

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

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

A For the 2024 calendar year, or tax year beginning **JUN 1, 2024** and ending **MAY 31, 2025**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <div style="border: 1px solid black; padding: 2px;">UNITED JEWISH FOUNDATION</div> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <div style="border: 1px solid black; padding: 2px;">6735 TELEGRAPH ROAD</div> City or town, state or province, country, and ZIP or foreign postal code <div style="border: 1px solid black; padding: 2px;">BLOOMFIELD HILLS, MI 48301</div> F Name and address of principal officer: STEVEN INGBER <div style="border: 1px solid black; padding: 2px;">SAME AS C ABOVE</div>	D Employer identification number <div style="border: 1px solid black; padding: 2px;">38-1360585</div> E Telephone number <div style="border: 1px solid black; padding: 2px;">(248) 642-4260</div> G Gross receipts \$ <div style="border: 1px solid black; padding: 2px;">86,360,336.</div> H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW.JEWISHDETROIT.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		
L Year of formation: 1899 M State of legal domicile: MI		

Part I Summary

1	Briefly describe the organization's mission or most significant activities: THE UNITED JEWISH FOUNDATION SERVES AS CUSTODIAN OF THE DETROIT JEWISH COMMUNITY'S ASSETS. THE		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	34
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	800
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
8	Contributions and grants (Part VIII, line 1h)	8	35,222,346.
9	Program service revenue (Part VIII, line 2g)	9	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	12,190,026.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	606,057.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	48,018,429.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13	47,155,970.
14	Benefits paid to or for members (Part IX, column (A), line 4)	14	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16a	0.
16b	Total fundraising expenses (Part IX, column (D), line 25)	16b	1,490,000.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17	13,395,828.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	60,551,798.
19	Revenue less expenses. Subtract line 18 from line 12	19	-12,533,369.
20	Total assets (Part X, line 16)	20	674,906,226.
21	Total liabilities (Part X, line 26)	21	127,061,480.
22	Net assets or fund balances. Subtract line 21 from line 20	22	547,844,746.

Part II Signature Block

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

Sign Here	<div style="border: 1px solid black; padding: 2px;"> </div> Signature of officer	<div style="border: 1px solid black; padding: 2px;">11/11/2025</div> Date
Paid Preparer Use Only	DOROTHY BENYAS, CHIEF FINANCIAL OFFICER Type or print name and title	
Paid	Preparer's name DAVID LOWENTHAL	Preparer's signature DAVID LOWENTHAL
Preparer	Firm's name PLANTE & MORAN, PLLC	Date 11/06/25
Use Only	Firm's address 10 S. RIVERSIDE PLAZA, 9TH FLOOR CHICAGO, IL 60606	Check if self-employed <input type="checkbox"/> PTIN P00378651
		Firm's EIN 33-1498605 Phone no. (312) 207-1040

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

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

THE UNITED JEWISH FOUNDATION OF DETROIT OWNS, MANAGES AND INVESTS JEWISH COMMUNAL ASSETS, INCLUDING GENERAL AND ENDOWMENT FUNDS, AGENCY ENDOWMENTS, SUPPORTING FOUNDATIONS AND REAL PROPERTY. THE FOUNDATION IS COMMITTED TO ENSURING THAT ASSETS ARE AVAILABLE TO PROMOTE THE

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **43,597,079.** including grants of \$ **43,597,079.**) (Revenue \$ **0.**)

DISTRIBUTION OF ASSETS TO THE JEWISH FEDERATION'S ANNUAL CAMPAIGN AND TO OTHER QUALIFIED 501(C)(3) ORGANIZATIONS SERVING THE JEWISH AND NON-SECULAR COMMUNITIES LOCALLY AND NATIONALLY

4b (Code:) (Expenses \$ **5,041,522.** including grants of \$ **0.**) (Revenue \$ **0.**)

NET COSTS OF AGENCY FACILITIES AND OTHER DIRECT PROGRAM SERVICES.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **48,638,601.**Form **990** (2024)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? 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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	X
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	X
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	27	X
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):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash 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	X
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? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	X

Note: All Form 990 filers are required to complete Schedule O

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	19
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

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

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b If "Yes," enter the name of the foreign country <u>CAYMAN ISLANDS, IRELAND</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

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

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

☒**Section A. Governing Body and Management**

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	35			
b Enter the number of voting members included on line 1a, above, who are independent		34		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		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 assets?	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 or appoint 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) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9			X

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
BECKY STASCH - (248) 203-1521
6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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 hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) STEVEN INGBER CHIEF EXECUTIVE OFFICER	20.00 20.00	X		X				0.	501,821.	16,554.
(2) DOROTHY BENYAS CHIEF FINANCIAL OFFICER	20.00 22.00			X				0.	278,276.	28,081.
(3) THEODORE COHEN CHIEF MARKETING OFFICER	20.00 20.00			X				0.	243,197.	29,952.
(4) MARGO PERNICK DIRECTOR OF THE JEWISH FUND	0.00 36.00					X		0.	244,270.	26,679.
(5) STACEY DEWEESE DIRECTOR OF JEWISH COM. ENDOWMENT -	20.00 20.00					X		0.	216,463.	16,872.
(6) SUSAN FELDMAN DIRECTOR OF PHILANTHROPIC & CORPORAT	20.00 20.00					X		0.	207,020.	25,712.
(7) DANIEL GREENBERG DIRECTOR OF MAJOR GIFTS	20.00 20.00					X		0.	189,329.	24,232.
(8) CHARLENE ARM SENIOR DIRECTOR, TALENT & ORG. - PAR	20.00 20.00					X		0.	189,748.	17,320.
(9) MICHAEL BERGER PRESIDENT	0.50 1.00	X		X				0.	0.	0.
(10) TERRI CHAPMAN TREASURER	0.50 0.50	X		X				0.	0.	0.
(11) MINDI FYNKE VICE PRESIDENT	0.50 0.00	X		X				0.	0.	0.
(12) DAVID KARP VICE PRESIDENT	0.50 0.00	X		X				0.	0.	0.
(13) JODIE KAUFMAN DAVIS AT-LARGE	0.50 0.50	X		X				0.	0.	0.
(14) GLENN PAVEY AT-LARGE	0.50 0.00	X		X				0.	0.	0.
(15) WARREN ROSE VICE PRESIDENT	0.50 0.00	X		X				0.	0.	0.
(16) STEVAN ROSENBERG DIRECTOR - PARTIAL YEAR	0.50 0.00	X		X				0.	0.	0.
(17) MARK RUBENFIRE AT-LARGE	0.50 0.00	X		X				0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KAREN S SCHOENBERG AT-LARGE	0.50 0.50	X		X				0.	0.	0.
(19) JEFFREY SCHOSTAK AT-LARGE	0.50 0.00	X		X				0.	0.	0.
(20) MATT SHIFFMAN AT-LARGE	0.50 0.00	X		X				0.	0.	0.
(21) LAURENCE TISDALE VICE PRESIDENT	0.50 0.00	X		X				0.	0.	0.
(22) KELLI ANDERSON DIRECTOR	0.50 0.00	X						0.	0.	0.
(23) DENNIS BERNARD DIRECTOR	0.50 0.00	X						0.	0.	0.
(24) ERIC BRONSTEIN DIRECTOR	0.50 0.50	X						0.	0.	0.
(25) SCOTT EISENBERG DIRECTOR	0.50 0.00	X						0.	0.	0.
(26) DOUGLAS ETKIN DIRECTOR	0.50 0.00	X						0.	0.	0.
1b Subtotal								0.	2,070,124.	185,402.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	2,070,124.	185,402.

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

0

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

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
FIRST CHOICE BUILDING & MAINTENANCE LLC, 24744 CRESTVIEW CT, FARMINGTON HILLS, MI	CONSTRUCTIONS SERVICES	2,240,910.
DZI CONSTRUCTION SERVICES, INC 9675 NORTHWEST CT, CLARKSTON, MI 48346	CONSTRUCTIONS SERVICES	1,265,344.
NEWMARK GRUBB KNIGHT FRANK, 27725 STANSBURY BLVD, STE. 300, FARMINGTON	REAL ESTATE MANAGEMENT	560,411.
MERCER INVESTMENTS LLC 21875 NETWORK PLACE, CHICAGO, IL 60673	INVESTMENT CONSULTING	498,334.
FIDUCIARY TECHNOLOGY PARTNERS, 1 LANDMARK SQUARE, 2ND FLOOR, STAMFORD, CT 06901	ENDOWMENT SOFTWARE SERVICES	205,940.

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

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SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2024)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) GIL FELDMAN DIRECTOR	0.50 0.00	X						0.	0.	0.
(28) MARK HAUSER DIRECTOR	0.50 0.50	X						0.	0.	0.
(29) EDWARD HERSCH DIRECTOR	0.50 0.00	X						0.	0.	0.
(30) ALAN KAUFMAN DIRECTOR	0.50 0.00	X						0.	0.	0.
(31) MONICA LABE DIRECTOR	0.50 0.00	X						0.	0.	0.
(32) JOSHUA LEVINE DIRECTOR	0.50 0.50	X						0.	0.	0.
(33) MICHAEL MADDIN DIRECTOR	0.50 1.00	X						0.	0.	0.
(34) ALLAN NACHMAN DIRECTOR	0.50 0.50	X						0.	0.	0.
(35) NORMAN PAPPAS DIRECTOR	0.50 0.50	X						0.	0.	0.
(36) BENJAMIN ROSENTHAL DIRECTOR	0.50 0.50	X						0.	0.	0.
(37) TODD SACHSE DIRECTOR	0.50 0.00	X						0.	0.	0.
(38) SHERI SHAPIRO DIRECTOR	0.50 0.00	X						0.	0.	0.
(39) DAVID SHERBIN DIRECTOR - PARTIAL YEAR	0.50 0.00	X						0.	0.	0.
(40) ROBERT SLATKIN DIRECTOR	0.50 0.50	X						0.	0.	0.
(41) GARY TORGOW DIRECTOR	0.50 1.00	X						0.	0.	0.
(42) STEVEN WEISBERG DIRECTOR	0.50 0.00	X						0.	0.	0.
(43) JORDAN WERTHEIMER DIRECTOR	0.50 0.00	X						0.	0.	0.
(44) MARK ZAUSMER DIRECTOR	0.50 0.50	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d	10,638,412.				
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	27,867,863.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 25,420,050.				
	h	Total. Add lines 1a-1f		38,506,275.				
Program Service Revenue				Business Code				
	2 a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			20,455,251.		20455251.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real 2,772,856.	(ii) Personal			
	b	Less: rental expenses ...	6b	3,009,377.				
	c	Rental income or (loss)	6c	-236,521.				
	d	Net rental income or (loss)		-236,521.		-236,521.		
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities 24,175,469.	(ii) Other			
	b	Less: cost or other basis and sales expenses	7b	0.				
	c	Gain or (loss)	7c	24,175,469.				
	d	Net gain or (loss)		24,175,469.		24175469.		
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
	b	Less: direct expenses	8b					
	c	Net income or (loss) from fundraising events						
	9 a	Gross income from gaming activities. See Part IV, line 19	9a					
	b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue				Business Code				
	11 a	OTHER OPERATING INCOME		900001	362,013.		362,013.	
	b	PARTNERSHIP INCOME		900001	88,472.		88,472.	
	c						
	d	All other revenue						
	e	Total. Add lines 11a-11d		450,485.				
12	Total revenue. See instructions				83,350,959.	0.	0.	44844684.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	43,597,079.	43,597,079.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management	2,600,535.		2,600,535.	
b Legal	77,421.		77,421.	
c Accounting	71,184.		71,184.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,049,502.		1,049,502.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	6,897.		6,897.	
13 Office expenses	620,230.	456,852.	163,378.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	35,574.		35,574.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,696,943.	3,579,878.	117,065.	
23 Insurance	393,701.	262,511.	131,190.	
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.)				
a JFMD FUND. & ADMIN. EXP	4,220,000.		2,730,000.	1,490,000.
b PROGRAM SERVICES	565,018.	565,018.		
c PLEDGE DEBT	-377,500.		-377,500.	
d _____				
e All other expenses _____	-108,325.	177,263.	-285,588.	
25 Total functional expenses. Add lines 1 through 24e	56,448,259.	48,638,601.	6,319,658.	1,490,000.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	69,327,055.	2	57,371,293.
	3 Pledges and grants receivable, net	20,187,882.	3	20,197,464.
	4 Accounts receivable, net	8,184,821.	4	8,490,481.
	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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	1,852,763.	7	1,741,565.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	4,042,952.	9	4,349,065.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 135,569,515.		
	b Less: accumulated depreciation	10b 88,257,697.		
		46,272,990.	10c	47,311,818.
	11 Investments - publicly traded securities	311,877,872.	11	359,410,718.
	12 Investments - other securities. See Part IV, line 11	201,047,348.	12	258,998,706.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	12,112,543.	15	3,816,439.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	674,906,226.	16	761,687,549.	
Liabilities	17 Accounts payable and accrued expenses	1,564,268.	17	1,766,528.
	18 Grants payable	701,808.	18	798,412.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	124,795,404.	25	159,825,826.
	26 Total liabilities. Add lines 17 through 25	127,061,480.	26	162,390,766.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	230,608,332.	27	256,505,917.
	28 Net assets with donor restrictions	317,236,414.	28	342,790,866.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	547,844,746.	32	599,296,783.
	33 Total liabilities and net assets/fund balances	674,906,226.	33	761,687,549.

Form 990 (2024)

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	83,350,959.
2	Total expenses (must equal Part IX, column (A), line 25)	2	56,448,259.
3	Revenue less expenses. Subtract line 2 from line 1	3	26,902,700.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	547,844,746.
5	Net unrealized gains (losses) on investments	5	8,354,880.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	110,033.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	16,084,424.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	599,296,783.

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<input checked="" type="checkbox"/>
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<input checked="" type="checkbox"/>	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<input checked="" type="checkbox"/>	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		<input checked="" type="checkbox"/>
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2024)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number	
--------------------------------	--

38-1360585

Part I	Reason for Public Charity Status. (All organizations must complete this part.) See instructions.
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The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

f Enter the number of supported organizations

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	38213480.	57231742.	23741691.	35222346.	38506275.	192915534
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	38213480.	57231742.	23741691.	35222346.	38506275.	192915534
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)						54455293.
6 Public support. Subtract line 5 from line 4.						138460241

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	38213480.	57231742.	23741691.	35222346.	38506275.	192915534
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	17345246.	23404044.	27818867.	11375251.	23228107.	103171515
9 Net income from unrelated business activities, whether or not the business is regularly carried on	4,156.	15,649.	3,093.			22,898.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	139,126.	1765872.	343,456.	714,627.	450,485.	3413566.
11 Total support. Add lines 7 through 10						299523513
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	46.23	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	48.94	%
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Schedule A (Form 990) 2024

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described 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		
c 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		

Section 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 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		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? 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		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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		

Section E. Type III Functionally Integrated Supporting Organizations

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

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

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2024

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section D - Distributions**

		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
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 - <i>provide details in Part VI</i>)	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 responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

Part VI

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

**Schedule B
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number

38-1360585

Organization type (check one):

Filers of:

Section:

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 totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** 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) (Rev. 12-2024)

Name of organization

Employer identification number

UNITED JEWISH FOUNDATION

38-1360585

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
<u>1</u>		\$ <u>10,638,412.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>7,256,802.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>2,921,418.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>1,553,631.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>1,281,559.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>1,198,877.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
UNITED JEWISH FOUNDATION	38-1360585

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
7		\$ 1,050,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 1,009,927.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 1,006,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ 916,429.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12		\$ 810,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
UNITED JEWISH FOUNDATION	38-1360585

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	STOCK	\$ 7,256,802.	12/31/24
3	STOCK	\$ 2,921,418.	12/05/24
4	STOCK	\$ 1,553,631.	12/31/24
8	STOCK	\$ 1,009,927.	12/31/24
		\$	

Name of organization	Employer identification number
UNITED JEWISH FOUNDATION	38-1360585

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(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 Part I	(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 Part I	(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 Part I	(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	

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number

38-1360585

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	582	1356
2 Aggregate value of contributions to (during year)	30,265,868.	8,176,978.
3 Aggregate value of grants from (during year)	26,784,807.	18,823,586.
4 Aggregate value at end of year	156,088,787.	370,858,433.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Part II

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

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

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

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

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

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

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

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

b Assets included in Form 990, Part X \$

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

Schedule D (Form 990) (Rev. 12-2024)

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

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

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	289,152,976.	263,664,679.	264,818,987.	272,418,325.	216,592,441.
b Contributions	1,955,827.	8,658,008.	5,128,925.	12,520,184.	1,897,043.
c Net investment earnings, gains, and losses	29,349,093.	29,090,652.	2,261,610.	-9,384,268.	63,301,792.
d Grants or scholarships	15,033,857.	12,260,363.	8,544,843.	10,735,254.	9,372,951.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	305,424,039.	289,152,976.	263,664,679.	264,818,987.	272,418,325.

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

a Board designated or quasi-endowment .0000 %

b Permanent endowment 82.5500 %

c Term endowment 17.4500 %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations? ☐ Yes ☒ No

(ii) Related organizations? ☐ Yes ☒ No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☒ No

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		6,947,856.		6,947,856.
b Buildings		125,829,366.	85,534,056.	40,295,310.
c Leasehold improvements				
d Equipment		2,792,293.	2,723,641.	68,652.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				47,311,818.

Schedule D (Form 990) (Rev. 12-2024)

Part VII Investments - Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	182,888,895.	END-OF-YEAR MARKET VALUE
(B) LIQUID LIMITED		
(C) PARTNERSHIP INVESTMENT	74,538,925.	END-OF-YEAR MARKET VALUE
(D) INCOME ANNUITY ARBITRAGE	1,000,005.	COST
(E) ISRAEL BOND	300,000.	COST
(F) CERTIFICATES OF DEPOSIT	270,881.	END-OF-YEAR MARKET VALUE
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	258,998,706.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CONSTITUENT AGENCIES DEPOSITS	143,979,064.
(3) OTHER ORGANIZATIONS PAYABLE	11,821,356.
(4) CHARITABLE GIFT ANNUITIES PAYABLE	3,880,095.
(5) CONTRIBUTIONS FOR FUTURE USE	145,311.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	159,825,826.

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 ... ☐

Schedule D (Form 990) (Rev. 12-2024)

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

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

1	Total revenue, gains, and other support per audited financial statements	1	114,715,862.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	8,354,880.
b	Donated services and use of facilities	2b	4,000,000.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	19,650,683.
e	Add lines 2a through 2d	2e	32,005,563.
3	Subtract line 2e from line 1	3	82,710,299.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	640,660.
c	Add lines 4a and 4b	4c	640,660.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	83,350,959.

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

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

1	Total expenses and losses per audited financial statements	1	69,429,630.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	4,000,000.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	16,851,408.
e	Add lines 2a through 2d	2e	20,851,408.
3	Subtract line 2e from line 1	3	48,578,222.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	7,870,037.
c	Add lines 4a and 4b	4c	7,870,037.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	56,448,259.

Part XIII Supplemental Information

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

PART V, LINE 4:

ALL ENDOWMENT FUNDS ARE USED TO SUPPORT THE MISSION OF THE ORGANIZATION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SUPPORT FOUNDATION REVENUE	8,988,258.
INTERORGANIZATION APPROPRIATIONS	10,662,425.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	19,650,683.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RENTAL EXPENSE	-3,009,377.
MANAGEMENT FEES	3,650,037.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	640,660.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SUPPORT FOUNDATION EXPENSES	13,842,031.
RENTAL EXPENSE	3,009,377.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	16,851,408.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

JFMD FUNDRAISING/ADMIN. EXP	4,220,000.
MANAGEMENT FEES	3,650,037.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	7,870,037.

Part XIII	Supplemental Information <i>(continued)</i>
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SCHEDULE F
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

Employer identification number

UNITED JEWISH FOUNDATION

38-1360585

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following 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
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		31,604,201.
EUROPE	0	0	INVESTMENTS		14,146,900.
3 a Subtotal	0	0			45,751,101.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			45,751,101.

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

Schedule F (Form 990) (Rev. 12-2024)

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)
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT HEALTH CARE	110,130.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT EDUCATION	34,432.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT ISRAELI MEDICAL SERVICES	210,400.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT JEWISH COMMUNITY	15,000.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT PROGRAMS FOR THE DISABLED	16,000.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT THE ARTS	20,000.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT PROGRAMS FOR THE DISABLED	30,000.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO PROMOTE EDUCATION ABOUT ISRAEL	61,800.		0.		

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 12

3 Enter total number of other organizations or entities 0

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT ISRAEL DEFENSE FORCES	248,209.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT EMERGENCY SERVICES IN ISRAEL	347,400.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT LACROSSE IN ISRAEL	10,000.		0.		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT JEWISH COMMUNITY	373,018.		0.		

Part IIIGrants 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)

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* ☒ 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ 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 the Instructions for Form 5471)* ☒ 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 the Instructions for Form 8621)* ☒ Yes ☐ 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 the Instructions for Form 8865)* ☒ Yes ☐ 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 the Instructions for Form 5713; don't file with Form 990)* ☐ Yes ☒ No

Schedule F (Form 990) (Rev. 12-2024)

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 I
(Form 990)**

(Rev. December 2024)

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 instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number
38-1360585

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
70 FACES MEDIA 520 EIGHTH AVENUE NEW YORK, NY 10018	13-0887610	501(C)(3)	11,250.	0.			TO SUPPORT JEWISH COMMUNITY
ADAMAH, INC 5425 MT. GILEAD ROAD REISTERSTOWN, MD 21136	43-2080719	501(C)(3)	16,250.	0.			TO SUPPORT JEWISH COMMUNITY
ADAT SHALOM SYNAGOGUE 29901 MIDDLEBELT FARMINGTON HILLS, MI 48334	38-1437934	501(C)(3)	105,520.	0.			TO SUPPORT JUDAISM
AHAVAS OLAM WEINGARDEN TORAH CENTER - 15620 W 10 MILE RD - SOUTHFIELD, MI 48075	20-3302399	501(C)(3)	9,000.	0.			TO SUPPORT JEWISH EDUCATION
AISH HATORAH 25725 COOLIDGE OAK PARK, MI 48237	11-3666684	501(C)(3)	81,250.	0.			TO SUPPORT JEWISH EDUCATION
ALZHEIMER'S ASSOCIATION 20300 CIVIC CENTER DRIVE #100 SOUTHFIELD, MI 48076	38-2919674	501(C)(3)	14,992.	0.			TO SUPPORT MEDICAL RESEARCH

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **274.**

3 Enter total number of other organizations listed in the line 1 table **0.**

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

Schedule I (Form 990) (Rev. 12-2024)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AM COMMITTEE FOR SHAARE ZEDEK HOSPITAL IN JERUSALEM - 55 W. 39TH ST - NEW YORK, NY 10018	13-5645878	501(C)(3)	11,884.	0.			TO SUPPORT MEDICAL CARE
AMERICAN CIVIL LIBERTIES UNION FUND OF MICHIGAN - 2966 WOODWARD AVE. - DETROIT, MI 48201	23-7243421	501(C)(3)	16,000.	0.			TO SUPPORT CIVIL LIBERTIES ADVOCACY
AMERICAN HEART ASSOCIATION 26555 EVERGREEN RD, STE 570 SOUTHFIELD, MI 48076	13-5613797	501(C)(3)	6,110.	0.			TO SUPPORT MEDICAL RESEARCH
AMERICAN ISRAEL EDUCATION FOUNDATION INC - 251 H STREET NW - WASHINGTON, DC 20001	52-1623781	501(C)(3)	130,000.	0.			TO SUPPORT JEWISH EDUCATION
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE INC - 220 E 42ND STREET - NEW YORK, NY 10017	13-1656634	501(C)(3)	61,250.	0.			TO SUPPORT HUMANITARIAN RELEIF
AMERICAN JEWISH WORLD SERVICE 45 W 36TH STREET, 11TH FLOOR NEW YORK, NY 10018	22-2584370	501(C)(3)	111,550.	0.			TO SUPPORT HUMAN RIGHTS AND END POVERTY
AMERICAN SOCIETY FOR TECHNION 30230 ORCHARD LAKE RD FARMINGTON HILLS, MI 48334	13-0434195	501(C)(3)	339,972.	0.			TO SUPPORT HIGHER EDUCATION
ANN & ROBERT H. LURIE CHILDRENS HOSPITAL OF CHICAGO - 225 E CHICAGO AVE PR DEPT BOX 269 - CHICAGO, IL 60611	36-2170833	501(C)(3)	33,334.	0.			TO SUPPORT HEALTH CARE
ANTI-DEFAMATION LEAGUE 25800 NORTHWESTERN HWY SOUTHFIELD, MI 48075	13-1818723	501(C)(3)	68,507.	0.			TO FIGHT DISCRIMINATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASHIR 15900 W 10 MILE RD STE 211 SOUTHFIELD, MI 48075	93-2475930	501(C)(3)	25,000.	0.			TO PROVIDE ADULT EDUCATION
ATZMI ORG 25514 GARDNER ST OAK PARK, MI 48237	87-2430213	501(C)(3)	28,500.	0.			TO SUPPORT JUDIASM
BAIS CHABAD OF WEST BLOOMFIELD 5595 W. MAPLE RD. WEST BLOOMFIELD, MI 48322	38-2388299	501(C)(3)	40,925.	0.			TO SUPPORT JUDAISM
BALDWIN PUBLIC LIBRARY TRUST 300 W MERRILL ST BIRMINGHAM, MI 48009	38-2404964	501(C)(3)	10,000.	0.			TO SUPPORT LITERACY
BASBLUE, INC 1016 LAKE PARK DR BIRMINGHAM, MI 48009	85-4027726	501(C)(3)	28,500.	0.			TO SUPPORT ENTREPRENEURSHIP
BEAUMONT HEALTH FOUNDATION 3711 WEST 13 MILE RD ROYAL OAK, MI 48073	36-4852171	501(C)(3)	30,000.	0.			TO SUPPORT MEDICAL RESEARCH
BELLE ISLE CONSERVANCY 300 RIVER PLACE DR, SUITE 2800 DETROIT, MI 48207	23-7348118	501(C)(3)	5,710.	0.			TO SUPPORT THE ENVIRONMENT & THE ARTS
BEST BUDDIES INTERNATIONAL, INC 100 STE 2ND STREET SUITE 2200 MIAMI, FL 33131	52-1614576	501(C)(3)	25,000.	0.			TO SUPPORT THE DISABLED
BIG BROTHERS & BIG SISTERS OF KENTUCKIANA, INC. - 1519 GARDINER LANE SUITE B - LOUISVILLE, KY 40218	61-6057856	501(C)(3)	5,500.	0.			TO SUPPORT YOUTH MENTORSHIPS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRMINGHAM BLOOMFIELD CHAI CENTER 37357 WOODWARD AVE. BLOOMFIELD HILLS, MI 48304	38-3485038	501(C)(3)	11,050.	0.			TO SUPPORT JEWISH COMMUNITY
BIRTHRIGHT ISRAEL FOUNDATION 33 EAST 33RD STREET NEW YORK, NY 10016	13-4092050	501(C)(3)	283,110.	0.			TO SUPPORT ISRAEL
B'NAI B'RITH HILLEL FOUNDATION 1640 ROHDE ISLAND AVE, NW WASHINGTON, DC 20036	31-1794932	501(C)(3)	36,988.	0.			TO SUPPORT THE ANNUAL CAMPAIGN
B'NEI AKIVA 520 8TH AVENUE NEW YORK, NY 10018	13-3713762	501(C)(3)	10,000.	0.			TO SUPPORT JUDAISM
BNEI AKIVA OF THE US AND CANADA 520 8TH AVE 15TH FLOOR NEW YORK, NY 10018	13-3713762	501(C)(3)	10,500.	0.			TO SUPPORT JUDAISM
BRAVO COLORADO AT VAIL-BEAVER CREEK - 2271 N FRONTAGE ROAD W, SUITE C - VAIL, CO 81657	84-1074065	501(C)(3)	22,500.	0.			TO SUPPORT THE ARTS
BREAKTHROUGH T1D MICHIGAN & NORTHERN OHIO SOUTHFIELD, MI 48075	23-1907729	501(C)(3)	41,150.	0.			TO SUPPORT MEDICAL RESEARCH
BRILLIANT DETROIT 5675 LARKINS DETROIT, MI 48201	47-3446334	501(C)(3)	1,008,100.	0.			TO SUPPORT CHILDREN
CABARET 313 PO BOX 2380 BIRMINGHAM, MI 48012	35-2463620	501(C)(3)	36,250.	0.			TO SUPPORT THE ARTS

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CAMPBELL HALL - EPISCOPAL 4533 LAUREL CANYON BLVD STUDIO CITY, CA 91607	95-1716787	501(C)(3)	7,500.	0.			TO SUPPORT RELIGION
CANCER THRIVERS NETWORK 7113 MEADOWLAKE ROAD BLOOMFIELD HILLS, MI 48301	88-4181707	501(C)(3)	19,000.	0.			TO SUPPORT JEWISH WOMEN WITH CANCER
CENTRAL FUND OF ISRAEL 461 CENTRAL AVE CEDARHURST, NY 11516	13-2992985	501(C)(3)	153,200.	0.			TO SUPPORT ISRAELI CHARITIES
CHABAD AT PORTLAND CAMPUSES INC 3355 SE STEELE ST PORTLAND, OR 97202	26-3782944	501(C)(3)	20,000.	0.			TO SUPPORT JUDAISM
CHABAD JEWISH CENTER - MSU 432 KENSINGTON ROAD EAST LANSING, MI 48823	83-3189940	501(C)(3)	6,000.	0.			TO SUPPORT JUDAISM
CHABAD JEWISH CENTER OF COMMERCE 810 SLEETH RD COMMERCE, MI 48382	20-0099262	501(C)(3)	5,400.	0.			TO SUPPORT JUDAISM
CHABAD JEWISH CENTER OF TROY 6835 LIMERICK LN TROY, MI 48098	84-4675150	501(C)(3)	20,568.	0.			TO SUPPORT JUDAISM
CHABAD OF BINGHAM FARMS 7475 WING LAKE ROAD BLOOMFIELD HILLS, MI 48301	86-1945252	501(C)(3)	10,000.	0.			TO SUPPORT JUDAISM
CHALDEAN COMMUNITY FOUNDATION 3601 15 MILE RD STERLING HEIGHTS, MI 48310	20-3963417	501(C)(3)	33,000.	0.			TO SUPPORT IMMIGRANT SERVICES & ADULT EDUCATION

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

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CHANGE REACTION 15301 VENTURA BLVD STE B570 SHERMAN OAKS, CA 91403	38-4128902	501(C)(3)	21,500.	0.			TO SUPPORT COMMUNITY
CHAPTER ONE 13553 STATE ROAD 54, SUITE 50 ODESSA, FL 33556	36-3873652	501(C)(3)	10,000.	0.			TO SUPPORT LITERACY
CHILD SAFE MICHIGAN 30301 NORTHWESTERN HIGHWAY, SUITE FARMINGTON HILLS, MI 48334	47-2481416	501(C)(3)	47,950.	0.			TO PROVIDE SERVICES FOR CHILDREN
CHILDREN'S FOUNDATION 3011 WEST GRAND BLVD, SUITE 218 DETROIT, MI 48202	32-0087353	501(C)(3)	32,500.	0.			TO SUPPORT MEDICAL CARE FOR CHILDREN
CHILDREN'S HOSPITAL OF MICHIGAN FOUNDATION - 3911 BEAUBIEN - DETROIT, MI 48201	32-0087353	501(C)(3)	10,000.	0.			TO SUPPORT HEALTH CARE
CHINOOK FUND 1031 33RD ST STE 237 DENVER, CO 80205	84-1076325	501(C)(3)	10,000.	0.			TO SUPPORT COMMUNITY
CHRIST CHURCH CRANBROOK 470 CHURCH ROAD BLOOMFIELD HILLS, MI 48304	31-1629166	501(C)(3)	6,200.	0.			TO SUPPORT THE NEEDY
CITY SCULPTURE 927 W WILLIS ST DETROIT, MI 48201	47-1247566	501(C)(3)	10,000.	0.			TO SUPPORT THE ARTS
CLAL - NATIONAL JEWISH CENTER FOR LEARNING AND LEADERSHIP INC - 440 PARK AVE SOUTH, 4TH FLOOR - NEW YORK, NY 10016	23-7390358	501(C)(3)	10,000.	0.			TO SUPPORT JEWISH WISDOM & ENGAGEMENT

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

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CLEVELAND CLINIC FOUNDATION PO BOX 931517 CLEVELAND, OK 44193	34-0714585	501(C)(3)	10,500.	0.			TO SUPPORT HEALTH CARE
COLD SPRINGS HARBOR LABORATORY 1 BUNGTOWN RD COLD SPRING HARBOR, NY 11724	11-2013303	501(C)(3)	10,000.	0.			TO SUPPORT THE NEEDY
COLEL CHABAD 806 EASTERN PARKWAY BROOKLYN, NY 11213	11-3254483	501(C)(3)	15,000.	0.			TO SUPPORT JUDAISM
COLORADO GRAND INC 3998 S MARIPOSA 8558 BASELINE RD LAFAYETTE, CO 80026	84-1115630	501(C)(3)	6,000.	0.			TO SUPPORT THE COMMUNITY
COMMON GROUND 1410 S. TELEGRAPH BLOOMFIELD HILLS, MI 48302	38-1997712	501(C)(3)	27,500.	0.			TO PROVIDE CRISIS SUPPORT AND MENTAL HEALTH CARE
CONGREGATION BAIS CHABAD OF FARMINGTON HILLS - 32000 MIDDLEBELT ROAD - FARMINGTON HILLS, MI 48334	38-2475494	501(C)(3)	12,200.	0.			TO SUPPORT JUDAISM
CONGREGATION BAIS CHABAD OF WEST BLOOMFIELD - 5595 W MAPLE ROAD - WEST BLOOMFIELD, MI 48322	38-2388299	501(C)(3)	11,550.	0.			TO SUPPORT JUDAISM
CONGREGATION BETH AHM 5075 W. MAPLE RD. WEST BLOOMFIELD, MI 48322	38-6004801	501(C)(3)	38,842.	0.			TO SUPPORT JUDAISM
CONGREGATION BETH CHABAD OF GREATER DOWNTOWN DETROIT - 278 MACK AVE - DETROIT, MI 48201	46-3290012	501(C)(3)	28,312.	0.			TO SUPPORT JUDAISM

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CONGREGATION BETH TEFILO EMANUEL TIKVAH - 24225 GREENFEILD RD - SOUTHFIELD, MI 48075	38-2223331	501(C)(3)	14,160.	0.			TO SUPPORT JUDAISM
CONGREGATION BNAI JESHURUN 1025 S ORANGE AVE SHORT HILLS, NJ 07078	22-1487157	501(C)(3)	51,000.	0.			TO SUPPORT JUDAISM
CONGREGATION FOR HUMANISTIC JUDAISM OF METRO DETROIT - 28611 W 12 MILE RD - FARMINGTON HILLS, MI 48334	38-1747980	501(C)(3)	9,850.	0.			TO SUPPORT JUDAISM
CONGREGATION SHA'AREI ISRAEL 7400 FALLS OF NEUSE ROAD RALEIGH, NC 27615	58-1371562	501(C)(3)	22,000.	0.			TO SUPPORT JUDAISM
CONGREGATION SHAAREY ZEDEK 27375 BELL RD SOUTHFIELD, MI 48034	38-1420140	501(C)(3)	144,923.	0.			TO SUPPORT JUDAISM
CONGREGATION T'CHIAH 22331 WOODWARD AVE FERNDAL, MI 48220	38-2153881	501(C)(3)	19,000.	0.			TO SUPPORT JUDAISM
CRANBROOK EDUCATIONAL COMMUNITY P.O. BOX 801 BLOOMFIELD HILLS, MI 48303	38-2015048	501(C)(3)	119,075.	0.			TO SUPPORT EDUCATION
CROHN'S & COLITIS FNDN OF AMERICA 25882 ORCHARD LAKE ROAD, SUITE 102 FARMINGTON HILLS, MI 48336	13-6193105	501(C)(3)	9,250.	0.			TO SUPPORT MEDICAL RESEARCH AND EDUCATION
CYSTIC FIBROSIS FOUNDATION 2265 LIVERNOIS SUITE 410 TROY, MI 48083	38-1723341	501(C)(3)	5,750.	0.			TO SUPPORT MEDICAL RESEARCH AND EDUCATION

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DAFFY CHARITABLE FUND 221 MAIN STREET UNIT 2061 LOS ALTOS, CA 94023	86-3177440	501(C)(3)	200,000.	0.			TO SUPPORT CHARITABLE GIVING
DEMOCRACY FORWARD FOUNDATION P.O. BOX 34553 WASHINGTON, DC 20043	82-1007988	501(C)(3)	10,000.	0.			TO SUPPORT DEMOCRACY
DETROIT 300 CONSERVANCY 1 CAMPUS MARTIUS STE 380 DETROIT, MI 48226	30-0002873	501(C)(3)	25,000.	0.			TO SUPPORT THE COMMUNITY
DETROIT CHESED PROJECT 30555 SOUTHFIELD RD, SUITE 520 SOUTHFIELD, MI 48076	46-4982483	501(C)(3)	35,313.	0.			TO SUPPORT JEWISH FAMILIES
DETROIT ECONOMIC CLUB 211 W FORT ST STE 710 DETROIT, MI 48226	38-0508823	501(C)(3)	6,500.	0.			TO SUPPORT PUBLIC DISCUSSION
DETROIT INSTITUTE OF ARTS 5200 WOODWARD AVE DETROIT, MI 48202	38-1359510	501(C)(3)	305,880.	0.			TO SUPPORT THE ARTS
DETROIT OPERA 1526 BROADWAY DETROIT, MI 48226	38-2052726	501(C)(3)	122,000.	0.			TO SUPPORT THE ARTS
DETROIT PUBLIC MEDIA 48325 ALPHA DRIVE, SUITE 150 WIXOM, MI 48393	38-1440200	501(C)(3)	14,688.	0.			TO SUPPORT THE ARTS
DETROIT PUBLIC THEATRE 684 WEST BALTIMORE, SUITE 203 DETROIT, MI 48202	47-3449342	501(C)(3)	18,250.	0.			TO SUPPORT THE ARTS

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DETROIT RIVERFRONT CONSERVANCY 600 RENAISSANCE CENTER, SUITE 1720 DETROIT, MI 48243	30-0125283	501(C)(3)	11,250.	0.			TO SUPPORT THE ENVIRONMENT
DETROIT SYMPHONY ORCHESTRA ADMINISTRATIVE OFFICE DETROIT, MI 48201	38-1385132	501(C)(3)	125,100.	0.			TO SUPPORT THE ARTS
DETROIT URBAN LEAGUE 208 MACK AVE DETROIT, MI 48201	38-1358387	501(C)(3)	6,500.	0.			TO SUPPORT THE COMMUNITY
DETROIT ZOOLOGICAL SOCIETY 8450 W. 10 MILE ROAD ROYAL OAK, MI 48067	38-6027356	501(C)(3)	14,000.	0.			TO SUPPORT THE ZOO
DETROIT2NEPAL FOUNDATION 2035 BAYOU DR WEST BLOOMFIELD, MI 48323	27-3387420	501(C)(3)	6,050.	0.			TO SUPPORT COMMUNITIES IN DETROIT AND NEPAL
DR. GARY BURNSTEIN COMMUNITY HEALTH CLINIC - 45580 WOODWARD AVE - PONTIAC, MI 48341	32-0015321	501(C)(3)	83,050.	0.			TO SUPPORT MEDICAL SERVICES
DYNAMI FOUNDATION P.O. BOX 700925 PLYMOUTH, MI 48170	83-4151559	501(C)(3)	8,000.	0.			TO SUPPORT CANCER RESEARCH
EAGLE VALLEY COMMUNITY FOUNDATION PO BOX 1580 VAIL, CO 81658	47-1915583	501(C)(3)	20,000.	0.			TO SUPPORT HEALTH AND EDUCATION
EDUCATION FOUNDATION OF EAGLE COUNTY - PO BOX 8012 - AVON, CO 81620	84-1585417	501(C)(3)	13,000.	0.			TO SUPPORT EDUCATION AND SUPPORT CHILDREN

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EIGHTEEN FOUNDATION 4208 OVERLAND AVE CULVER CITY, CA 90230	99-3657333	501(C)(3)	50,000.	0.			TO SUPPORT THE JEWISH COMMUNITY
EMPOWERMENT CHURCH 24350 SOUTHFIELD ROAD SOUTHFIELD, MI 48075	46-5442032	501(C)(3)	24,625.	0.			TO SUPPORT RELIGION
EPILEPSY FOUNDATION OF LOS ANGELES 5777 W CENTURY BLVD, #820 LOS ANGELES, CA 90045	95-2046033	501(C)(3)	25,000.	0.			TO SUPPORT MEDICAL RESEARCH
ERASE PTSD NOW 1515 E WOODFIELD RD STE 250 SCHAUMBURG, IL 60173	26-3006397	501(C)(3)	7,000.	0.			TO SUPPORT MEDICAL RESEARCH AND EDUCATION
FAMILY HOUSE INC 540 MISSION BAY BLVD N SAN FRANCISCO, CA 94158	94-2722663	501(C)(3)	100,000.	0.			TO SUPPORT FAMILIES OF SICK CHILDREN
FARBER HEBREW DAY SCHOOL - YESHIVAT AKIVA - 21100 W TWELVE MILE RD - SOUTHFIELD, MI 48076	38-1750780	501(C)(3)	836,918.	0.			TO SUPPORT EDUCATION
FEEDING THE HUNGRY, INC 8500 WATER CAY WEST PALM BEACH, FL 33411	45-3532462	501(C)(3)	10,000.	0.			TO SUPPORT SOCIAL PROGRAMS
FORGOTTEN HARVEST 21800 GREENFIELD OAK PARK, MI 48237	38-2926476	501(C)(3)	47,173.	0.			TO FEED THE HUNGRY
FRANKEL JEWISH ACADEMY OF METRO DETROIT - 6600 WEST MAPLE RD - WEST BLOOMFIELD, MI 48322	38-3428219	501(C)(3)	545,750.	0.			TO SUPPORT EDUCATION

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FRESH AIR SOCIETY 6735 TELEGRAPH RD. BLOOMFIELD HILLS, MI 48301	38-1360545	501(C)(3)	919,543.	0.			TO SUPPORT THE NEEDS OF CHILDREN
FRIENDS OF BLUE AND WHITE 401 B ST STE 1200 SAN DIEGO, CA 92101	93-1437581	501(C)(3)	10,000.	0.			TO SUPPORT EDUCATION ON ISRAEL
FRIENDS OF LAKE LEELANAU 201 N MAIN ST LELAND, MI 49654	87-2224414	501(C)(3)	10,000.	0.			TO SUPPORT THE COMMUNITY
FRIENDS OF REFUGEES OF E EUROPE 15700 W 10 MILE ROAD, SUITE 217 SOUTHFIELD, MI 48075	38-3105588	501(C)(3)	26,000.	0.			TO SUPPORT IMMIGRANT SERVICES
FRIENDS OF SOUTHFIELD PUBLIC ARTS 26000 EVERGREEN RD OFC SOUTHFIELD, MI 48076	82-5306956	501(C)(3)	10,000.	0.			TO SUPPORT THE ARTS
FRIENDSHIP CIRCLE 6892 W MAPLE RD WEST BLOOMFIELD, MI 48322	38-3613944	501(C)(3)	282,000.	0.			TO SUPPORT FAMILIES WITH SPECIAL NEEDS
FUND FOR ISRAELS TOMORROW PO BOX 644735 PITTSBURGH, PA 15264	35-2374190	501(C)(3)	10,000.	0.			TO SUPPORT ISRAEL
GESHER HUMAN SERVICES 29699 SOUTHFIELD ROAD SOUTHFIELD, MI 48076	38-1358013	501(C)(3)	417,357.	0.			TO SUPPORT JEWISH COMMUNITY
GILDA'S CLUB OF METRO DETROIT 3517 ROCHESTER ROAD ROYAL OAK, MI 48073	38-3150211	501(C)(3)	11,350.	0.			TO SUPPORT CANCER SURVIVORS & FAMILIES

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GIVE MERIT INC 10100 GRAND RIVER AVE DETROIT, MI 48204	45-2907584	501(C)(3)	10,000.	0.			TO SUPPORT EDUCATION
GLEANERS COMMUNITY FOOD BANK 2131 BEAUFAIT DETROIT, MI 48207	38-2156255	501(C)(3)	28,710.	0.			TO FEED THE HUNGRY
GOLDEN RETRIEVER RESCUE OF MICHIGAN - 32800 ROMSEY RD - FRANKLIN, MI 48025	38-3537484	501(C)(3)	5,500.	0.			TO SUPPORT ANIMALS
GREAT LAKES CHAMBER MUSIC FESTIVAL 24901 NORTHWESTERN HIGHWAY, SUITE 3 SOUTHFIELD, MI 48075	20-1106153	501(C)(3)	31,949.	0.			TO SUPPORT THE ARTS
GUARDIAN.ORG FOUNDATION 900 17TH ST NW STE 250 WASHINGTON, DC 20006	81-2404459	501(C)(3)	13,000.	0.			TO SUPPORT INDEPENDENT JOURNALISM
H.S.H., INC 5917 CROMWELL DR WEST BLOOMFIELD, MI 48322	38-6058400	501(C)(3)	5,045.	0.			TO HOLD REAL ESTATE ON BEHALF OF NON-PROFITS
HABITAT FOR HUMANITY VAIL VALLEY INC - PO BOX 4149 - AVON, CO 81620	84-1278922	501(C)(3)	10,000.	0.			TO PROVIDE HOUSING
HABONIM DROR CAMP TAVOR 2755 WINGATE LANE E WEST BEND, IN 53090	36-6009159	501(C)(3)	25,000.	0.			TO SUPPORT JEWISH CAMPING
HADASSAH 5341 ATLANTIC AVE DELRAY BEACH, FL 33484	13-1656651	501(C)(3)	6,560.	0.			TO SUPPORT JUDAISM

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HAIRTOSTAY 2234 BEACH STREET SAN FRANCISCO, CA 94123	45-3419887	501(C)(3)	10,000.	0.			TO SUPPORT CANCER PATIENTS
HEBREW FREE LOAN 6735 TELEGRAPH RD BLOOMFIELD HILLS, MI 48301	38-1359260	501(C)(3)	242,802.	0.			TO PROVIDE INTEREST FREE LOANS
HENRY FORD HEALTH SYSTEM ONE FORD PLACE DETROIT, MI 48202	38-1357020	501(C)(3)	128,750.	0.			TO SUPPORT HEALTH CARE
HIGHER HOPES 8898 COMMERCE 5C COMMERCE, MI 48382	37-1746399	501(C)(3)	15,000.	0.			TO SUPPORT NEEDY CHILDREN & FAMILIES
HILLEL DAY SCHOOL 32200 MIDDLEBELT ROAD FARMINGTON HILLS, MI 48334	38-1586703	501(C)(3)	1,015,287.	0.			TO SUPPORT EDUCATION
HILLEL OF METRO DETROIT 667 GROSBERG CENTER DETROIT, MI 48202	52-1758804	501(C)(3)	98,703.	0.			TO SUPPORT EDUCATION
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE - 800 8TH STREET NW - WASHINGTON, DC 20001	52-1844823	501(C)(3)	11,550.	0.			TO ENRICH THE LIVES OF JEWISH STUDENTS
HOLOCAUST MEMORIAL CENTER 28123 ORCHARD LAKE RD FARMINGTON HILLS, MI 48334	38-2402635	501(C)(3)	265,560.	0.			TO PRESERVE THE PAST AND PROTECT THE FUTURE
IKAR 1737 SOUTH LA CIENEGA BLVD LOS ANGELES, CA 90035	20-1210098	501(C)(3)	18,000.	0.			TO SUPPORT JUDAISM

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IMERMAN ANGELS 205 W. RANDOLPH STREET, 19TH FLOOR CHICAGO, IL 60606	20-5651272	501(C)(3)	36,000.	0.			TO SUPPORT CANCER PATIENTS
INDIANA UNIVERSITY FOUNDATION PO BOX 6460 INDIANAPOLIS, IN 46206	35-6018940	501(C)(3)	20,000.	0.			TO SUPPORT EDUCATION
ISAAC AGREE DOWNTOWN SYNAGOGUE 2568 GRISWOLD STREET DETROIT, MI 48226	38-2937738	501(C)(3)	28,620.	0.			TO SUPPORT JUDAISM
ISRAEL GUIDE DOG CENTER FOR THE BLIND - 968 ESTON ROAD, SUITE H - WARRINGTON, PA 18976	23-2519029	501(C)(3)	41,500.	0.			TO SUPPORT INDEPENDENT LIVING FOR PEOPLE WITH DISABILITIES
JARC 30301 NORTHWESTERN HWY SUITE 100 FARMINGTON HILLS, MI 48334	38-3690103	501(C)(3)	120,780.	0.			TO SUPPORT DISABLED INDIVIDUALS
JCRC OF SAN FRANCISCO MARIN & PENINSULA - 121 STEUART ST - SAN FRANCISCO, CA 94105	94-1156335	501(C)(3)	10,000.	0.			TO SUPPORT THE JEWISH COMMUNITY
JDRF INTERNATIONAL MICHIGAN & NORTHERN OHIO 24359 NORTHWESTERN HWY, STE 125 - SOUTHFIELD, MI 4	23-1907729	501(C)(3)	78,000.	0.			TO SUPPORT MEDICAL RESEARCH
JEWISH ADOPTION AND FOSTER CARE OPTIONS INC - 4200 N UNIVERSITY DR - SUNRISE, FL 33351	20-0898587	501(C)(3)	10,800.	0.			TO PROVIDE FUNDING FOR JEWISH ADOPTIONS
JEWISH AGENCY FOR ISRAEL 633 THIRD AVE, 21ST FLOOR NEW YORK, NY 10017	23-0053483	501(C)(3)	10,500.	0.			TO SUPPORT HUMAN RIGHTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH COMMUNITY CENTER 6600 WEST MAPLE ROAD WEST BLOOMFIELD, MI 48322	38-1358397	501(C)(3)	1,534,084.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH COMMUNITY SECURITY, INC 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48303	87-2567224	501(C)(3)	51,477.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH CONGREGATION OF STEAMBOAT SPRINGS HAR MISHPACHA - PO BOX 776108 - STEAMBOAT SPRINGS, CO 80477	27-2095392	501(C)(3)	7,750.	0.			TO SUPPORT JUDAISM
JEWISH DENTAL CLINIC INC. 31400 NORTHWESTERN HWY UNIT C FARMINGTON HILLS, MI 48334	26-4155829	501(C)(3)	7,650.	0.			TO PROVIDE DENTAL CARE TO THE JEWISH COMMUNITY
JEWISH FAMILY SERVICE 6555 WEST MAPLE RD WEST BLOOMFIELD, MI 48322	38-0691329	501(C)(3)	1,196,849.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH FAMILY SERVICES OF WASHTENAW COUNTY - 2245 S STATE ST SUITE 200 - ANN ARBOR, MI 48104	41-2147486	501(C)(3)	35,000.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH FED OF S. PALM BEACH CTY 9901 DONNA KLEIN BLVD. BOCA RATON, FL 33428	59-1945109	501(C)(3)	8,150.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH FEDERATION OF DETROIT 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	38-1359214	501(C)(3)	19,325,079.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH FEDERATION OF GREATER ANN ARBOR - 2939 BIRCH HOLLOW DRIVE - ANN ARBOR, MI 48108	38-2711480	501(C)(3)	10,800.	0.			TO SUPPORT THE JEWISH COMMUNITY

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JEWISH FEDERATION OF GREATER LOS ANGELES - 6505 WILSHIRE BLVD #850/AV - LOS ANGELES, CA 90048	95-1643388	501(C)(3)	14,380.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH FEDERATION OF PALM BEACH COUNTY - 4601 COMMUNITY DRIVE - WEST PALM BEACH, FL 33417	59-0948696	501(C)(3)	80,600.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY - 9901 DONNA KLEIN BLVD - BOCA RATON, FL 33428	59-1945109	501(C)(3)	19,700.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH FERTILITY FOUNDATION, INC. 2897 N DRUID HILLS RD NE STE 146 ATLANTA, GA 30329	81-0789964	501(C)(3)	7,800.	0.			TO SUPPORT MEDICAL RESEARCH & EDUCATION
JEWISH HISTORICAL SOCIETY OF MICHIGAN - 33228 WEST 12 MILE RD., SUITE 349 - FARMINGTON HILLS, MI 48334	38-6056397	501(C)(3)	9,150.	0.			TO SUPPORT JEWISH HISTORY
JEWISH HOSPICE & CHAPLAINCY NETWORK - 6555 W MAPLE RD - WEST BLOOMFIELD, MI 48322	38-3429268	501(C)(3)	228,936.	0.			TO SUPPORT THE ELDERLY
JEWISH NATIONAL FUND 60 RIVERA DRIVE, SUITE 960 NORTHBROOK, IL 60062	13-1659627	501(C)(3)	7,374.	0.			TO SUPPORT LAND IN ISRAEL
JEWISH RESOURCE CENTER CHABAD OF ASPEN - 435 WEST MAIN STREET - ASPEN, CO 81611	22-3787221	501(C)(3)	25,000.	0.			TO SUPPORT JEWISH EDUCATION
JEWISH SENIOR LIFE OF METRO DETROIT - 15000 WEST TEN MILE ROAD - OAK PARK, MI 48237	38-2693397	501(C)(3)	2,072,310.	0.			TO SUPPORT THE ELDERLY

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JEWISH UNITED FUND OF METRO CHICAGO - 30 SOUTH WELLS, #315 - CHICAGO, IL 60606	36-2167034	501(C)(3)	79,300.	0.			TO SUPPORT THE JEWISH COMMUNITY
JEWISH WISDOM FOUNDATION 28123 ORCHARD LAKE RD FARMINGTON HILLS, MI 48334	47-4315104	501(C)(3)	6,500.	0.			TO SUPPORT JUDAISM
JIMMY'S KIDS P.O. BOX 150 CLAWSON, MI 48017	30-0626732	501(C)(3)	5,250.	0.			TO SUPPORT NEEDY CHILDREN
JUST ONE CHESED INC 7444 W WILSON AVE HARWOOD HEIGHTS, IL 60706	47-5615860	501(C)(3)	10,000.	0.			TO SUPPORT JEWISH COMMUNITY
KARMANOS CANCER INSTITUTE 4100 JOHN R DETROIT, MI 48201	38-1613280	501(C)(3)	104,550.	0.			TO SUPPORT MEDICAL RESEARCH & EDUCATION
KEHILLAT ETZ CHAYIM 660 WOODWARD AVE, STE 2290 DETROIT, MI 48226	82-4686073	501(C)(3)	55,000.	0.			TO SUPPORT JUDAISM
KERRYTOWN CONCERT HOUSE INC 415 N 4TH AVE ANN ARBOR, MI 48104	38-2542823	501(C)(3)	10,000.	0.			TO SUPPORT THE ARTS
KHAL RINA UTEFILA 14540 BALFOUR STREET OAK PARK, MI 48237	81-1744058	501(C)(3)	7,124.	0.			TO SUPPORT JUDAISM
KIDS KICKING CANCER 27600 NORTHWESTERN HIGHWAY, SUITE 2 SOUTHFIELD, MI 48304	38-3500655	501(C)(3)	65,775.	0.			TO SUPPORT SICK CHILDREN

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

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KOLLEL INSTITUTE OF GTR DETROIT 15230 WEST LINCOLN RD OAK PARK, MI 48237	38-2114751	501(C)(3)	34,094.	0.			TO SUPPORT JEWISH EDUCATION
LA COCINA 2948 FOLSOM ST SAN FRANCISCO, CA 94110	59-3838549	501(C)(3)	10,000.	0.			TO SUPPORT ENTREPRENEURSHIP
LAHSEY ROAD MIKVAH 22334 CHATSFORD CIRCUIT SOUTHFIELD, MI 48034	82-2713014	501(C)(3)	19,133.	0.			TO SUPPORT JUDAISM
LATIN SCHOOL OF CHICAGO 59 W NORTH BLVD CHICAGO, IL 60610	36-2258525	501(C)(3)	15,000.	0.			TO SUPPORT EDUCATION
LIGHTHOUSE OF OAKLAND COUNTY, INC. PO BOX 430508 PONTIAC, MI 48342	38-2391381	501(C)(3)	7,500.	0.			TO SUPPORT THE COMMUNITY
LUBAVITCH CHEDER 14100 W. NINE MILE ROAD OAK PARK, MI 48237	38-3253099	501(C)(3)	12,701.	0.			TO SUPPORT JUDAISM
LUBAVITCH FOUNDATION 14100 W. 9 MILE RD. OAK PARK, MI 48237	38-2346125	501(C)(3)	75,982.	0.			TO SUPPORT JUDAISM
MALTZ JUPITER THEATRE, INC. 1001 EAST INDIANTOWN RD JUPITER, FL 33477	65-0985652	501(C)(3)	6,001.	0.			TO SUPPORT THE ARTS
MATAN B'SETER 15699 JEANETTE SOUTHFIELD, MI 48075	38-2884963	501(C)(3)	21,923.	0.			TO ASSIST THE JEWISH COMMUNITY

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

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MAYO CLINIC 13400 E SHEA BLVD SCOTTSDALE, AZ 85259	41-6011702	501(C)(3)	10,000.	0.			TO SUPPORT THE MAYO COMMUNITY
MELA FOUNDATION INC 275 CHURCH STREET, 3RD FLOOR NEW YORK, NY 10013	13-3352195	501(C)(3)	10,000.	0.			TO SUPPORT THE ARTS
MEMORIAL SLOAN-KETTERING CANCER CENTER - 1275 YORK AVE - NEW YORK, NY 10021	91-2154267	501(C)(3)	50,500.	0.			TO SUPPORT MEDICAL RESEARCH
MENACHEM EDUCATION FOUNDATION, INC 411 KINGSTON AVE. SUITE 300 BROOKLYN, NY 11225	26-2117750	501(C)(3)	9,000.	0.			TO SUPPORT EDUCATION
MERIDIAN INTERNATIONAL CENTER 1630 CRESCENT PLACE NW WASHINGTON, DC 20009	53-0259663	501(C)(3)	10,000.	0.			TO SUPPORT LEADERSHIP AND DIPLOMACY
MEZUZAH 6008 16TH ST DETROIT, MI 48208	92-3260988	501(C)(3)	15,000.	0.			TO SUPPORT JEWISH COMMUNITY
MICHIGAN ANIMAL RESCUE LEAGUE 790 FEATHERSTONE PONTIAC, MI 48342	38-1557622	501(C)(3)	25,450.	0.			TO SUPPORT ANIMAL RIGHTS
MICHIGAN CIVIC EDUCATION FUND 28342 DARTMOUTH ST MADISON HEIGHTS, MI 48071	82-4762045	501(C)(3)	25,000.	0.			TO SUPPORT EDUCATION
MICHIGAN HUMANE SOCIETY 3600 AUBURN RD ROCHESTER, MI 48309	38-1358206	501(C)(3)	13,000.	0.			TO SUPPORT & PROTECT ANIMALS

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

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MICHIGAN ISRAEL BUSINESS ACCELERATOR FOUNDATION - 407 E. FORT STREET, SUITE 205 - DETROIT, MI 48226	27-3157523	501(C)(3)	6,500.	0.			TO SUPPORT ECONOMIC DEVELOPMENT AND EDUCATION
MICHIGAN LEAGUE OF CONSERVATION VOTERS EDUCATION FUND - 340 BEAKES ST, STE 110 - ANN ARBOR, MI 48104	37-1430158	501(C)(3)	10,250.	0.			TO SUPPORT EDUCATION
MICHIGAN STATE UNIVERSITY A217 EAST FEE HALL EAST LANSING, MI 48224	38-6005984	501(C)(3)	333,250.	0.			TO SUPPORT EDUCATION
MICHIGAN STATE UNIVERSITY - HILLEL FOUNDATION - 360 CHARLES STREET - EAST LANSING, MI 48824	38-3034766	501(C)(3)	388,596.	0.			TO SUPPORT JEWISH EDUCATION
MIDNIGHT GOLF PROGRAM 30100 TELEGRAPH ROAD #404 BINGHAM FARMS, MI 48025	38-3580432	501(C)(3)	12,500.	0.			TO SUPPORT YOUTH MENTORSHIPS
MILWAUKEE JEWISH FEDERATION, INC 1360 N PROSPECT AVE MILWAUKEE, WI 53202	39-0806312	501(C)(3)	7,303.	0.			TO SUPPORT THE JEWISH COMMUNITY
MISHKAN CHICAGO 4001 N. RAVENSWOOD AVE CHICAGO, IL 60613	45-4922824	501(C)(3)	5,500.	0.			TO SUPPORT JEWISH COMMUNITY
MORSELIFE HEALTH SYSTEM INC 4847 DAVID S. MACK DRIVE WEST PALM BEACH, FL 33417	65-0018299	501(C)(3)	10,000.	0.			TO SUPPORT MEDICAL TREATMENT
MOTOWN HISTORICAL MUSEUM INC 2648 W GRAND BLVD DETROIT, MI 48208	38-2614561	501(C)(3)	8,610.	0.			TO SUPPORT THE ARTS

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MUSEUM OF CONTEMPORARY ART DETROIT 4454 WOODWARD AVE DETROIT, MI 48201	20-3872376	501(C)(3)	10,500.	0.			TO SUPPORT THE MUSEUM COMMUNITY
N C J W 26400 LAHSEY, STE. 306 SOUTHFIELD, MI 48033	38-1358385	501(C)(3)	30,000.	0.			TO SUPPORT JEWISH WOMEN
NATIONAL ARCHIVES FOUNDATION 700 PENNSYLVANIA AVE NW RM G12 WASHINGTON, DC 20408	52-1792608	501(C)(3)	10,000.	0.			TO SUPPORT LITERACY
NATIONAL COUNCIL OF JEWISH WOMEN 543 N. FAIRFAX AVE LOS ANGELES, CA 90036	95-1641433	501(C)(3)	43,930.	0.			TO SUPPORT WOMEN'S CAUSES
NATIONAL MULTIPLE SCLEROSIS SOCIETY - P.O. BOX 4594 - NEW YORK, NY 10163	13-5661935	501(C)(3)	5,910.	0.			TO SUPPORT MEDICAL RESEARCH & EDUCATION
NATIONAL RAMAH COMMISSION INC 3080 BROADWAY NEW YORK, NY 10027	13-6161110	501(C)(3)	26,100.	0.			TO SUPPORT JEWISH CAMPS
NATIONAL YIDDISH BOOK CENTER 1021 WEST STREET AMHERST, MA 01002	04-2708878	501(C)(3)	52,000.	0.			TO SUPPORT JEWISH EDUCATION
NATURE CONSERVANCY 101 E. CAESAR CHAVEZ AVE LANSING, MI 48906	90-0248331	501(C)(3)	9,000.	0.			TO SUPPORT THE ENVIRONMENT
NCSY 16947 W 10 MILE RD SOUTHFIELD, MI 48075	13-5623717	501(C)(3)	9,210.	0.			TO SUPPORT JEWISH YOUTH

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NEW YORK CITY CENTER INC 130 W 56TH ST NEW YORK CITY, NY 10019	13-2867442	501(C)(3)	7,500.	0.			TO SUPPORT THE ARTS
NF FORWARD 1074 WOODWARD DETROIT, MI 48226	82-1672519	501(C)(3)	86,800.	0.			TO SUPPORT MEDICAL RESEARCH
NLI USA INC 25 W 45TH ST STE 504 NEW YORK CITY, NY 10036	46-4986788	501(C)(3)	150,000.	0.			TO SUPPORT LITERACY
NORTH AMERICAN FRIENDS OF ORANIM INC - 1111 E FAIRY CHASM RD - MILWAUKEE, WI 53217	22-2388849	501(C)(3)	11,000.	0.			TO SUPPORT EDUCATION
OAKLAND UNIVERSITY 2200 N. SQUIRREL ROAD ROCHESTER, MI 48309	38-6078765	501(C)(3)	10,079.	0.			TO SUPPORT EDUCATION
ONETABLE 228 PARK AVENUE SOUTH SUITE 77191 NEW YORK, NY 10003	46-4715368	501(C)(3)	20,000.	0.			TO SUPPORT JEWISH COMMUNITY
OR HALEV CENTER FOR JEWISH SPIRITUALITY AND MEDITATION INC - 340 S. LEMON AVE #8404 - WALNUT, CA 91789	82-2531089	501(C)(3)	10,000.	0.			TO SUPPORT JEWISH SPIRITUALITY
ORCHARDS CHILDREN'S SERVICE 30215 SOUTHFIELD RD SOUTHFIELD, MI 48076	38-2712084	501(C)(3)	9,750.	0.			TO SUPPORT CHILDREN
ORT AMERICA 6735 TELEGRAPH RD BLOOMFIELD HILLS, MI 48301	13-5562424	501(C)(3)	295,805.	0.			TO SUPPORT JOB EDUCATION

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PARTNERS IN TORAH YESHIVA BETH YEHUDAH SOUTHFIELD, MI 48076	20-8908428	501(C)(3)	102,000.	0.			TO SUPPORT JEWISH EDUCATION
PASTEUR ELEMENTARY SCHOOL ALUMNI FOUNDATION - PO BOX 7083 - HUNTINGTON WOODS, MI 48070	38-3351845	501(C)(3)	8,000.	0.			TO SUPPORT EDUCATION
PEACE NEIGHBORHOOD CENTER 1111 NORTH MAPLE ROAD ANN ARBOR, MI 48103	27-7437867	501(C)(3)	15,500.	0.			TO PROVIDE FAMILY AND YOUTH SOCIAL SERVICES
PEF ISRAEL ENDOWMENT FUND PO BOX 9991 SAN JOSE, CA 95157	13-6104086	501(C)(3)	46,000.	0.			TO SUPPORT WOMEN'S CAUSES
PINK FUND INC PO BOX 603 BLOOMFIELD HILLS, MI 48303	45-0544575	501(C)(3)	7,110.	0.			TO SUPPORT BREAST CANCER PATIENTS
PLANNED PARENTHOOD OF MICHIGAN PO BOX 3673 ANN ARBOR, MI 48106	38-1707521	501(C)(3)	51,600.	0.			TO SUPPORT HEALTH CARE
PODCAST EDUCATIONAL FOUNDATION 24786 SUSSEX ST OAK PARK, MI 48237	86-3753638	501(C)(3)	10,000.	0.			TO SUPPORT EDUCATION
PROJECT KESHER 2660 BROADWAY #16 NEW YORK, NY 10025	36-3673594	501(C)(3)	6,000.	0.			TO SUPPORT JEWISH COMMUNITY
REPAIR THE WORLD, INC. 25 BROADWAY 17TH FLOOR NEW YORK, NY 10004	36-4524686	501(C)(3)	40,250.	0.			TO SUPPORT JEWISH COMMUNITY

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REUT USA 21550 OXNARD ST. WOODLAND HILLS, CA 91367	20-3585888	501(C)(3)	50,000.	0.			TO SUPPORT ISRAEL
RINGLING COLLEGE OF ART & DESIGN 2700 N. TAMIAMI TRL SARASOTA, FL 34234	59-0637903	501(C)(3)	30,000.	0.			TO SUPPORT EDUCATION
ROEPER SCHOOL 1051 OAKLAND AVE BIRMINGHAM, MI 48009	38-1561062	501(C)(3)	5,500.	0.			TO SUPPORT EDUCATION
RONALD MCDONALD HOUSE CHARITIES ANN ARBOR - 1600 WASHINGTON HTS - ANN ARBOR, MI 48104	38-2473817	501(C)(3)	7,500.	0.			TO SUPPORT FAMILIES WITH SICK CHILDREN
SAN FRANCISCO JEWISH COMM PUBLICATIONS - PO BOX 192604 - SAN FRANCISCO, CA 94119	94-1089387	501(C)(3)	10,000.	0.			TO SUPPORT JUDAISM
SARASOTA MANATEE JEWISH FEDERATION 580 S. MCINTOSH RD SARASOTA, FL 34232	59-1227747	501(C)(3)	25,000.	0.			TO SUPPORT THE JEWISH COMMUNITY
SARASOTA MUSEUM OF ART, INC 2700 N TAMIAMI TRL SARASOTA, FL 34234	59-0637903	501(C)(3)	15,000.	0.			TO SUPPORT THE ARTS
SARASOTA ORCHESTRA 709 N. TAMIAMI TRL SARASOTA, FL 34236	59-2603081	501(C)(3)	25,000.	0.			TO SUPPORT THE ARTS
SAVE A CHILDS HEART FOUNDATION US, INC. - PO BOX 59172 - POTOMAC, MD 20859	52-1783323	501(C)(3)	20,000.	0.			TO SUPPORT MEDICAL ADVANCEMENT

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SEBASTIAN CHAMBER PLAYERS 163 SAINT NICHOLAS AVE APT 2H NEW YORK, NY 10026	05-0545360	501(C)(3)	10,000.	0.			TO SUPPORT THE ARTS
SHARE DETROIT INC 38710 WOODWARD AVE BLOOMFIELD HILLS, MI 48304	36-4940833	501(C)(3)	24,000.	0.			TO SUPPORT PHILANTHROPY AND VOLUNTARISM
SIMON WIESENTHAL CENTER 1399 SOUTH ROXBURY DR LOS ANGELES, CA 90035	95-3964928	501(C)(3)	6,650.	0.			TO SUPPORT JEWISH HISTORY
SKEGEMOG RAPTOR CENTER 3632 N SPIDER LAKE RD TRAVERSE CITY, MI 49696	86-2032644	501(C)(3)	6,000.	0.			TO SUPPORT ANIMALS
SKY FOUNDATION INC 33 BLOOMFIELD HILLS PKWY, SUITE 275 BLOOMFIELD HILLS, MI 48304	26-2720583	501(C)(3)	17,750.	0.			TO SUPPORT MEDICAL RESEARCH
ST. JUDE'S CHILDREN'S RESEARCH HOSPITAL - 262 DANNY THOMAS PLACE - MEMPHIS, TN 38105	35-1044585	501(C)(3)	8,500.	0.			TO SUPPORT MEDICAL RESEARCH
STAND TOGETHER DAY 6230 ORCHARD LAKE ROAD WEST BLOOMFIELD, MI 48322	45-3742961	501(C)(3)	11,500.	0.			TO SUPPORT ANTI-BULLYING PROGRAMS
STANFORD UNIVERSITY PO BOX 20466 STANFORD, CA 94309	94-1156365	501(C)(3)	150,500.	0.			TO SUPPORT EDUCATION
TEMPLE BETH EL 7400 TELEGRAPH RD. BLOOMFIELD HILLS, MI 48301	38-1359595	501(C)(3)	43,842.	0.			TO SUPPORT JUDAISM

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TEMPLE B'NAI ISRAEL 329 NORTH STREET BOYNE CITY, MI 49712	38-6071719	501(C)(3)	31,300.	0.			TO SUPPORT JUDAISM
TEMPLE EMANU-EL 14450 W. TEN MILE RD. OAK PARK, MI 48237	38-1493800	501(C)(3)	29,590.	0.			TO SUPPORT JUDAISM
TEMPLE ISRAEL 5725 WALNUT LAKE RD. WEST BLOOMFIELD, MI 48323	38-1490194	501(C)(3)	163,885.	0.			TO SUPPORT JUDAISM
TEMPLE ISRAEL OF LONG BEACH 3538 E. 3RD ST LONG BEACH, CA 90814	95-1684093	501(C)(3)	75,000.	0.			TO SUPPORT JUDAISM
TEMPLE KOL AMI 5085 WALNUT LAKE ROAD WEST BLOOMFIELD, MI 48323	38-6140065	501(C)(3)	13,000.	0.			TO SUPPORT JUDAISM
TEMPLE SHIR SHALOM 3999 WALNUT LAKE ROAD WEST BLOOMFIELD, MI 48323	38-2803191	501(C)(3)	71,200.	0.			TO SUPPORT JUDAISM
THE ASPEN INSTITUTE 1000 N. 3RD STREET ASPEN, CO 81611	84-0399006	501(C)(3)	10,000.	0.			TO SUPPORT ECONOMIC DEVELOPMENT AND EDUCATION
THE CHADTOUGH FOUNDATION PO BOX 907 SALINE, MI 48176	47-4041494	501(C)(3)	8,500.	0.			TO SUPPORT MEDICAL RESEARCH
THE EDISON INSTITUTE D/B/A THE HENRY FORD - 20900 OAKWOOD BLVD - DEARBORN, MI 48124	38-1359513	501(C)(3)	15,000.	0.			TO SUPPORT EDUCATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE JOFFREY BALLET 10 E RANDOLPH STREET CHICAGO, IL 60601	36-4009741	501(C)(3)	10,000.	0.			TO SUPPORT THE ARTS
THE SHALOM HARTMAN INSTITUTE OF NORTH AMERICA - 475 RIVERSIDE DR STE 1450 - NEW YORK, NY 10115	13-3014387	501(C)(3)	31,360.	0.			TO SUPPORT THE JEWISH COMMUNITY
THE SHUL 6890 W MAPLE RD WEST BLOOMFIELD, MI 48322	20-1370223	501(C)(3)	21,290.	0.			TO SUPPORT JUDIASM
THE UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER - PO BOX 4486 - HOUSTON, TX 77210	74-6001118	501(C)(3)	580,220.	0.			TO SUPPORT MEDICAL RESEARCH
THE WORLD VALUES NETWORK 27 SKY MEADOW ROAD SUFFERN, NY 10901	11-3483906	501(C)(3)	11,800.	0.			TO SUPPORT JUDAISM
TIPPING POINT COMMUNITY 220 MONTGOMERY STREET SAN FRANCISCO, CA 94104	20-2121739	501(C)(3)	10,000.	0.			TO SUPPORT THE NEEDY
UNITED JEWISH FEDERATION OF UTAH 2 N MEDICAL DR SALT LAKE CITY, UT 84113	87-0282380	501(C)(3)	11,100.	0.			TO SUPPORT THE JEWISH COMMUNITY
UNITED WAY OF SOUTH CENTRAL MICHIGAN - 709 S WESTNEDGE AVE - KALAMAZOO, MI 49007	38-1359193	501(C)(3)	10,000.	0.			TO SUPPORT THE COMMUNITY
UNITED WAY OF SOUTHEASTERN MICHIGAN - 660 WOODWARD AVE, STE 300 - DETROIT, MI 48226	20-3099071	501(C)(3)	42,250.	0.			TO SUPPORT THE COMMUNITY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY MUSICAL SOCIETY 881 N UNIVERSITY AVE ANN ARBOR, MI 48109	38-1545881	501(C)(3)	26,500.	0.			TO SUPPORT THE ARTS
UNIVERSITY OF DETROIT JESUIT HIGH SCHOOL AND ACADEMY - 8400 S. CAMBRIDGE - DETROIT, MI 48221	38-1360587	501(C)(3)	10,000.	0.			TO SUPPORT EDUCATION
UNIVERSITY OF MICHIGAN 3003 SOUTH STATE ST, STE 9000 ANN ARBOR, MI 48109	38-6006309	501(C)(3)	655,704.	0.			TO SUPPORT EDUCATION
V HECHZAKTA BO PO BOX 310737 DETROIT, MI 48231	38-2876911	501(C)(3)	18,000.	0.			TO SUPPORT JUDAISM & HUMAN SERVICES
VAIL HEALTH SERVICES FOUNDATION PO BOX 40000 VAIL, CO 81658	74-2505662	501(C)(3)	200,000.	0.			TO SUPPORT HEALTH CARE
VAIL PERFORMING ARTS ACADEMY INC PO BOX 2300 EDWARDS, CO 81632	84-1472671	501(C)(3)	8,000.	0.			TO SUPPORT THE ARTS
VAIL VALLEY FOUNDATION P.O. BOX 6550 AVON, CO 81620	74-2215035	501(C)(3)	25,250.	0.			TO SUPPORT THE COMMUNITY
VAN WEZEL FOUNDATION INC 777 N TAMIAMI TRAIL, 3RD FLOOR SARASOTA, FL 34236	59-2807055	501(C)(3)	7,000.	0.			TO SUPPORT THE ARTS
VANGUARD CHARITABLE PO BOX 9509 WARWICK, RI 02889	23-2888152	501(C)(3)	1,616,262.	0.			TO SUPPORT PHILANTHROPY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WALKING MOUNTAINS PO BOX 9469, 318 WALKING MOUNTAINS AVON, CO 81620	84-1436731	501(C)(3)	10,000.	0.			TO SUPPORT ENVIRONMENTAL EDUCATION
WAYNE STATE UNIVERSITY DEVELOPMENT OFFICE DETROIT, MI 48202	38-6028429	501(C)(3)	231,056.	0.			TO SUPPORT EDUCATION
WILSHIRE BOULEVARD TEMPLE 3663 WILSHIRE BLVD LOS ANGELES, CA 90010	95-1691339	501(C)(3)	35,000.	0.			TO SUPPORT JUDAISM
WOMANS NETWORK FOR SINGLE PARENTS INC - 1764 49TH ST - BROOKLYN, NY 11204	20-5555166	501(C)(3)	25,000.	0.			TO SUPPORT SINGLE PARENTS
WORKSHOPS FOR WARRIORS 2970 MAIN STREET SAN DIEGO, CA 92113	26-1721255	501(C)(3)	20,000.	0.			TO SUPPORT JOB TRAINING
YAD EZRA 2850 W. ELEVEN MILE RD BERKLEY, MI 48072	38-2904733	501(C)(3)	223,846.	0.			TO FEED THE HUNGRY
YESHIVA BETH YEHUDAH 15751 W. LINCOLN SOUTHFIELD, MI 48076	38-1437939	501(C)(3)	853,263.	0.			TO SUPPORT JEWISH EDUCATION
YESHIVA GEDOLAH 24600 GREENFIELD RD OAK PARK, MI 48237	38-2569760	501(C)(3)	57,994.	0.			TO SUPPORT JUDAISM
YESHIVAS DARCHEI TORAH 21550 W TWELVE MILE RD SOUTHFIELD, MI 48076	38-2842622	501(C)(3)	290,552.	0.			TO SUPPORT JEWISH EDUCATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YESHIVAT MAHARAT INC 3700 HENRY HUDSON PKWY BRONX, NY 10463	01-0954142	501(C)(3)	10,000.	0.			TO SUPPORT JEWISH EDUCATION
YOUNG ISRAEL OF SOUTHFIELD 27705 LAHSER SOUTHFIELD, MI 48034	38-2267079	501(C)(3)	51,195.	0.			TO SUPPORT JUDAISM
YOUNG MENS CHRISTIAN ASSOCIATION OF NORTHERN MIDDLESEX COUNTY, INC - 99 UNION STREET - MIDDLETOWN, CT 06457	06-0646981	501(C)(3)	15,000.	0.			TO SUPPORT THE YOUNG COMMUNITY
YOUTH RENEWAL FUND 1460 BROADWAY NEW YORK, NY 10036	13-3641489	501(C)(3)	15,500.	0.			TO SUPPORT EDUCATION
YOUTHPower365 PO BOX 6551 AVON, CO 81621	84-1442909	501(C)(3)	7,500.	0.			TO SUPPORT CHILDREN
ZICHRON TZVI ELIMELECH 75-04 169TH ST FRESH MEADOWS, NY 11366	11-3603463	501(C)(3)	10,000.	0.			TO SUPPORT THE NEEDY
ZIONIST ORGANIZATION OF AMERICA 24545 SOUTHFIELD ROAD SOUTHFIELD, MI 48075	13-5628475	501(C)(3)	11,500.	0.			TO SUPPORT JUDIASM

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 noncash assistance

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

PART I, LINE 2:

TO MONITOR OUR CONSTITUENT AGENCIES, WE RECEIVE ANNUAL BUDGET PROPOSALS AND PERIODIC PROGRAM AND BUDGET REPORTS.

SCHEDULE J
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number

38-1360585

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

- b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment?
- b Participate in or receive payment from a supplemental nonqualified retirement plan?
- c Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a The organization?
- b Any related organization?
- 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 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 Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) STEVEN INGBER	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF EXECUTIVE OFFICER	(ii)	450,801.	50,000.	1,020.	13,200.	3,354.	518,375.	0.
(2) DOROTHY BENYAS	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF FINANCIAL OFFICER	(ii)	263,690.	7,500.	7,086.	10,675.	17,406.	306,357.	0.
(3) THEODORE COHEN	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF MARKETING OFFICER	(ii)	233,557.	7,500.	2,140.	9,498.	20,454.	273,149.	0.
(4) MARGO PERNICK	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR OF THE JEWISH FUND	(ii)	237,838.	0.	6,432.	9,211.	17,468.	270,949.	0.
(5) STACEY DEWEESE	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR OF JEWISH COM. ENDOWMENT -	(ii)	206,952.	4,000.	5,511.	6,964.	9,908.	233,335.	0.
(6) SUSAN FELDMAN	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR OF PHILANTHROPIC & CORPORAT	(ii)	192,739.	6,000.	8,281.	7,742.	17,970.	232,732.	0.
(7) DANIEL GREENBERG	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR OF MAJOR GIFTS	(ii)	177,793.	4,000.	7,536.	7,278.	16,954.	213,561.	0.
(8) CHARLENE ARM	(i)	0.	0.	0.	0.	0.	0.	0.
SENIOR DIRECTOR, TALENT & ORG. - PAR	(ii)	179,569.	5,500.	4,679.	7,403.	9,917.	207,068.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

This image shows a full page of blank, lined paper. It features approximately 30 evenly spaced horizontal blue or grey lines across its entire width. The lines are uniform in thickness and spacing, providing a template for writing. There are no margins, text, or other markings on the page.

Supplemental Information on Tax-Exempt Bonds
Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,
explanations, and any additional information in Part VI.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number
38-1360585

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A MICHIGAN STRATEGIC FUND	52-1417332	NONE	08/10/07	2,146,887.	SEE PART V		X		X		X
B											
C											
D											

Part II Proceeds

	A		B		C		D	
1 Amount of bonds retired	2,146,887.							
2 Amount of bonds legally defeased								
3 Total proceeds of issue	2,146,887.							
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds								
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds	2,146,887.							
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion								
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X						
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16 Has the final allocation of proceeds been made?	X							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

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

Schedule K (Form 990) (Rev. 12-2024)

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ...								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government00 %		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government00 %		%		%		%
6 Total of lines 4 and 500 %		%		%		%
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?	X							
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X						

SCHEDULE L

(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number

38-1360585

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

Part II Loans to and/or From Interested Persons

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

Total \$

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990) (Rev. 12-2024)

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) MICHAEL BERGER	PRESIDENT	2,240,910.	FAMILY BUSI		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Provide additional information for responses to questions on Schedule L. See instructions.

(D) DESCRIPTION OF TRANSACTION: FAMILY BUSINESS PROVIDES CONSTRUCTION SERVICES TO UNITED JEWISH FOUNDATION
--

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

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

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number

38-1360585

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	529	25,420,050.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (.....)				
26 Other (.....)				
27 Other (.....)				
28 Other (.....)				

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

29

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it
must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

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

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

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

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

Yes No

30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2024

Part II

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

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number

38-1360585

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOUNDATION IS COMMITTED TO PRESERVING AND GROWING THE ASSETS TO MEET
THE COMMUNITY'S LONG TERM NEEDS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CONTINUITY OF THE JEWISH PEOPLE.

FORM 990, PART VI, SECTION A, LINE 2:

THE FOLLOWING BOARD MEMBERS HAVE FAMILY RELATIONSHIPS:

ALAN KAUFMAN AND JODIE KAUFMAN DAVIS

THE FOLLOWING BOARD MEMBERS HAVE BUSINESS RELATIONSHIPS:

MICHAEL MADDIN AND MARK HAUSER

FORM 990, PART VI, SECTION A, LINE 3:

THE ORGANIZATION DELEGATED MANAGEMENT DUTIES TO THE JEWISH FEDERATION OF
METROPOLITAN DETROIT.

FORM 990, PART VI, SECTION A, LINE 6:

THE CORPORATION IS ORGANIZED ON A NONSTOCK, MEMBERSHIP BASIS.

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

UNITED JEWISH FOUNDATION HAS MEMBERS WHO MAY VOTE ON MEMBERS OF THE
GOVERNING BODY.

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

THE AUDIT COMMITTEE HAS THE AUTHORITY TO APPROVE THE FORM 990 ON BEHALF OF
THE BOARD OF DIRECTORS. THE FORM 990 IS REVIEWED INTERNALLY BY THE FINANCE
DIRECTOR AND CHIEF FINANCIAL OFFICER. THE PUBLIC DISCLOSURE COPY IS THEN
REVIEWED AND APPROVED BY THE AUDIT COMMITTEE. FOLLOWING AUDIT COMMITTEE
APPROVAL, THE FORM 990 IS MADE AVAILABLE TO THE BOARD OF THE UNITED JEWISH
FOUNDATION OF DETROIT, PRIOR TO IT BEING FILED.

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

ON AN ANNUAL BASIS, BOARD MEMBERS OF UNITED JEWISH FOUNDATION DISCLOSE IN
WRITING ANY POTENTIAL CONFLICTS OF INTEREST. THIS DOCUMENTATION IS
MAINTAINED ON FILE. AT THE TIME OF VOTING ON GRANT APPROVALS, BOARD MEMBERS
ARE ASKED TO CITE CONFLICTS OF INTEREST, IF ANY EXIST, AND ABSTAIN FROM
INDIVIDUAL VOTES. THIS PROCESS IS REPORTED IN THE BOARD MEETING MINUTES.

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

A COMPENSATION COMMITTEE DETERMINES COMPENSATION BASED ON ESTABLISHED GOALS
AND OBJECTIVES. THE COMMITTEE WILL ALSO CONSIDER COMPARABLE SALARY DATA
FROM OTHER JEWISH FEDERATIONS OR NON-PROFIT ORGANIZATIONS. THIS PROCESS IS
DONE ANNUALLY FOR THE CEO, CFO, CHIEF FINANCIAL RESOURCE DEVELOPMENT
OFFICER AND THE CHIEF ADMINISTRATIVE OFFICER AND LAST OCCURRED IN MAY 2025.
THE ANALYSIS AND CONCLUSIONS ARE DOCUMENTED IN THE COMMITTEE MEETING
MINUTES.

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

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

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number

38-1360585

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ALLOCATION OF JFMD FUNDRAISING & ADMINISTRATIVE EXPENSES TO

UJF 4,220,000.

INTERORGANIZATION APPROPRIATIONS 10,662,424.

NET INTERFUND TRANSFERS 1,202,000.

TOTAL TO FORM 990, PART XI, LINE 9 16,084,424.

FORM 990, PART XII, LINE 2C:

UNITED JEWISH FOUNDATION HAS AN AUDIT COMMITTEE THAT ASSUMES
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF AN
INDEPENDENT ACCOUNTING FIRM. THIS PROCESS HAS NOT CHANGED FROM THE
PRIOR YEAR.

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service**Related Organizations and Unrelated Partnerships**
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

UNITED JEWISH FOUNDATION

Employer identification number
38-1360585**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
JEWISH FEDERATION OF DETROIT - 38-1359214 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	SUPPORTS JEWISH COMMUNITY	MICHIGAN	501(C)(3)	7	N/A		X
THE JEWISH FUND - 38-3323875 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	SUPPORTS JEWISH HEALTH CARE IN THE METRO DETROIT AREA	MICHIGAN	501(C)(3)	12, TYPE II	JEWISH FEDERATION OF DETROIT		X
APPLEBAUM FAMILY SUPPORT FOUNDATION - 38-2870708, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
BARNETT FAMILY SUPPORT FOUNDATION - 38-3548909, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X

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

Schedule R (Form 990) (Rev. 1-2025)

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
BELLE & ISIDOR EISENBERG FAMILY SUPPORT FOUNDATION - 30-0232172, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
DAVID & NADINE FARBMAN FAMILY SUPPORT FOUNDATION - 38-2805017, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
MAX M. AND MARJORIE S. FISHER SUPPORT FOUNDATION - 38-2490338, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
PHILLIP W. FISHER SUPPORT FOUNDATION - 38-2550053, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
GERSHENSON FAMILY SUPPORT FOUNDATION - 38-3423715, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
NANCY & STEPHEN GRAND SUPPORT FOUNDATION - 38-2805116, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
IRWIN AND BETHEA GREEN SUPPORT FOUNDATION - 38-2490337, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
JOHN & ROSE HERMAN SUPPORT FOUNDATION - 38-3216504, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
HERMELIN FAMILY SUPPORT FOUNDATION - 38-2574834, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
JAMIE AND DENISE JACOB FAMILY FOUNDATION - 30-0232178, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
NANCY L. AND JOSEPH M. JACOBSON FAMILY SUPPORT FOUNDATION - 30-0232149, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
SHERI & DAVID JAFFA FAMILY SUPPORT FOUNDATION - 38-2548695, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
MAXWELL AND MARJORIE JOSPEY SUPPORT FOUNDATION - 30-0232176, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
KATZMAN FAMILY SUPPORT FOUNDATION - 30-0021246, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
ALAN JAY & SUE E KAUFMAN FAMILY SUPPORT FOUNDATION - 61-1562406, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
HERBERT W. KAUFMAN FAMILY SUPPORT FOUNDATION - 38-3212494, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
ROBERT J. LEVENSON FAMILY SUPPORT FOUNDATION - 30-0232151, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
DOUG & KAISA LEVINE FAMILY SUPPORT FOUNDATION - 38-3548910, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
DONNA & MICHAEL MADDIN SUPPORT FOUNDATION - 30-0482325, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
GERALD ORAM FAMILY - 61-1562412 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
NORMAN A. & SUSAN L. PAPPAS FAMILY SUPPORT FOUNDATION - 38-2582300, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
THE JACK A. & AVIVA ROBINSON FAMILY SUPPORT FOUNDATION - 38-2993215, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
SCHOSTAK FAMILY SUPPORT FOUNDATION - 38-3212496, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
MERTON J. & BEVERLY SEGAL SUPPORT FOUNDATION - 38-2993223, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
SHAEVSKY FAMILY SUPPORT FOUNDATION - 38-3423716, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
JOEL H. & LORRAINE SHAPIRO FAMILY FOUNDATION - 38-2870707, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
JANE F. AND D. LAWRENCE SHERMAN FAMILY SUPPORT FOUNDATION - 30-0232175, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
THE SHIFFMAN FAMILY SUPPORT FOUNDATION - 38-2824407, 6736 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
ARLENE & STEVEN I. VICTOR SUPPORT FOUNDATION - 38-3548911, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
STANLEY & MARGARET WINKELMAN SUPPORT FOUNDATION - 38-6064584, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
WOODRUN FOUNDATION - 38-3316513 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
WILLIAM A. & SHIRLEY P. YOLLES SUPPORT FOUNDATION - 38-2993219, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
ZLOTOFF FAMILY SUPPORT FOUNDATION - 38-3316509, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
ZUCKERMAN FAMILY SUPPORT FOUNDATION - 30-0021251, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 12 - 38-2870706, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
LEON & JOSEPHINE WINKELMAN FOUNDATION - 36-6057189, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
FEDERATION SUPPORT FOUNDATION 2 - 38-2582289 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 3 - 38-2582297 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 4 - 38-2582299 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 6 - 38-2805115 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 9 - 38-2824404 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 11 - 38-2824409, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 21 - 38-3316506, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 24 - 38-3423714, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 30 - 30-0021241, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 40 - 61-1562407, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 43 - 30-0482324, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X
FEDERATION SUPPORT FOUNDATION 44 - 38-6091304, 6735 TELEGRAPH ROAD, BLOOMFIELD HILLS, MI 48301	PROVIDES GRANTS TO OTHER ORGANIZATIONS	MICHIGAN	501(C)(3)	12, TYPE I	JEWISH FEDERATION OF DETROIT		X

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

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

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

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

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

[illegible]

Part VII	Supplemental Information
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Provide additional information for responses to questions on Schedule R. See instructions.