR CENTER MUSEUM, THE LAUDER EMPLOYMENT CENTER, AND WESTERN GALILEE NOW. JNF'S FUNDRAISING EFFORTS HAVE ALSO SUPPORTED ISRAEL'S FIREFIGHTERS THROUGH THE PROVISION OF FIRETRUCKS AND FIREFIGHTING APERATUS, LIFE-SAVING EQUIPMENT, AND THE BUILDING OF NEW FIRE STATIONS.

COMMUNITY BUILDING:

- JNF'S HOUSING DEVELOPMENT FUND HAS BEEN INSTRUMENTAL IN CREATING OVER 1,600 HOUSING SITES FOR HOUSING IN 37 COMMUNITIES IN THE

Schedule O (Form 990 or 990-EZ) 2021

JSA

Name of the organization Employer identification number 13-1659627 JEWISH NATIONAL FUND

FORM 990, PART III - PROGRAM SERVICE

NEGEV AND THE GALILEE.

- 4,300 ISRAELI STUDENTS TOOK PART IN GREEN HORIZONS' NATURE-FOCUSED ACTIVITIES, INCLUDING MORE THAN 5,000 OVERNIGHT HIKES
- 2,500 CHILDREN PLAY EVERY WEEK IN THE NEWLY RENOVATED, BOMB-FORTIFIED SDEROT INDOOR RECREATION CENTER
- THE LAUDER EMPLOYMENT CENTER HELPED OVER 2,000 YOUNG JOB SEEKERS IN THE NEGEV.
- 250 STUDENTS LIVED AND WORKED IN HASHOMER HACHADASH'S NEW BOARDING SCHOOL NETWORK ADAM V'ADAMA
- 250 COMMUNITIES WERE PROVIDED SUPPORT AND COMMUNITY SERVICES THROUGH MAKOM

ISRAEL ADVOCACY AND EDUCATION:

JNF ENSURES THAT THE NEXT GENERATION WILL DEVELOP A DEEP PERSONAL CONNECTION AND UNDERSTANDING OF ISRAEL TODAY, INSTILLING ZIONISM FROM PRESCHOOL THROUGH COLLEGE, AND BEYOND.

- \$3 MILLION IN GRANTS WERE AWARDED BY THE BORUCHIN CENTER TO ORGANIZATIONS AND PROGRAMS DRIVING ZIONIST EDUCATION AND JEWISH CONTINUITY
- 25,000 STUDENTS, FROM KINDERGARTEN THROUGH COLLEGE AGE, PARTICIPATED IN JNF ZIONIST ACTIVITIES IN U.S. SCHOOLS
- 1,500 STUDENTS ATTENDED ALEXANDER MUSS HIGH SCHOOL IN ISRAEL

IN 2022, JNF CONTINUED WITH ITS PLANS TO CREATE THE WORLD ZIONIST VILLAGE IN BE'ER SHEVA. THE INITIATIVE WILL CREATE A NEW CONVERSATION ABOUT ISRAEL, ABOUT THE FUTURE OF JEWISH LEADERSHIP, ABOUT THE NEXT 50 YEARS AND BEYOND, WHEREIN HIGH SCHOOL STUDENTS, COLLEGE STUDENTS, POST-GRADUATES, TEACHERS, YOUNG LEADERS, AND OLDER ADULTS ARE ALL PART OF ONE NEW CONVERSATION.

WITH THE VISION OF CREATING THIS ECOSYSTEM-THE ONLY ONE OF ITS KIND IN THE WORLD FOR GLOBAL JEWRY OF ALL AGES TO CONVENE AT ONCE OR AT DIFFERENT TIMES ON A SINGLE CAMPUS WITH PROGRAMMING, SHARED SPACES, ACCOMMODATIONS, AND HARNESSING THE POWER OF POSITIVE ISRAEL/JEWISH CONVERSATION, JNF IS BUILDING THIS WORLD-CLASS CAMPUS IN BE'ER SHEVA THAT WILL REVOLUTIONIZE ZIONIST AND JEWISH EDUCATIONAL ENGAGEMENT FOR THE DECADES AHEAD. THE INITIATIVE REPRESENTS ONE OF THE LARGEST PHILANTHROPIC CAPITAL PROJECTS IN ISRAEL'S HISTORY.

JNF \$100 MILLION BORUCHIN ISRAEL EDUCATION ADVOCACY CENTER EXPERIENCED CONTINUED GROWTH IN 2022 WITH GRANTS AWARDED TO HEROES

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FORM 990, PART III - PROGRAM SERVICE

TO HEROES, ALEXANDER MUSS HIGH SCHOOL IN ISRAEL'S SCHOLARSHIP PROGRAM, ISRAEL ON CAMPUS COALITION (ICC), YAVNEH ON CAMPUS, TAMID, MACCABI USA, CARAVAN FOR DEMOCRACY, FACULTY FELLOWSHIP PROGRAM IN ISRAEL, AND OTHERS, TO IMPACT THOUSANDS OF JEWS AND NON-JEWS ACROSS NORTH AMERICA. THE FOCUS ON ISRAEL AND ZIONIST EDUCATION PROGRAMMING IS DESIGNED TO BE ONE OF THE MOST POWERFUL NEW INITIATIVES IN THE JEWISH WORLD. THE CENTER CONCENTRATES ITS RESOURCES ON ADVOCATING FOR ISRAEL, ISRAEL EDUCATION IN THE DIASPORA, AND COUNTERING THE BDS MOVEMENT, ALL WITH THE GOAL OF STRENGTHENING THE CONNECTION OF ALL AMERICANS, NOW AND IN THE FUTURE, TO THE LAND AND PEOPLE OF ISRAEL.

WATER SOLUTIONS:

JNF HAS BOLSTERED ISRAEL'S WATER ECONOMY BY DEVELOPING ALTERNATIVE WATER SOURCES, SAVING THE ECONOMY MILLIONS, ADVANCING ISRAELI AGRICULTURE, AND IMPROVING WATER QUALITY. JNF HAS BUILT OVER 250 RESERVOIRS AND IS CONTINUING TO FUNDRAISE FOR ADDITIONAL RESERVOIRS AT A COST OF \$200 MILLION. RAISING THE AMOUNT OF RECYCLED WATER IN ISRAEL TO OVER 90%, JNF IS NOW FOCUSING ON RIVER REHABILITATION, EDUCATION, WATER PURIFICATION AND RESEARCH AND DEVELOPMENT. FOCUS AREAS INCLUDE RECYCLED WATER RESERVOIRS, RIVER REHABILITATION, RAINWATER HARVESTING PROGRAM AND CONSTRUCTED WETLANDS. JNF-SUPPORTED WATER RECYCLING PROJECTS CONTINUE IN THE BEDOUIN VILLAGES OF WADI ATTIR AND UM BATIN. GREEN HORIZONS ALSO HAS OVER 64 SCHOOLS WHICH UTILIZE ITS RAINWATER HARVESTING PROJECTS TO EDUCATE STUDENTS ABOUT WATER SHORTAGES AND SOLUTIONS IN ISRAEL.

DISABILITIES AND SPECIAL NEEDS:

AS PART OF ITS FOCUS ON IMPROVING QUALITY OF LIFE IN ISRAEL, JNF IS DEDICATED TO ENSURING THAT NO MEMBER OF ISRAELI SOCIETY IS LEFT BEHIND. THROUGH A VARIETY OF INITIATIVES, JNF SUPPORTS CUTTING-EDGE REHABILITATIVE SERVICES, SPECIAL EDUCATION, AND MEDICAL CARE FOR PEOPLE WITH DISABILITIES AND MAKES ISRAEL'S PARKS, NATURE TRAILS, AND RECREATIONAL FACILITIES INCLUSIVE FOR VISITORS OF ALL ABILITY LEVELS. IN 2022, JNF CONTINUED TO PROVIDE SERVICES TO CHILDREN, YOUTH, AND ADULTS WITH DISABILITIES THROUGH ITS AFFILIATES INCLUDING ADI NEGEV-NAHALAT ERAN, LOTEM-MAKING ISRAEL ACCESSIBLE, RED MOUNTAIN THERAPEUTIC RIDING CENTER AT KIBBUTZ GROFIT, AND SPECIAL IN UNIFORM.

IN 2022, JNF CELEBRATED THE GRAND OPENING OF A REHABILITATION MEDICAL CENTER IN THE NEGEV, MAKING REHABILITATIVE THERAPIES

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FORM 990, PART III - PROGRAM SERVICE

ACCESSIBLE TO RESIDENTS IN THE AREA.

OTHER HIGHLIGHTS:

- 43,000 OUTPATIENT REHABILITATION TREATMENTS WERE PROVIDED AT ADI NEGEV-NAHALAT ERAN
- 10,000 CUMULATIVE HOURS OF THERAPY SESSIONS WERE GIVEN BY THE RED MOUNTAIN THERAPEUTIC RIDING CENTER
- 5,000 CHILDREN VISITED EMEK HASHALOM, A FULLY ACCESSIBLE NATURE EDUCATION CENTER RUN BY LOTEM MAKING ISRAEL ACCESSIBLE.
- 753 SOLDIERS WITH DISABILITIES ARE CURRENTLY VOLUNTEERING AND SERVING IN THE IDF WITH SPECIAL IN UNIFORM

RESEARCH AND DEVELOPMENT:

JNF SPONSORS A NETWORK OF REGIONAL AGRICULTURAL R&D STATIONS ACROSS THE COUNTRY WHERE LEADING SCIENTISTS AND TECHNICIANS WORK CLOSELY WITH LOCAL FARMERS, RESEARCH INSTITUTES, AND UNIVERSITIES TO INCREASE AGRICULTURAL SUSTAINABILITY, PROFITABILITY, AND RESILIENCE. THIS WORK FOCUSES ON AGRICULTURAL R&D STATIONS, SOLAR POWER INNOVATION, GLOBAL TEACHING, DESERT REGION DEVELOPMENT, FISH FARMING, AND UNIVERSITY RESEARCH.

FURTHER ENHANCING ITS SUPPORT FOR THE ENVIRONMENT, THE ESTABLISHMENT OF THE KASSER JOINT INSTITUTE FOR FOOD, WATER, AND ENERGY SECURITY, A PARTNERSHIP BETWEEN THE UNIVERSITY OF ARIZONA, ARAVA VALLEY FARMERS, AND JNF, WILL FOCUS ON DEMONSTRATING SUSTAINABLE METHODS OF FOOD PRODUCTION AGAINST THE NEXUS OF ENERGY, LAND USE, AND WATER CONSERVATION IN AN ARID ENVIRONMENT. THE INITIATIVE WILL HELP THE WORLD WITH A SPECIFIC FOCUS ON DEVELOPING COUNTRIES.

OTHER HIGHLIGHTS:

- 4,000 PEOPLE VISITED THE MARGALIT FOOD TECH CENTER, HOME TO THE GALILEE'S MAIN PLATFORM FOR ACCELERATED BUSINESS DEVELOPMENT
 1,200 STUDENTS FROM 13 COUNTRIES IN AFRICA AND ASIA LEARNED RESOURCESCARCE AGRICULTURE BREAKTHROUGHS FROM THE ARAVA INTERNATIONAL CENTER FOR AGRICULTURAL TRAINING (AICAT)
 80 STUDENTS AND INTERNS PARTICIPATED IN ACADEMIC PROGRAMS THIS YEAR AT THE ARAVA INSTITUTE FOR ENVIRONMENTAL STUDIES
- HISTORICAL SITES:

JNF IS COMMITTED TO THE PRESERVATION OF 180 HISTORICAL SITES ASSOCIATED WITH ISRAEL'S REBIRTH AND ENSURING THAT THE STORIES BEHIND THEM ARE PROPERLY DOCUMENTED AND RETOLD FOR GENERATIONS TO

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JSA.

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FORM 990, PART III - PROGRAM SERVICE

COME. THIS INITIATIVE ENABLES JNF TO SHARE THE PAST, THE IMPORTANT EVENTS, THE PLACES, THE STRUGGLES AND THE FIGHT FOR ISRAEL'S INDEPENDENCE WITH ISRAELIS AND TOURISTS ALIKE. JNF'S HISTORICAL SITES INCLUDE THE AYALON INSTITUTE, WHERE A NEWLY INSTALLED ELEVATOR IS IMPROVING ACCESSIBILITY; ATLIT "ILLEGAL" IMMIGRATION DETENTION CAMP, WHERE AN INTERACTIVE EXHIBIT INSIDE A C46 AIRPLANE TELLS THE HEROIC STORY OF THE COVERT MISSION THAT BROUGHT 150 CLANDESTINE JEWISH IMMIGRANTS TO ISRAEL BY AIR FROM IRAQ AND ITALY; AMMUNITION HILL; YELLIN HOUSE; AND TEL HAI MUSEUM.

FORESTRY & GREEN INNOVATIONS:

AS AN INNOVATOR IN ECOLOGICAL DEVELOPMENT AND A PIONEER IN FOREST CREATION AND FIRE PREVENTION, JEWISH NATIONAL FUND HAS PLANTED MORE THAN 260 MILLION TREES IN ISRAEL, PROVIDING LUSCIOUS BELTS OF GREEN COVERING MORE THAN 250,000 ACRES, AND PROTECTS THESE AREAS BY BATTLING APPROXIMATELY 1,000 FOREST FIRES EVERY YEAR. JNF ALSO SUPPORTS AGRICULTURAL INFRASTRUCTURE DEVELOPMENT, SOIL CONSERVATION, AND COMBATING DESERTIFICATION.

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FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA, CO, FL, GA, IL, KS, KY, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OR, PA, RI, SC, TN, VA, WV, WI,

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Name of the organization Employer identification number JEWISH NATIONAL FUND 13-1659627

AME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
DIRECT DIMENSIONS, INC.		
303 FIFTH AVENUE, ROOM 206		
NEW YORK, NY 10016	PRINTING & POSTAGE	1,317,934.
TELERX MARKETING, INC.		
P.O. BOX 8500-53888		
PHILADELPHIA, PA 19178-3888	FEES FOR CALL CENTER	974,878.
ADDAPPTATION		
21 HEMLOCK COURT		
NEWFIELDS, NH 03856	CONSULTING	489,050.
HTA ADVISORY		
P.O. BOX 71939		
CHICAGO, IL 60694	MGT FEES FOR INV.	252,566.
FASS CONSULTING		
5-20 HAZEL PLACE		
FAIRLAWN, NJ 07410	CONSULTING-PROJECTS	150,000.

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization JEWISH NATIONAL FUND

(KEREN KAYEMETH LEISRAEL) INC.

Employer identification number

13-1659627

Part I	Identification of Disregarded Entities. Complete if the organization	answered "Yes" on	Form 990, Part I	V, line 33.		
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled tity?
						Yes	No
(1) BEYACHAD FUND							
206 JAFFA STREET JERUSALEM, IS 91079 IS	PROJECT MGMT.	IS			JNF-USA		Х
(2) ALEXANDER MUSS INSTITUTE FOR ISRAEL EDU. 59-0173782							
78 RANDALL AVENUE ROCKVILLE CENTER, NY 11570	EDUCATION	NY	501(C)(3)	LINE 10	JNF-USA		Х
(3) JEWISH NATIONAL FUND-USA, INC. 83-2880252							
42 EAST 69TH STREET NEW YORK, NY 10021	FUNDRAISING	DE	501(C)(3)	LINE 7	N/A		Х
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2021

Schedule R (Form 990) 2021 JEWISH NATIONAL FUND 13-1659627 Page **2**

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		ionate Code V - UBI		eral or aging tner?	(k) Percentage ownership
		Country					Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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.

<i></i>				, ,				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

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

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

1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
-	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b	х	
	Gift, grant, or capital contribution from related organization(s)	1c		Х
	Loans or loan guarantees to or for related organization(s)	1d		X
		1e		X
е	Loans or loan guarantees by related organization(s)	10		25
	D'Aleade (see a selete de serve d'estante)	1f		Х
T	Dividends from related organization(s)			X
	Sale of assets to related organization(s)	1g		X
	Purchase of assets from related organization(s)	1h		
	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Χ
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Χ
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	
0	Sharing of paid employees with related organization(s)	10		Х
р	Reimbursement paid to related organization(s) for expenses	1p		Х
q	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		Х
s	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction through	eshold	s.	
	(a) (b) (c)	(d)		
		of dete		g
	yp- ()			
(1)				
(2)				
(3)				
(4)				
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(6)				
SA	Schedule R	(Form	990) 2	202

Yes No

Schedule R (Form 990) 2021 JEWISH NATIONAL FUND 13-1659627 Page **4**

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

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

(a) Name, address, and EIN of entity	(a) (b) Primary activity L (s		income (related, unrelated, excluded from tax under	thining the minant (related, excluded x under (related), organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		ownership	
			sections 512 - 514)	Yes	No			Yes	No	,	Yes	No		
(1)														
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