Form <b>990</b>
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# Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service 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.



Α	For th	he 2018 calendar year, or tax year beginning $ m JUL1,2018$ and en	ding J	UN 30, 2019	
В	Check if applicat	De: C Name of organization		D Employer identific	ation number
	Addr chan	ge THE MILWAUKEE JEWISH FEDERATION, INC.			
	Nam	ge Doing business as		39-08	806312
	Initia	Number and street (or P.O. box if mail is not delivered to street address) Ro	om/suite	E Telephone number	
	Final	N I IJUU NORIII FROSFECI AVENUE		(414)	)390-5700
_	termi ated	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	117,790,651.
	Amer	MILWAUKEE, WI 55202		H(a) Is this a group re	
	Appli tion pend	F Name and address of principal officer: MIRIAM ROBENZWEIG		for subordinates	? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates ind	
		kempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or (insert no.) 4947(a)(1) or (insert no.) (inse	527	,	list. (see instructions)
		ite: ► WWW.MILWAUKEEJEWISH.ORG		H(c) Group exemption	,
		of organization: X Corporation Trust Association Other ►	L Year c	of formation: 1938 N	I State of legal domicile: WI
P	art I	Summary	T T.7 7 TT		
ģ	1	Briefly describe the organization's mission or most significant activities: <u>THE MI</u> INC. IS A VOLUNTARY ASSOCIATION OF INDIVIDU			
Activities & Governance					
ern	2	Check this box      if the organization discontinued its operations or disposed		1.1	ats. 30
ģ	3	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)			30
~	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		·····	54
tie	6	Total number of volunteers (estimate if necessary)			481
iži	7 2	Total unrelated business revenue from Part VIII, column (C), line 12			260,520.
Ā		Net unrelated business taxable income from Form 990-T, line 38			6,289.
				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		15,319,132.	18,784,088.
Revenue	9	Program service revenue (Part VIII, line 2g)		2,345,103.	2,383,935.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5,060,879.	4,798,337.
ά	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		81,245.	88,583.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		22,806,359.	26,054,943.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		13,860,379.	14,824,052.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
U,	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,132,946.	4,167,087.
Exnenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	40,340.
ğ	b	• Total fundraising expenses (Part IX, column (D), line 25) • 1,769,509		0 072 660	0.000.000
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8,973,660.	8,062,692.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		26,966,985.	27,094,171.
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12		-4,160,626.	-1,039,228.
ts or			2	jinning of Current Year 30 , 274 , 273 .	End of Year 229,743,415.
Assets	<b>20</b>	Total assets (Part X, line 16)		<u>30,274,273</u> 95,942,925.	94,959,805.
let A	2'	· · · · · · · · · · · · · · · · · · ·		34,331,348.	134,783,610.
	<u>  22</u> art II	Net assets or fund balances. Subtract line 21 from line 20		J=,JJ1,J40•	IJI, 100,010.

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	Signature of officer	Date
Here	MIRYAM ROSENZWEIG, PRESIDENT &	CEO
	Type or print name and title	
	Print/Type preparer's name Preparer's signa	ture Date Check DTIN
Paid	BRITTANY MERGEN BRITTANY	MERGEN 03/24/20 self-employed P01656288
Preparer	Firm's name 🕒 WIPFLI LLP	Firm's EIN ► 39-0758449
Use Only	Firm's address PO BOX 8700	
	MADISON, WI 53708-8700	Phone no. 608. 274. 1980
May the I	RS discuss this return with the preparer shown above? (see instruc	tions) X Yes No
832001 12-3	1-18 LHA For Paperwork Reduction Act Notice, see the sepa	Form <b>990</b> (2018)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Par	990 (2018) THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission:
	THROUGH THE DEVELOPMENT OF COMMUNITY-WIDE FINANCIAL SUPPORT, PLANNING
	AND ALLOCATIONS, THE MISSION OF THE MILWAUKEE JEWISH FEDERATION IS TO
	ENSURE THE CONTINUITY OF THE JEWISH PEOPLE, TO ENHANCE THE QUALITY OF
	JEWISH LIFE AND TO BUILD A STRONG, UNIFIED JEWISH COMMUNITY IN
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
	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.
	(Code:) (Expenses \$678, 168. including grants of \$0.) (Revenue \$0.
	THE JEWISH MUSEUM MILWAUKEE IS DEDICATED TO PRESERVING AND PRESENTING
	THE HISTORY OF THE JEWISH PEOPLE IN SOUTHEASTERN WISCONSIN AND
	CELEBRATING THE CONTINUUM OF JEWISH HERITAGE AND CULTURE. THE HISTORY
	OF AMERICAN JEWS IS ROOTED IN THOUSANDS OF YEARS OF SEARCHING FOR
	FREEDOM AND EQUALITY. WE ARE COMMITTED TO SHARING THIS STORY AND THE
	LIFE LESSONS IT BRINGS WITH IT, SO THAT WE MAY ENHANCE THE PUBLIC'S
	AWARENESS AND APPRECIATION OF JEWISH LIFE AND CULTURE.
4b	(Code:) (Expenses \$ 460,971. including grants of \$ 0. (Revenue \$ 0.
	THE NATHAN AND ESTHER PELZ HOLOCAUST EDUCATION RESOURCE CENTER (HERC)
	IN MILWAUKEE, WISCONSIN IS DEDICATED TO HOLOCAUST REMEMBRANCE,
	EDUCATION, AND THE PRESERVATION OF THE MEMORY OF ITS VICTIMS. BY
	TEACHING ABOUT THE HOLOCAUST, THE HOLOCAUST EDUCATION RESOURCE CENTER
	AIMS TO PROMOTE AWARENESS OF THE EVILS OF HATRED AND PREJUDICE AND TO
	INSPIRE ETHICAL BEHAVIOR. HERC TAUGHT THE LESSONS OF THE HOLOCAUST TO
	28,064 STUDENTS, TEACHERS AND COMMUNITY MEMBERS THROUGHOUT WISCONSIN
	LAST YEAR.
10	
4c	
4c	THE MISSION OF "THE CHRONICLE" IS TO PROVIDE NEWS OF A LOCAL, NATIONAL
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4d	THE MISSION OF "THE CHRONICLE" IS TO PROVIDE NEWS OF A LOCAL, NATIONAL AND INTERNATIONAL CHARACTER SO AS TO FOSTER A SENSE OF COMMUNITY WITHIN THE JEWISH POPULATION OF WISCONSIN, PROVIDE INFORMATION AND INTERPRETATION CONCERNING JEWISH LIFE THAT IS NOT AVAILABLE THROUGH LOCAL AND NATIONAL MEDIA, CREATE A FORUM FOR HEARING THOSE ISSUES OF A LOCAL, NATIONAL AND INTERNATIONAL NATURE THAT ARE IMPORTANT TO JEWS, AND TO SUPPORT THE PUBLISHER. THE MILWAUKEE JEWISH FEDERATION IN ITS COMMUNITY-BUILDING GOAL OF PROMOTING AWARENESS OF AND SUPPORT FOR THE VALUE OF JEWISH COMMUNITY, SERVES AS A COMMUNICATIONS VEHICLE THROUGH WHICH LOCAL ORGANIZATIONS, AGENCIES AND SYNAGOGUES CAN REPORT TO THEIR CONSTITUENCIES AND TO THE JEWISH COMMUNITY IN GENERAL AND THROUGH WHICH THEY CAN PUBLICIZE THEIR ACTIVITIES, RECORD COMMUNITY EVENTS AND LIFE Other program services (Describe in Schedule O.) (Expenses 22,617,147. including grants of 14,824,052.) (Revenue \$ 2,139,667.) Total program service expenses 24,075,403.
4d 4e	THE MISSION OF "THE CHRONICLE" IS TO PROVIDE NEWS OF A LOCAL, NATIONAL AND INTERNATIONAL CHARACTER SO AS TO FOSTER A SENSE OF COMMUNITY WITHIN THE JEWISH POPULATION OF WISCONSIN, PROVIDE INFORMATION AND INTERPRETATION CONCERNING JEWISH LIFE THAT IS NOT AVAILABLE THROUGH LOCAL AND NATIONAL MEDIA, CREATE A FORUM FOR HEARING THOSE ISSUES OF A LOCAL, NATIONAL AND INTERNATIONAL NATURE THAT ARE IMPORTANT TO JEWS, AND TO SUPPORT THE PUBLISHER. THE MILWAUKEE JEWISH FEDERATION IN ITS COMMUNITY-BUILDING GOAL OF PROMOTING AWARENESS OF AND SUPPORT FOR THE VALUE OF JEWISH COMMUNITY, SERVES AS A COMMUNICATIONS VEHICLE THROUGH WHICH LOCAL ORGANIZATIONS, AGENCIES AND SYNAGOGUES CAN REPORT TO THEIR CONSTITUENCIES AND TO THE JEWISH COMMUNITY IN GENERAL AND THROUGH WHICH THEY CAN PUBLICIZE THEIR ACTIVITIES, RECORD COMMUNITY EVENTS AND LIFE Other program services (Describe in Schedule O.) (Expenses 22,617,147. including grants of 14,824,052.) (Revenue \$ 2,139,667.)

Form 990 (20			JEWISH	FEDERATION,	INC.
Part IV	Checklist of Require	d Schedules			

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	X	<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		77	
	endowments, or 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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a		
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446	х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		х
d	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u></u>
a	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	11d		х
•	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	х	- 23
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		- 11	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
120	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
.e 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	
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Form 990 (2					FEDERATION,	INC
Part IV	Checklist of	Require	d Schedules <sub>(co</sub>	ontinued)		

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
	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? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.51		v
~~	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If</i> "Yes,"	26		x
27	complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		- 23
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		37	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			<b>v</b>
07	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		x
38	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		
30		38	х	
Par		00		L
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 81			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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#### 14350324 147695 115515

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Form 990 (2018)			FEDERATION,	
Part V Statements F	Regarding Other IF	IS 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	54			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns? .		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
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 in Schedule	0		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accoui	t)?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	ts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		r	5b		X
	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			6-		х
<b>h</b>	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>		
D	If "Yes," did the organization include with every solicitation an express statement that such contributi			6h		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices	provided to the payor?	7a	x	
				7b	x	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
-	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontrac	t?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fi	le a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	e			
	sponsoring organization have excess business holdings at any time during the year?			8		X
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		<u>X</u>
				9b		X
10	Section 501(c)(7) organizations. Enter:	1	1			
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	L			
11	Section 501(c)(12) organizations. Enter:	1440	1			
	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	<u>11a</u>				
5	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		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		•			
			[	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the		, I			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t incoi	ne?	16		X
	If "Yes," complete Form 4720, Schedule O.					

Form **990** (2018)

832005 12-31-18

Form 990	(2018)
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#### THE MILWAUKEE JEWISH FEDERATION, INC.

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

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 in Schedule O. See instructions. X

						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		30			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		nv other				
	officer, director, trustee, or key employee?				2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the			1			
•	of officers, directors, or 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 99			1	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asse				5		X
6	Did the organization become aware during the year of a significant diversion of the organization s asso Did the organization have members or stockholders?				6	х	- 23
	Did the organization have members, stockholders, or other persons who had the power to elect or ap				0	- 23	
/a					7-	х	
	more members of the governing body?				7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto						
_	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-			37	
	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	/enue	Code.)				
				,		Yes	
0a	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 cha	apters	affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the fo	orm?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If " $\gamma$						
-	in Schedule O how this was done	,			12c	х	
13	Did the organization have a written whistleblower policy?				13	X	
14	Did the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and approval				17		
15		by inc	lependent				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				45	Х	
	The organization's CEO, Executive Director, or top management official			1	15a		
a	Other officers or key employees of the organization				15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem						v
	taxable entity during the year?				16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		-				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi	zation	'S				
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ WI						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	d 990-	Г (Section 5	01(c)(3)s	only) a	availab	ole
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website Another's website X Upon request Other (explain	in Sch	edule O)				
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con			icy, and f	inanc	ial	
	statements available to the public during the tax year.		·	-			
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	records	•			
	THOMAS OECHLER - (414) 390-5700						
	1360 NORTH PROSPECT AVENUE, MILWAUKEE, WI 53202						

Form 990 (2		
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Higl	lest Compensated
·	Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	5
1a Comple	e this table for all persons required to be listed. Report compensation for the calendar yea	r ending with or within the organization's tax year.

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received report-able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)			(0	C)			d any current officer, di (D)	(E)	(F)
Name and Title	Average hours per week	box	not c , unle:	ss per	more rson i	than o s both r/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SUSAN ANGEL MILLER	0.30							0	0	0
DIRECTOR	0.20	Х						0.	0.	0.
(2) BRENT ARNOLD DIRECTOR	0.30	x						0.	0.	0.
(3) DANIEL BADER	0.30	^						0.	0.	0.
DIRECTOR (THRU 8/18)	0.30	x						0.	0.	0.
(4) MARK BRICKMAN	0.30									
DIRECTOR (THRU 8/18)		х						0.	0.	0.
(5) ALLAN CARNEOL	0.30									
DIRECTOR		х						0.	0.	0.
(6) STEPHEN CHERNOF	0.30									
DIRECTOR (THRU 8/18)		Х						0.	Ο.	0.
(7) DAVID M. COHN	0.30									
DIRECTOR		Х						0.	0.	0.
(8) JUDITH CORAN	0.30									
DIRECTOR		Х						0.	0.	0.
(9) MARK GOLDSTEIN	0.30									
DIRECTOR (THRU 8/18)		х						0.	0.	0.
(10) EILEEN GRAVES	0.30								0	0
DIRECTOR	0.20	Х						0.	0.	0.
(11) BETSY GREEN	0.30							0.	0	0
DIRECTOR (THRU 8/18) (12) KURT JANAVITZ	0.30	Х						0.	0.	0.
DIRECTOR	0.30	x						0.	0.	0.
(13) MARLENE LAUWASSER	0.30							0.	0.	0.
DIRECTOR (THRU 8/18)	0.50	x						0.	0.	0.
(14) JOAN LUBAR	0.30									
DIRECTOR		x						0.	0.	0.
(15) DANA MARGOLIS	0.30									
DIRECTOR		х						0.	0.	0.
(16) TODD MILLER	0.30	1								
DIRECTOR		Х						0.	0.	0.
(17) CHERYL MOSER	0.30									
DIRECTOR		Х						0.	0.	0.

832007 12-31-18

Form 990 (2018)

#### 14350324 147695 115515

2018.05070 THE MILWAUKEE JEWISH FEDE 115515\_1

Form 990 (2018) THE MILLWA								,	39-00	506	<u>3 I Z</u>	Р	age <b>o</b>
Part VII Section A. Officers, Directors, Trust	tees, Key Emp	ploy	ees,	anc	l Hig	ghes	st C	ompensated Employee	s (continued)				
(A) Name and title	<b>(B)</b> Average hours per week	box	not c	Pos heck i ss per nd a di	more rson i	than o s both	n an	(D) Reportable compensation from	<b>(E)</b> Reportable compensatio from related	n		(F) stimate nount other	of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	s	fr org an	pensa om th anizat d relat anizati	ation le tion ted
(18) MITCHELL MOSER DIRECTOR	0.30	x			-			0.		0.			0.
(19) FRANCES RICHMAN DIRECTOR	0.30	x						0.		0.			0.
(20) MICHAEL ROSENBERG DIRECTOR	0.30	x						0.		0.			0.
(21) YONINA SCHLUSSEL DIRECTOR	0.30	x						0.		0.			0.
(22) ANDREA SCHNEIDER DIRECTOR	0.30	x						0.		0.			0.
(23) SUSAN SOLVANG DIRECTOR	0.30	x						0.		0.			0.
(24) CARYN STEINBERGER DIRECTOR	0.30	x						0.		0.			0.
(25) DAVID WERNER DIRECTOR	0.30	x						0.		0.			0.
(26) MOSHE KATZ CHAIR	2.00	x		x				0.		0.			0.
1b Sub-total c Total from continuation sheets to Part VII	•							0. 879,942.		0.	8	0.6	0. 77.
d Total (add lines 1b and 1c)								879,942.		0.			77.
2 Total number of individuals (including but ne compensation from the organization ▶							o re	eceived more than \$100,	000 of reportable	9			5
												Yes	No
3 Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for su				•	•	•		•			3		X
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	le co	mpe	ensa	tion	and	oth	ner compensation from t	he organization		4	х	
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." <i>com</i>	ccrue comper	nsati	on fr	rom	any	unre	elate	ed organization or individ	dual for services		5		x
Section B. Independent Contractors													
1 Complete this table for your five highest con the organization. Report compensation for t										pensat	tion fro	om	
(A) Name and business								(B) Description of s	ervices	С	<b>)</b> ompe		n
TOTAL CLEANING SYSTEMS, 1 ROAD, MILWAUKEE, WI 53224		ST	B	RA.	DL	EY		CLEANING SER	VICES		14	7,3	20.
MERESS & ASSOCIATES, LLC P.O. BOX 111, GERMANTOWN,								SECURITY SER	VICES		13	6,0	69.
BRET ACHTENHAGEN'S SEASON S8510 COUNTY ROAD E, MUKW				-		36		LANDSCAPING	SERVICES		13	1,6	86.
2 Total number of independent contractors (ir		ot lir	nited	d to t	thos	se lis	ted	above) who received m	ore than				

\$100,000 of compensation from the organization ► 3 SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2018)

832008 12-31-18

Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yees	s, ar	nd H	lighe	est (	Compensated Employe	es (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per	Position (check all that apply)					y)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(27) BARBARA GLAZER	1.00									
VICE-CHAIR		Х		Х				0.	0.	0
(28) PNINA GOLDFARB VICE-CHAIR	1.00	x		x				0.	0.	0
(29) SARA HERMANOFF	1.00									
VICE-CHAIR		х		х				0.	0.	0
(30) LISA HILLER	1.00								<b>, ,</b>	
VICE-CHAIR		x		х				0.	0.	0
(31) ANN JACOBS	1.00									
VICE-CHAIR		х		х				0.	Ο.	0
(32) GREG MARCUS	1.00									
VICE-CHAIR		Х		Х				0.	0.	0
(33) SHARYL PALEY	1.00									
VICE-CHAIR		Х		X				0.	0.	0
(34) LAURI ROTH	1.00									
VICE-CHAIR	1 0 0	Х		Х				0.	0.	0
(35) MARCI TAXMAN	1.00							0	0	0
SECRETARY (THRU 8/18)	1 00	Х		X				0.	0.	0
(36) NANCY BARNETT SECRETARY (BEG. 8/18)	1.00	x		x				0.	0.	0
(37) ESTHER ANCEL	1.00	^		^				0.	0.	0
TREASURER	1.00	x		х				0.	0.	0
(38) HANNAH ROSENTHAL	38.00			<u></u>				0.	0.	0
PRESIDENT & CEO (THRU 12/18)	2.00			х				302,665.	0.	29,863
(39) MIRYAM ROSENZWEIG	38.00							502,005.	••	25,005
PRESIDENT & CEO (BEG. 3/19)				х				0.	Ο.	0
(40) THOMAS LINDOW	38.00									
CFO/COO (THRU 5/19)		1		х				162,315.	Ο.	7,518
(41) CAREN GOLDBERG	38.00									
EXECUTIVE DIRECTOR				х				170,693.	0.	26,126
(42) STEPHANIE WAGNER	38.00									
VP OF STRATEGIC INITIATIVE						Х		141,749.	0.	13,069
(43) HANNAH WALLICK	38.00									
VP OF OUTREACH ISRAEL & OVERSEAS						Х		102,520.	0.	4,101
Total to Part VII, Section A, line 1c								879,942.		80,677

832201 04-01-18

Bit Monte         Description         Description <thdescription< th=""> <thdescription< th="">         &lt;</thdescription<></thdescription<>					JEWISH 3	FEDERATION,	INC.	39-0806	312 Page <b>9</b>
Image: Second	Pa	rt VII	Statement of Rever	nue					
Total revenue         Total revenue         Relatid or control functional unside the second functional unside the second functional treatment or revenue         Prevenue state or second functional treatment or revenue         Prevenue state or second functional treatment or revenue         Prevenue state or second functional treatment or second functional treatmen			Check if Schedule O cont	ains a response	or note to any lir				
are definition         is         200, 600, 100           b         Monthership dues         is         200, 600, 100           c         Fundhaling events         is         200, 600, 110           d         All the contributions, gits, gents, and is         is         200, 600, 110           d         Hotald Add lines 11:1         20, 600, 110         is           b         Mission contributions, gits, gents, and is         18, 784, 088, 100         is           d         Mission contributions, gits, gents, and is         18, 424, 684, 266, 100         is           d         Mission contributions, gits, gents, and is         1110         244, 268, 233, 235, 100         is           d         Mission contributions gents, gents, and is         3, 407, 986, 316, 252, 3, 3, 391, 650, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 100, 252, 10						I '' I	Related or exempt function	Unrelated business	Revenuè excluded from tax under
Bit Membership dues         10           0         Periodic organizations         10           0         Generation due	ts t	1 a	Federated campaigns	1a	208,600.				
Business Code         Subject	ran Dun								
Business Code         Subject	۳ و م				130,125.				
Business Code         Subject	ar /								
Business Code         Dusiness Code         Dusinesc Code         Dusiness Code         Dusiness	s, S	е	Government grants (contribut	ions) <b>1e</b>	20,679.				
Business Code         Dusiness Code         Dusinesc Code         Dusiness Code         Dusiness	rsi	f	All other contributions, gifts, gran	its, and					
Business Code         Dusiness Code         Dusinesc Code         Dusiness Code         Dusiness	the		similar amounts not included abo	ve 1f	18,424,684.				
Business Code         Dusiness Code         Dusinesc Code         Dusiness Code         Dusiness	duti	g	Noncash contributions included in lines	1a-1f: \$	3,841,236.				
OPDOT         2 a         RENT FROM EXEMPT BUILDING         532000         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,144,268.         1         2,139,667.         2,144,268.         1         2,139,667.         2,144,268.         1         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         2,139,667.         1,139,243.         1,16,252.         3,13,91,652.         1,16,252.         3,13,91,652.         1,16,252.         3,23,91,652.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,139,431.         1,13	a S	h	Total. Add lines 1a-1f		🕨	18,784,088.			
Bits/EFAPER ADVERTISING REVENUE         51110         244,268         244,268           c					Business Code				
g Total. Add lines 2a21       2,383,935.         3       Investment income (including dividends, interest, and other similar amounts)       3,407,906.       16,252.       3,391,654         4       income from investment of tax exempt bond proceeds        3       16,252.       3,391,654         5       Royaties       (i) Real       (ii) Personal       3,407,906.       16,252.       3,391,654         6       Gross rents       (iii) Real       (iii) Personal       3       4       16,252.       3,391,654         6       a Gross rents       (iii) Real       (iii) Personal       3       4       16,252.       3,391,654         7       a Gross amount from sales of tax exempt bond proceeds       (iiii) Personal       16,252.       4       16,252.       16,252.       17,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.       12,390,431.	e	2 a	RENT FROM EXEMPT BUILD	ING	532000	2,139,667.	2,139,667.		
g Total. Add lines 22:1       2,383,935.         3       Investment income (including dividends, interest, and other similar amounts)       3,407,906.       16,252.       3,391,654         4       Income from investment of tax exempt bond proceeds        3       16,252.       3,391,654         5       Royaties       (i) Real       (ii) Personal       3,407,906.       16,252.       3,391,654         6       Gross rents       (iii) Personal       (iii) Personal       1       3,407,906.       16,252.       3,391,654         7       a Gross rents       (iii) Personal       (iiii) Personal       1       1       1       1       1         7       a Gross amount from sales of the tax inventory is and sales expenses       (iii) Other       33,043,867.       1       390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.	e ri	b	NEWSPAPER ADVERTISING	REVENUE	511110	244,268.		244,268.	
g Total. Add lines 22:1       2,383,935.         3       Investment income (including dividends, interest, and other similar amounts)       3,407,906.       16,252.       3,391,654         4       Income from investment of tax exempt bond proceeds        3       16,252.       3,391,654         5       Royaties       (i) Real       (ii) Personal       3,407,906.       16,252.       3,391,654         6       Gross rents       (iii) Personal       (iii) Personal       1       3,407,906.       16,252.       3,391,654         7       a Gross rents       (iii) Personal       (iiii) Personal       1       1       1       1       1         7       a Gross amount from sales of the tax inventory is and sales expenses       (iii) Other       33,043,867.       1       390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.	Se	с							
g Total. Add lines 22:1       2,383,935.         3       Investment income (including dividends, interest, and other similar amounts)       3,407,906.       16,252.       3,391,654         4       Income from investment of tax exempt bond proceeds        3       16,252.       3,391,654         5       Royaties       (i) Real       (ii) Personal       3,407,906.       16,252.       3,391,654         6       Gross rents       (iii) Personal       (iii) Personal       1       3,407,906.       16,252.       3,391,654         7       a Gross rents       (iii) Personal       (iiii) Personal       1       1       1       1       1         7       a Gross amount from sales of the tax inventory is and sales expenses       (iii) Other       33,043,867.       1       390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.	eve eve	d							
g Total. Add lines 22:1       2,383,935.         3       Investment income (including dividends, interest, and other similar amounts)       3,407,906.       16,252.       3,391,654         4       Income from investment of tax exempt bond proceeds        3       16,252.       3,391,654         5       Royaties       (i) Real       (ii) Personal       3,407,906.       16,252.       3,391,654         6       Gross rents       (iii) Personal       (iii) Personal       1       3,407,906.       16,252.       3,391,654         7       a Gross rents       (iii) Personal       (iiii) Personal       1       1       1       1       1         7       a Gross amount from sales of the tax inventory is and sales expenses       (iii) Other       33,043,867.       1       390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.       1,390,431.	ogr	е							
3       Investment income (including dividends, interest, and other similar amounts)       3,407,906.       16,252.       3,391,654         4       Income from investment of tax exempt bond proceeds        3       16,252.       3,391,654         5       Royaties       (i) Real       (ii) Personal        16,252.       3,391,654         6 a Gross rents       (ii) Real       (iii) Personal             6 a Gross rents       (ii) Securities       (iii) Other              7 a Gross amount from sales of and sales expenses       (ii) Securities       (iii) Other              8 a Gross income from fundraising events (not including \$	P	f	All other program service reve	enue					
3       Investment income (including dividends, interest, and other similar amounts)       3,407,906.       16,252.       3,391,654         4       Income from investment of tax exempt bond proceeds              6 a       Gross rents       (i) Real       (ii) Personal             6 a       Gross rents       (ii) Real       (ii) Personal             7 a       Gross amount from sales of assets other than inventory       (ii) Securities       (iii) Other <t< td=""><th></th><th>g</th><td>Total. Add lines 2a-2f</td><td></td><td> ►</td><td>2,383,935.</td><td></td><td></td><td></td></t<>		g	Total. Add lines 2a-2f		►	2,383,935.			
other similar amounts)       >       3,407,906.       16,252.       3,391,654         4       income from investment of tax-exempt bond proceeds       >            5       Royaties       (i) Personal       >            6 a Gross rents       (ii) Personal       (iii) Personal       >            7       a Gross amount from sales of assets other than inventory       (iii) Securities       (ii) Other             8       a Gross amount from sales of assets other than inventory       93,043,867. </td <th></th> <th></th> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
4       income from investment of tax exempt bond proceeds       Image: Comparison of the			other similar amounts)		►	3,407,906.		16,252.	3,391,654.
6 a Gross rents       (i) Real       (ii) Personal         b Less: rental income or (loss)       (iii) Personal         c Rental income or (loss)       (iii) Securities         d Net rental income or (loss)       (iii) Securities         a Gross amount from sales of assets other than inventory       (iii) Securities         b Less: cost or other basis and sales expenses       (ii) (J) Securities         a Gross income from fundraising events (not including \$13,1,25, of contributions reported on line 1c). See Part IV, line 18       1,390,431.         b Less: circet expenses       (ii) 22,5, of contributions reported on line 1c). See Part IV, line 18       (iii) 32,250.         b Less: circet expenses       (iii) 32,25. of contributions reported on line 1c). See Part IV, line 18       (iiii) 32,250.         a Gross income from gaming activities. See Part IV, line 19       (iii) 42,272.       -49,772.         b Less: circet expenses       (iii) 525.       (iii) 525.         i O a Gross sales of inventory, less returns and allowances       (iii) 525.       (iii) 525.         i D a Gross income or (loss) from sales of inventory       (iii) 525.       (iii) 525.         i D a Gross alse of inventory.       (iii) 525.       (iii) 525.         i D a Gross alse of inventory.       (iii) 525.       (iii) 525.         i D a Gross sales of inventory.       (iii) 525.		4							
6 a Gross rents		5	Royalties	<u></u>	🕨				
b       Less: rental expenses									
c       Rental income or (loss) <ul> <li>Met rental income or (loss)</li> <li>Gross amount from sales of assets other than inventory</li> <li>93,043,857.</li> <li>Less: cost or other basis and sales expenses</li> <li>91,653,436.</li> <li>1,390,431.</li> <li>1,390,4</li></ul>		6 a	Gross rents						
d Net rental income or (loss)		b	Less: rental expenses						
d Net rental income or (loss)									
assets other than inventory       93,043,867.         b Less: cost or other basis and sales expenses       91,653,436.         c Gain or (loss)       91,653,436.         d Net gain or (loss)       1,390,431.         d Net gain or (loss)       1,390,431.         a Gross income from fundraising events (not including \$130,125. of contributions reported on line 1c). See Part IV, line 18       a         b Less: circct expenses       b         c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19       a         a b Less: circct expenses       b         c Net income or (loss) from gaming activities. See Part IV, line 19       a         a Gross sales of inventory, less returns and allowances       a         b Less: cost of goods sold       b         b Less: cost of goods sold       b         c       Miscellaneous Revenue         Business Code       10,525.         11 a       CEMETERY INCOME       900099         900099       74,908.       74,908.		d	Net rental income or (loss)						
b       Less: cost or other basis and sales expenses       91, 653, 436. 1, 390, 431.       1, 390, 431.         c       Gain or (loss)       1, 390, 431.       1, 390, 431.         d       Net gain or (loss)       1, 390, 431.       1, 390, 431.         d       Net gain or (loss)       130, 125. of contributions reported on line 1c). See Part IV, line 18       130, 125. of contributions reported on line 1c). See Part IV, line 19       32, 500.         g       Gross income from gaming activities. See Part IV, line 19       -49, 772.       -49, 772.         g       Gross income from gaming activities. See Part IV, line 19       -49, 772.       -49, 772.         b       Less: direct expenses       b       -49, 772.       -49, 772.         g       Gross income from gaming activities. See Part IV, line 19       -49, 772.       -49, 772.         g       Gross sales of inventory, less returns and allowances       10, 525.       10, 525.         tincellaneous Revenue       Business Code       -49, 72.       52, 922.         Miscellaneous Revenue       900099       52, 922.       52, 922.         d       All other revenue       900099       74, 908.       74, 906.         e       Total. Add lines 11a-11d       127, 830.       -49, 74, 906.		7 a	Gross amount from sales of	(i) Securities	(ii) Other				
and sales expenses       91, 653, 436.         c       Gain or (loss)       1, 390, 431.         d       Net gain or (loss)       1, 390, 431.         d       Sa Gross income from fundraising events (not including \$\subset 130, 125.       of         b       Less: direct expenses       b         ga Gross income from gaming activities       -49, 772.         9a Gross sales of inventory, less returns and allowances       a         and allowances       a         b       Less: cost of goods sold       b         c       Net incorne or (loss) from sales of inventory       10, 525.         Miscellaneous Revenue       900099       52, 922.         b			assets other than inventory	93,043,867.					
c       Gain or (loss)       1,390,431.       1,390,431.         d       Net gain or (loss)       1,390,431.       1,390,431.         8       Gross income from fundraising events (not including \$ 130,125, of contributions reported on line 1c). See Part IV, line 18       a       32,500.         b       Less: direct expenses       b       82,272.       -49,772.         c       Net income or (loss) from fundraising events       -49,772.       -49,772.         9       Gross sincome from gaming activities. See Part IV, line 19       a       a         b       Less: direct expenses       b       b         c       Net income or (loss) from gaming activities. See Part IV, line 19       a       -49,772.         10       Gross sales of inventory, less returns and allowances       a       10,525.       10,525.         10       Gross sales of inventory       10,525.       10,525.       10,525.         Miscellaneous Revenue       Business Code       11       2,922.       52,922.         b		b	Less: cost or other basis						
c       Gain or (loss)       1,390,431.       1,390,431.         d       Net gain or (loss)       1,390,431.       1,390,431.         8 a       Gross income from fundraising events (not including \$130,125. of contributions reported on line 1c). See Part IV, line 18       a       32,500.         b       Less: direct expenses       b       82,272.       -49,772.         c       Net income or (loss) from fundraising events       -49,772.       -49,772.         9 a       Gross income from gaming activities. See Part IV, line 19       a       a         b       Less: direct expenses       b			and sales expenses	91,653,436.					
d       Net gain or (loss)       1,390,431.       1,390,431.         8 a       Gross income from fundraising events (not including \$ 130,125. of contributions reported on line 1c). See Part IV, line 18       a       32,500.         b       Less: direct expenses       b       82,272.       -49,772.         9 a       Gross income from gaming activities. See Part IV, line 19       a       -49,772.       -49,772.         9 a       Gross sincome from gaming activities. See Part IV, line 19       a       -49,772.       -49,772.         10 a       Gross sales of inventory, less returns and allowances       a       10,525.       10,525.         b       Less: cost of goods sold       b       0.       0.       52,922.         I1 a       CEMETERY INCOME       900099       52,922.       52,922.       52,922.         b		с		1,390,431.					
8 a Gross income from fundraising events (not including \$130,125. of contributions reported on line 1c). See Part IV, line 18a 32,500.       a 32,500.         b Less: circet expensesb 82,272.       c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19a ab Less: circet expensesb description from gaming activities.       -49,772.         0 Less: circet expensesb Less: circet expensesb description from gaming activities.       ab description from gaming activities.       -49,772.         10 a Gross sales of inventory, less returns and allowancesand allowancesa description from sales of inventory with the second description of the second descriptio						1,390,431.			1,390,431.
c       Net income or (loss) from fundraising events       -49,772.       -49,772.         9 a       Gross income from gaming activities. See Part IV, line 19       a       a         b       Less: direct expenses       b       b         c       Net income or (loss) from gaming activities       b       b         10 a       Gross sales of inventory, less returns and allowances       a       10,525.       0.         b       Less: cost of goods sold       b       0.       0.       0.         c       Net income or (loss) from sales of inventory       10,525.       10,525.       10,525.         Miscellaneous Revenue       Business Code       900099       52,922.       52,922.         b	anr		Gross income from fundraisin	g events (not					
c       Net income or (loss) from fundraising events       -49,772.       -49,772.         9 a       Gross income from gaming activities. See Part IV, line 19       a       a         b       Less: direct expenses       b       b         c       Net income or (loss) from gaming activities       b       b         10 a       Gross sales of inventory, less returns and allowances       a       10,525.       0.         b       Less: cost of goods sold       b       0.       0.       0.         c       Net income or (loss) from sales of inventory       10,525.       10,525.       10,525.         Miscellaneous Revenue       Business Code       900099       52,922.       52,922.         b	eve								
c       Net income or (loss) from fundraising events       -49,772.       -49,772.         9 a       Gross income from gaming activities. See Part IV, line 19       a       a         b       Less: direct expenses       b       b         c       Net income or (loss) from gaming activities       b       b         10 a       Gross sales of inventory, less returns and allowances       a       10,525.       0.         b       Less: cost of goods sold       b       0.       0.       0.         c       Net income or (loss) from sales of inventory       10,525.       10,525.       10,525.         Miscellaneous Revenue       Business Code       900099       52,922.       52,922.         b	Ř		I I	,	32,500.				
c       Net income or (loss) from fundraising events       -49,772.       -49,772.         9 a       Gross income from gaming activities. See Part IV, line 19       a       a         b       Less: direct expenses       b       b         c       Net income or (loss) from gaming activities       b       b         10 a       Gross sales of inventory, less returns and allowances       a       10,525.       0.         b       Less: cost of goods sold       b       0.       0.       0.         c       Net income or (loss) from sales of inventory       10,525.       10,525.       10,525.         Miscellaneous Revenue       Business Code       900099       52,922.       52,922.         b	the	b			00.070				
9 a Gross income from gaming activities. See       a	ō					-49,772.			-49,772.
Part IV, line 19 a   b Less: direct expenses   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   10 a Gross sales of inventory, less returns   and allowances a   10 c 0.   c 0.   c 0.   Miscellaneous Revenue Business Code   b 0   c 00099   c 00099   d All other revenue   900099 74,908.   127,830. 0.									
b Less: direct expenses b   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   10 a Gross sales of inventory, less returns   and allowances a   10 a Gross sales of inventory, less returns   and allowances a   10 a Gross sales of inventory, less returns   and allowances a   10 a 0.   c 0.   Miscellaneous Revenue Business Code   11 a CEMETERY INCOME   900099 52,922.   52,922. 52,922.   b -   c -   d All other revenue   900099 74,908.   127,830									
c       Net income or (loss) from gaming activities       ▶       ■       ■         10 a       Gross sales of inventory, less returns and allowances       a       10,525.       ■         b       Less: cost of goods sold       b       0.       ■       ■         c       Net income or (loss) from sales of inventory       ▶       10,525.       ■       10,525.         Miscellaneous Revenue       Business Code       ■       ■       ■         11 a       CEMETERY INCOME       900099       52,922.       ■       52,922.         b       □       □       □       □       □         c       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □		b							
10 a Gross sales of inventory, less returns and allowances       a       10,525.         b Less: cost of goods sold       b       0.         c Net income or (loss) from sales of inventory       >       10,525.         Miscellaneous Revenue       Business Code       10,525.         11 a CEMETERY INCOME       900099       52,922.       52,922.         b									
and allowances       a       10,525.         b       Less: cost of goods sold       b         c       Net income or (loss) from sales of inventory       >         Miscellaneous Revenue       Business Code       10,525.         Miscellaneous Revenue       900099       52,922.         b									
b       Less: cost of goods sold       b       0.       0.         c       Net income or (loss) from sales of inventory       >       10,525.       10,525.         Miscellaneous Revenue       Business Code        10,525.       10,525.         Miscellaneous Revenue       Business Code         10,525.         b					10,525.				
c       Net income or (loss) from sales of inventory       10,525.       10,525.         Miscellaneous Revenue       Business Code       10         11 a       CEMETERY INCOME       900099       52,922.       52,922.         b		b							
Miscellaneous Revenue         Business Code           11 a         CEMETERY INCOME         900099         52,922.         52,922.           b						10,525.			10,525.
11 a       CEMETERY INCOME       900099       52,922.       52,922         b             c             d All other revenue       900099       74,908.       74,908         e       Total. Add lines 11a-11d       ▶       127,830.	ľ								
b	ľ	11 a							52,922.
c									
d All other revenue       900099       74,908.       74,908         e Total. Add lines 11a-11d       127,830.       127,830.									
e Total. Add lines 11a-11d					900099	74,908.			74,908.
					<b></b>	'			,
						· · · · · ·	2,139,667.	260,520.	4,870,668.
B32009 12-31-18 Form <b>990</b> (20-	832009				····· •			·	Form <b>990</b> (2018

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Form 990 (2018)

THE MILWAUKEE JEWISH FEDERATION, INC. 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 respon	se or note to any line in	this Part IX		
Doi	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				·
	and domestic governments. See Part IV, line 21	13,092,096.	13,092,096.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	500,000.	500,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	1,231,956.	1,231,956.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	665,827.	280,754.	167,021.	218,052.
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	2,741,735.	1,161,335.	677,519.	902,881.
8	Pension plan accruals and contributions (include		, , ,		,
-	section 401(k) and 403(b) employer contributions)	103,290.	36,750.	29,764.	36,776.
9	Other employee benefits	430,637.	192,402.	130,886.	107,349.
10	Payroll taxes	225,598.	95,729.	53,441.	76,428.
11	Fees for services (non-employees):	,	,		,
	Management				
b		47,877.	45,624.	2,103.	150.
	Accounting	38,999.	4,798.	6,840.	27,361.
	Lobbying	1,310.	1,310.	.,	,
	Professional fundraising services. See Part IV, line 17	40,340.			40,340.
f	Investment management fees	661,108.	661,108.		,
	Other. (If line 11g amount exceeds 10% of line 25,	,	,		
9	column (A) amount, list line 11g expenses on Sch 0.)	355,297.	307,614.	5,332.	42,351.
12	Advertising and promotion	68,031.	54,355.	2,283.	11,393.
13	Office expenses	427,980.	287,189.	40,479.	100,312.
14	Information technology	124,754.	38,049.	52,281.	34,424.
15	Royalties			02,2020	01/121
16	Occupancy	2,017,586.	1,886,245.	58,039.	73,302.
17	Travel	2,02,,0000	2,000,2100		
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	83,642.	52,125.	4,716.	26,801.
	-	1,796,539.	1,796,539.		20,001
20 21	Interest Payments to affiliates	_,	_,		
21	Depreciation, depletion, and amortization	1,777,848.	1,777,848.		
22 23		138,351.	121,768.	6,555.	10,028.
	Insurance Other expenses. Itemize expenses not covered	150,551.	121,700.	0,353.	10,020.
24	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
~	ANNUAL CAMPAIGN RESERVE	184,913.	184,913.		
a b	NEWSPAPER	62,086.	62,086.		
u c	BAD DEBT RECOVERIES	-687.	-687.		
		007.			
d	All other expenses	277,058.	203,497.	12,000.	61,561.
-	Total functional expenses. Add lines 1 through 24e	27,094,171.	203,497.	1,249,259.	1,769,509.
25 26	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u>2</u>	±,2=J,2JJ•	±,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
26	<b>Joint costs.</b> Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here Fight following SOP 98-2 (ASC 958-720)				
	Uncon here P     I I I I I I I I I I I I I I I I I		1		

11

	2	Savings and temporary cash investments	5,937,906.	2	8,215,619.
	3	Pledges and grants receivable, net		3	2,946,353.
	4	Accounts receivable, net	133,621.	4	270,367.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	3,510,921.
As	8	Inventories for sale or use		8	2,176,809.
	9	Prepaid expenses and deferred charges		9	173,093.
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 60,814,374	•		
	b	Less: accumulated depreciation 10b 31,446,340	. 31,015,709.	10c	29,368,034.
	11	Investments - publicly traded securities		11	119,783,774.
	12	Investments - other securities. See Part IV, line 11		12	60,195,016.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	2,170,665.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	229,743,415.
	17	Accounts payable and accrued expenses		17	1,495,997.
	18	Grants payable	4 100 640	18	4,068,379.
	19	Deferred revenue		19	,
	20	Tax-exempt bond liabilities		20	54,340,000.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	1 207 206	21	4,565,943.
6	22	Loans and other payables to current and former officers, directors, trustees,			
tie		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
Lia	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	31,212,885.	25	30,489,486.
	26	Total liabilities. Add lines 17 through 25	95,942,925.		94,959,805.
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🐰 and			
ŝ		complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets	93,784,106.	27	90,764,758.
ala	28	Temporarily restricted net assets	23,904,075.	28	44,018,852.
Fund Balance	29	Permanently restricted net assets	16,643,167.	29	0.
-un		Organizations that do not follow SFAS 117 (ASC 958), check here			
orl		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	134,331,348.	33	134,783,610.
	34	Total liabilities and net assets/fund balances		34	229,743,415.
					Form <b>990</b> (2018)

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

1 Cash - non-interest-bearing

Savings and temporary cash investments

(A) Beginning of year

2,254,569.

5,937,906.

1

2

**(B)** End of year

932,764.

8,215,619.

Form 990 (2018)

2

Part X Balance Sheet

	1 990 (2018) THE MILWAUKEE JEWISH FEDERATION, INC.	39-	<u>08063</u>	12	Pag	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		054		
2	Total expenses (must equal Part IX, column (A), line 25)	2	27,			
3	Revenue less expenses. Subtract line 2 from line 1	3		039		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	134,			
5	Net unrealized gains (losses) on investments	5	2,	181	.,0	07.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9	_	689	),5:	<u>17.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	<u>134,</u>	783	3,6:	10.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			<u>.</u>		
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	Х	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	L
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit	t			
	Act and OMB Circular A-133?		L	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
					000	

Form **990** (2018)

SCH	EDU	LE A
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(Form 990 or 990-EZ)

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

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

OMB No. 1545-0047
2018
Open to Public Inspection

		of the Treasury enue Service			Attach to Form 990 or F v/Form990 for instruction			nformation.		Inspection	
Nan	ne of	the organizati		e.e.tee.ge					loyer	r identification numb	be
		-	THE	MILWAUKEE	JEWISH FEDER	ATION	. INC.		3	9-0806312	
Pa	rt I	Reason	for Public (	Charity Status	All organizations must co	omplete th	is part.) Se	e instructions.			
The	orgar				For lines 1 through 12, c						
1		A church, cor	nvention of chi	urches, or associatio	on of churches described	l in <b>sectio</b>	on 170(b)(1	I)(A)(i).			
2		A school des	cribed in <b>sect</b> i	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990 or 99	90-EZ).)				
3		A hospital or	a cooperative	hospital service orga	anization described in <b>s</b>	ection 170	)(b)(1)(A)(ii	i).			
4		A medical res	earch organiz	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). E	Inter	the hospital's name,	
		city, and state	e:								
5		An organizati	on operated fo	or the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental unit des	scribe	ed in	
		section 170	( <b>b)(1)(A)(iv).</b> (C	Complete Part II.)							
6		A federal, sta	te, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7	X	An organizati	on that norma	lly receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from the gen	eral	public described in	
		section 170(	b)(1)(A)(vi). (C	omplete Part II.)							
8		A community	trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultura	al research org	ganization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a land-g	grant	college	
		or university of	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of the co	ollege	eor	
		university:									
10					than 33 1/3% of its sup						
					ct to certain exceptions,	. ,		••			۱t
					(less section 511 tax) fro	om busines	sses acqui	red by the organizat	tion a	after June 30, 1975.	
				mplete Part III.)			/				
11	H	-	-	-	ively to test for public sa	•					
12		-	-	-	ively for the benefit of, to	-		· ·			
				-	ed in section 509(a)(1) of supporting organization				(3). (		
а		_	-	• •	supervised, or controlled		-	· · · ·	v hv	aivina	
u	L				gularly appoint or elect a	• • • •	-				
			-	complete Part IV, Se	• • • •					, pp - 1	
b				-	or controlled in connect	tion with it:	s supporte	d organization(s), b	y hav	/ing	
				-	anization vested in the sa				-	-	
		organizatio	n(s). You mus	t complete Part IV,	Sections A and C.						
с		Type III fur	nctionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functionally inte	grate	ed with,	
		its supporte	ed organizatio	n(s) (see instructions	). You must complete l	Part IV, Se	ections A,	D, and E.			
d		Type III no	n-functionally	/ integrated. A supp	porting organization oper	ated in co	nnection w	ith its supported or	ganiz	zation(s)	
		that is not f	unctionally int	egrated. The organiz	zation generally must sat	isfy a distr	ibution rec	uirement and an at	tentiv	veness	
			-		nplete Part IV, Sections						
е			•		written determination fro			Type I, Type II, Type	e III		
					nally integrated supporti					[	
f		er the number		•	d execution(a)						_
g		(i) Name of supp		n about the supporte (ii) EIN	(iii) Type of organization	(iv) Is the org	anization listed	(v) Amount of monet	tary	(vi) Amount of other	r
		organization	1		(described on lines 1-10 above (see instructions))	in your governi Yes	No	support (see instruction	ons)	support (see instruction	ns
											_
											_
Tota	ai									1	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 14

#### Schedule A (Form 990 or 990-EZ) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 2 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.)

260	ction A. Public Support			-						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	<u>32633699.</u>	24433748.	22679318.	<u>15319132.</u>	<u>18784088.</u>	113849985			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
_	the organization without charge	22622600	24422740	22670210	1 5 2 1 0 1 2 2	10704000	112040005			
	Total. Add lines 1 through 3	32633699.	24433748.	22679318.	15319132.	18/84088.	113849985			
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,									
	,						19057851.			
6	Public support. Subtract line 5 from line 4.						94792134.			
	ction B. Total Support						54752154.			
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
	Amounts from line 4			22679318.						
	Gross income from interest.									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	4111238.	3194138.	3255424.	3639508.	3391654.	17591962.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on									
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part VI.)									
11	Total support. Add lines 7 through 10						131441947			
	Gross receipts from related activities,	, (	,				,136,501.			
13	First five years. If the Form 990 is fo	5	, , ,	, , ,	,					
Sec	organization, check this box and sto ction C. Computation of Publ									
	Public support percentage for 2018 (	••	<b>U</b>	column (fi)		14	72.12 %			
	Public support percentage from 2017		•	• • • • • • • • • • • • • • • • • • • •		15	72.29 %			
	33 1/3% support test - 2018. If the						,-			
	stop here. The organization qualifies									
b	stop here. The organization qualifies as a publicly supported organization         b 33 1/3% support test - 2017. 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 qua									
17a	7a 10% -facts-and-circumstances test - 2018. 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 "fac	-								
	meets the "facts-and-circumstances"				-	-				
b	10% -facts-and-circumstances test									
	more, and if the organization meets the	-								
	organization meets the "facts-and-cire	cumstances" test.	The organization o	ualifies as a public	ly supported orga	nization				
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s <b>&gt;</b>			
					Sche	edule A (Form 990	or 990-EZ) 2018			

832022 10-11-18

#### Schedule A (Form 990 or 990-EZ) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	tion A. Public Support		,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
6	the organization without charge <b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
b	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(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						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	L					
14	First five years. If the Form 990 is for	-			•		
Sec	check this box and stop here	c Support Per	centage				
	Public support percentage for 2018 (I			column (f))		15	%
16	Public support percentage from 2017	Schedule A, Part	III, line 15			16	%
Sec	tion D. Computation of Inves	tment Income					
	Investment income percentage for <b>20</b>					17 18	%
	Investment income percentage from a 33 1/3% support tests - 2018. If the						
130	more than 33 1/3%, check this box ar						
h	<b>33 1/3% support tests - 2017.</b> If the						
2	line 18 is not more than 33 1/3%, che						
20	<b>Private foundation.</b> If the organization						
	3 10-11-18			, , ,			0 or 990-EZ) 2018
			16			•	,

2018.05070 THE MILWAUKEE JEWISH FEDE 115515\_1

#### Schedule A (Form 990 or 990 EZ) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 4 Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

17

832024 10-11-18

4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Yes No

1

2

3a

3b

3c

Schedule A (Form 990 or 990-EZ) 2018

### Schedule A (Form 990 or 990-EZ) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 5 Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	110		
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	<u>11a</u> 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in <b>Part VI.</b>	11c		
	tion B. Type I Supporting Organizations	TIC		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	110
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	-		
-	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's	•		
<u>Soc</u>	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) The organization satisfied the Activities Test. Complete line 2 below.	•		
a b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see insti	ructional		
2	Activities Test. Answer (a) and (b) below.	actions	Yes	No
– a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	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				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Schedule A (Form 990 or 990-EZ) 2018

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	edule A (Form 990 or 990-EZ) 2018 THE MILWAUKEE JEWISH FE.			39-0806312 Page 6
1	Check here if the organization satisfied the Integral Part Test as a qualifying			Dort V(L) See instructions All
		-		Part VI.) See Instructions. All
Sect	other Type III non-functionally integrated supporting organizations must co	inpiete 3	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2018

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## Schedule A (Form 990 or 990-EZ) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 7

Par	t V   Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	anizations (continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	)	
	(provide details in <b>Part VI</b> ). See instructions.	-		
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
C	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990-EZ) 2018 TH	HE MILWAUKE	E JEWISH	FEDERATION	, INC.	39-0806312	Page 8
Part VI	Supplemental Informat Part IV, Section A, lines 1, 2, 3 line 1; Part IV, Section D, lines	<b>ion.</b> Provide the exp b, 3c, 4b, 4c, 5a, 6, 9	lanations require a, 9b, 9c, 11a, 1	ed by Part II, line 10; I 1b, and 11c; Part IV, 3	Part II, line 17a or Section B, lines 1	r 17b; Part III, line 12; I and 2; Part IV, Sectior	n C,
	Section D, lines 5, 6, and 8; an (See instructions.)	d Part V, Section E, li	nes 2, 5, and 6.	Also complete this pa	rt for any additio	nal information.	irt v,
999000 10 11 1	10				Cabad	le A (Form 990 or 990-	E7) 2010
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## SCHEDULE C

#### (Form 990 or 990-EZ)

# Political Campaign and Lobbying Activities

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

Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

2018 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

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

<ul> <li>Section 501(c)(4),</li> </ul>	(5), or (6) organizations: Complete Part III.
Name of organization	

Name of organization	Employer identification number
THE MILWAUKEE JEWISH FEDERATION, INC.	39-0806312
Part I-A Complete if the organization is exempt under section 501(c) or is a section 52	27 organization.
1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.	
2 Political campaign activity expenditures	▶\$
3 Volunteer hours for political campaign activities	
Part I-B Complete if the organization is exempt under section 501(c)(3).	
1 Enter the amount of any excise tax incurred by the organization under section 4955	
2 Enter the amount of any excise tax incurred by organization managers under section 4955	
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	
4a Was a correction made?	YesNo
<b>b</b> If "Yes," describe in Part IV.	
Part I-C Complete if the organization is exempt under section 501(c), except section 5	501(c)(3).
1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	. ► \$
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527	
exempt function activities	►\$
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,	
line 17b	►\$
4 Did the filing organization file Form 1120-POL for this year?	
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to	
made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also er	nter the amount of political
contributions received that were promptly and directly delivered to a separate political organization, such as a se	eparate segregated fund or a

<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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political action committee (PAC). If additional space is needed, provide information in Part IV.

Schedule C (Form 990 or 990-EZ) 2018

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Schedule C (Form 990 or 990-EZ) 2018 T Part II-A Complete if the organ					0806312 Page 2	
section 501(h)).		empt under section		u Form 5766 (er	ection under	
	n belongs to an a	ffiliated group (and list ir	Part IV each affiliated o	aroup member's nam	ne. address. EIN.	
expenses, and share					, , , , ,	
		and "limited control" pro	ovisions apply.			
Limits	on Lobbying Exp	· ·		<b>(a)</b> Filing organization's totals	(b) Affiliated group totals	
<b>1a</b> Total lobbying expenditures to influe	1a Total lobbying expenditures to influence public opinion (grass roots lobbying)					
b Total lobbying expenditures to influe						
c Total lobbying expenditures (add line	s 1a and 1b)		[			
d Other exempt purpose expenditures						
e Total exempt purpose expenditures (	add lines 1c and	1d)				
f Lobbying nontaxable amount. Enter	the amount from t	he following table in bot	h columns.			
If the amount on line 1e, column (a) or (	b) is: The le	obbying nontaxable am	ount is:			
Not over \$500,000	20% (	of the amount on line 1e.				
Over \$500,000 but not over \$1,000,0	00 \$100,	000 plus 15% of the exc	ess over \$500,000.			
Over \$1,000,000 but not over \$1,500	) <u>,000</u> \$175,	000 plus 10% of the exc	ess over \$1,000,000.			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.						
Over \$17,000,000	Over \$17,000,000 \$1,000,000.					
<ul> <li>h Subtract line 1g from line 1a. If zero of</li> <li>i Subtract line 1f from line 1c. If zero of</li> <li>j If there is an amount other than zero reporting section 4911 tax for this yet</li> <li>(Some organizations that)</li> </ul>	r less, enter -0- on either line 1h o ar? 4-Year A	or line 1i, did the organiza	ation file Form 4720		Yes No	
		arate instructions for li				
	Lobbying Exp	enditures During 4-Yea	ar Averaging Period			
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	(e) Total	
2a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))						
<u>c</u> Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2018

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#### Schedule C (Form 990 or 990-EZ) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description			(a)		(b)	
	e lobbying activity.	Yes	No	Amount		
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter					
-	or referendum, through the use of:	x				
a	Volunteers?		x			
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X			
C	Media advertisements?		X			
	Mailings to members, legislators, or the public?		X			
	Publications, or published or broadcast statements?		X			
	Grants to other organizations for lobbying purposes?		X			
	Direct contact with legislators, their staffs, government officials, or a legislative body?		X			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	x		-	L,310.	
	Other activities?				L,310.	
J	Total. Add lines 1c through 1i		x	-	1,510.	
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		<u> </u>			
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	n 501(a)(	 5) or cor	tion		
Fai	501(c)(6).		5), 01 Set	,0011		
	501(0)(0).			Yes	No	
				Tes	NO	
1	Were substantially all (90% or more) dues received nondeductible by members?					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from th t III-B Complete if the organization is exempt under section 501(c)(4), section			tion		
Fai	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				a 3. is	
	answered "Yes."	,			5 0, 10	
			4			
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al				
_	expenses for which the section 527(f) tax was paid).		0.			
	Current year					
	Carryover from last year					
c						
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical				
_	expenditure next year?					
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
	t IV Supplemental Information					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	A, lines 1 a	nd 2 (see		
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.					
PAR	RT II-B, LINE 1, LOBBYING ACTIVITIES:					
		TACON	а <b>т</b> ы тп	MT OTT		
PA	A MONTHLY FEE TO MICHAEL BLUMENFELD WHO RUNS THE W	T2CON:	SIN UE	MTPH		
~~	THERE PROTECT IT A CERTIFICATION AND THE MONTHON DOLLAR	TO3T 7		птпа		
001	FERENCE PROGRAM. HIS SERVICES ARE TO MONITOR POLIT	ICAL A	ACTIVI	TIES		
7 NTT	DECUTE LODEVING GERVICES AS NEEDED MUE WISCONST	NT T T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T	Tatt			
ANI	PROVIDE LOBBYING SERVICES AS NEEDED. THE WISCONSI	N JEW.	ГЭП			
COI	IFERENCE HELPS TO KEEP THE MILWAUKEE JEWISH FEDERATI	ON IN	FORMED	OF		
ISS	SUES THAT COULD BE IMPORTANT TO THE JEWISH COMMUNITY	•				
			ule C (Form	990 or 99	0-EZ) 2018	
83204	3 11-08-18		-			

# **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.



Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 423 Total number at end of year 1 8,178,262. Aggregate value of contributions to (during year) 2 7,650,391. 3 Aggregate value of grants from (during year) 36,794,785. Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? No 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 X Yes No impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 2 day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a а 2b b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c С Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? No \_\_\_\_\_ [ 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ► \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and 9 include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ (ii) Assets included in Form 990, Part X ▶ \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 2 the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018 832051 10-29-18 25

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Sche		WAUKEE JEWI						806312		age <b>2</b>	
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, o	r Other S	Similar	r Asse	ts <sub>(contir</sub>	nued)		
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing tha	t are a sigr	nificant u	se of its	collection	items		
	(check all that apply):		-	-	-						
а	X Public exhibition	d	X Loan or exc	hange progra	ams						
b	X Scholarly research	е		0.0							
с	X Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	how they further th	ne organizatio	on's exemp	ot purpos	se in Pa	rt XIII.			
5	During the year, did the organization solicit or										
-	to be sold to raise funds rather than to be ma						Г	X Yes		No	
Par	t IV Escrow and Custodial Arrang										
	reported an amount on Form 990, Par		ion ino organizano				,	,,			
1a	Is the organization an agent, trustee, custodia		ary for contributions	s or other as	sets not in	cluded					
14	on Form 990, Part X?		•				Г	Yes	X	No	
h	If "Yes," explain the arrangement in Part XIII a						L	103			
D			owing table.					Amoun	•		
•	Reginning balance					1c		Amoun			
	Beginning balance					1d					
	Additions during the year					1e					
e د	Distributions during the year					1f					
20	Ending balance Did the organization include an amount on Fo					·	Г	X Yes		No	
	If "Yes," explain the arrangement in Part XIII.				-		L	11 165	X	_	
Par						<u></u>			21		
		(a) Current year	(b) Prior year	(c) Two yea		d) Three y	ware had	k (e) Four	Veare	hack	
10	Paginning of year balance	60,116,640.	56,015,050.								
-											
b											
C al											
	d Grants or scholarships 6,044,673. 3,728,963. 3,184,388. 2,709,050. 2,530,										
е	Other expenditures for facilities	EE2 064	627 069	66	0 114	2	60 210		272	100	
	and programs	552,064. 845,443.	627,968.		0,114.		60,218 62,975		273,		
	Administrative expenses	60,594,446.	824,647. 60,116,640.		5,775.				463,		
g	End of year balance	· · · ·		•	5,050.	50,0	74,114	· 51	355,	030.	
2	Provide the estimated percentage of the curr	•		)) held as:							
a	Board designated or quasi-endowment	.00	_%								
b	Permanent endowment  26.45	<u>%</u>									
С	Temporarily restricted endowment ▶7										
-	The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should										
За	Are there endowment funds not in the posses	ssion of the organizat	tion that are held an	nd administer	red for the	organiza	ation	ſ			
	by:								Yes	<u>No</u>	
	(i) unrelated organizations									<u>X</u>	
										X	
b	If "Yes" on line 3a(ii), are the related organization	•						<b>3b</b>			
4	Describe in Part XIII the intended uses of the		vment funds.								
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answered										
	Description of property	(a) Cost or ot		or other		cumulate	ed	<b>(d)</b> Boo	k value	e	
		basis (investm	,	(other)	depr	reciation		0.64			
	Land			<u>3,763.</u>	0.5.0			2,64			
	Buildings		51,33	2,898.	25,2	78,22	L7.	26,05	4,68	<u>5</u> 1.	
	Leasehold improvements					<u> </u>					
d	Equipment		6,83	7,713.	6,1	68,12	23.	66	9,59	90.	
	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part >	(, column (B), line 1	0c.)				29,36	3,03	34.	
							Schedu	le D (Forn	n 990)	2018	

	EE JEWISH F	EDERATION, I	INC. 39	-0806312 Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(C) Method of	valuation. Cost or en	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other (A) PRIVATE EQUITY FUNDS	198,63		YEAR MARKET	
	69,47		YEAR MARKET	
	09,47	<u> </u>	IEAR MARKEI	VALUE
(C) OTHER ALTERNATIVE (D) INVESTMENTS	35,492,75		YEAR MARKET	VALUE
(E) OTHER STRUCTURED PRODUCTS	24,125,73		YEAR MARKET	
(F) PARTNERSHIP INTERESTS	308,41			V11000
(G)	500,11			
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	60,195,01	6.		
Part VIII Investments - Program Related.	00,100,01			
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			d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"		line 11d. See Form 990	, Part X, line 15.	
(a)	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	ə 15.)			
Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11e or 11f. See For	m 990, Part X, line 25	i
1.(a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) POST-RETIREMENT BENEFIT L		3,500	<u>.</u>	
(3) DEFERRED SUPPORT OF CHARIT	TABLE			
(4) GIFT ANNUITIES		3,422,461		
(5) INTEREST RATE SWAP		840,080		
(6) AGENCY ENDOWMENT FUNDS		26,214,959		
(7) CAPITAL LEASE OBLIGATION		8,486	•	
(8)				
(9)		20 100 105		
Total. (Column (b) must equal Form 990, Part X, col. (B) line		30,489,486	•	
2. Liability for uncertain tax positions. In Part XIII, provide		-		
organization's liability for uncertain tax positions under	FIN 48 (ASC 740). Ch	eck here if the text of th	ne footnote has been	provided in Part XIII X

THE MILWAUKEE JEWISH FEDERATION, INC.

Schedule D (Form 990) 2018

39-0806312 Page 3

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Sche	dule D (Form 990) 2018 THE MILWAUKEE JEWISH FEDERA	TION, INC.	39-0806312 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per Re	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	· · · · · · · · · · · · · · · · · · ·	5
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses per	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		- <u> </u>
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities		-
b	Prior year adjustments	2b	-
С	Other losses		-
d	Other (Describe in Part XIII.)		-
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		- 1
b	Other (Describe in Part XIII.)	4b	_
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )		5
Pa	t 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 III, LINE 4:

THE	JEW:	ISH	MUSE	UM M	IILWAUK	EE 1	PRESE	RVES	AND	PRES	ENTS	THE	JEW	ISH	EXP	ERI	ENCE	
THRC	лісн	тнъ	E LEN	S OF	' GREAT	ו אפי	MITTWA	ядун	ANT	) CEL	EBRA	res n	гнг	СОИТ	וואדי	TTM	OF	
	/0011			0 01	01(1111				, 11111					00111	1110	011	01	
JEWI	SH I	HERI	TAGE	AND	CULTU	RE.	THE	ARCI	HIVES	5, EXI	HIBI	FIONS	5, P	ROGR	AMS	AN	D	
זמזזמ	тал	<b></b>		<b>.</b>	TNODTO	ות ה		וחחג			HOD	<b>011</b> 12	DT17		·m37	0 TI	T 131-1 T (	
PORT	ICA.	1.101	IS SH	АЦГ	INSPIR	E P	ORPIC	APPI	RECIA	ATTON	FOR	THE	DIV	ERSI	.т.х	OF	JEWIS	<u>H</u>
LIFE	IN I	ΑI	JOCAL	AND	GLOBA	LH	ISTOR	IC CO	ΟΝΤΕΣ	КТ.								

GOALS OF THE JEWISH MUSEUM ARE:

-TO COLLECT, PRESERVE AND PRESENT THE RECORDS AND ARTIFACTS THAT DOCUMENT

THE JEWISH EXPERIENCE

-TO IMPART A SENSE OF JEWISH HISTORY AND CONTINUITY FOR PRESENT AND FUTURE

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#### GENERATIONS

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Schedule D (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 5 Part XIII Supplemental Information (continued)

-TO PROVIDE A SENSE OF RELIGION AND CULTURAL IDENTITY FOR MEMBERS OF THE

#### JEWISH COMMUNITY

-TO PROMOTE INTER-FAITH UNDERSTANDING BY PROVIDING A CENTRAL JEWISH

RESOURCE ACCESSIBLE TO THE GREATER METROPOLITAN AREA

-TO FULFILL THE OUTREACH AND COMMUNITY-BUILDING MANDATE OF THE MILWAUKEE

JEWISH FEDERATION

PART IV, LINE 2B:

ASSETS HELD ON BEHALF OF CEMETERY

CEMETERY PROPERTY AND EQUIPMENT AND AN INVESTMENT PORTFOLIO INTENDED TO SATISFY CEMETERY OPERATING EXPENSES WERE TRANSFERRED TO THE FEDERATION IN 1988. THE ASSETS ARE INCLUDED IN THE FEDERATION'S INVESTMENTS AND PROPERTY AND EQUIPMENT; CEMETERY PAYABLES ARE INCLUDED IN THE FEDERATION'S ACCOUNTS PAYABLE AND ACCRUED EXPENSES IN THE ACCOMPANYING CONSOLIDATED STATEMENTS OF FINANCIAL POSITION. THE EXCESS OF CEMETERY ASSETS OVER LIABILITIES IS RECORDED AS A LONG-TERM LIABILITY IN THE ACCOMPANYING CONSOLIDATED STATEMENTS OF FINANCIAL POSITION AS THE ENTIRE TRANSFER IS REVOCABLE UPON 60 DAYS NOTICE TO OR FROM THE FEDERATION.

PART V, LINE 4:

THE ENDOWMENTS WILL FORM A PERMANENT BASE OF SUPPORT FOR OUR LOCAL

COMMUNITY, OUR AGENCIES, AND OUR PROGRAMS.

PART X, LINE 2:

THE FEDERATION RECOGNIZES THE BENEFITS OF A TAX POSITION ONLY AFTER

DETERMINING WHETHER IT IS MORE LIKELY THAN NOT THAT THE TAXING AUTHORITY

#### WOULD SUSTAIN THE TAX POSITION UPON EXAMINATION OF THE TECHNICAL MERITS OF Schedule D (Form 990) 2018

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Schedule D (Form 990) 2018
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Schedule D (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page & Part XIII Supplemental Information (continued)
THE TAX POSITION ASSUMING THE TAXING AUTHORITY HAS FULL KNOWLEDGE OF ALL
INFORMATION. THE FEDERATION RECORDED NO ASSETS OR LIABILITIES RELATED TO
UNCERTAIN TAX POSITIONS.
Schedule D (Form 990) 201

SCHEDULE F	Stateme	nt of Act	ivities Outside the Ur	nited Sta	ites -	OMB No. 1545-0047
(Form 990)			n answered "Yes" on Form 990, Part			2018
Department of the Treasury			Attach to Form 990.			Open to Public
Internal Revenue Service	► Go to	www.irs.gov/Fc	orm990 for instructions and the lates	t information.		Inspection
Name of the organization					Employer ide	ntification number
THE MILWAUKEE	JEWISH FE	DERATION	, INC.		39-0806	312
Part I General In	formation on A	ctivities Out	side the United States. Compl	ete if the organ	ization answere	d "Yes" on
Form 990, Pa						
-	-		ds to substantiate the amount of its gra the selection criteria used to award the		-	X Yes No
2 For grantmakers. D United States.	escribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance o	outside the
3 Activities per Region	. (The following Part	t I, line 3 table ca	an be duplicated if additional space is r	needed.)		
(a) Region	(b) Number of offices in the region			(e) If acti is a pro describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
MIDDLE EAST AND						
NORTH AFRICA -						
ALGERIA, BAHRAIN,			GRANTS TO RECIPIENTS			
DJIBOUTI, EGYPT,	0	0	LOCATED IN REGION	GENERAL SUP	PORT	84,845.
3 a Subtotal	0	0				84,845.
<b>b</b> Total from continuati sheets to Part I		0				0.
c Totals (add lines 3a	0	0				84 845.

**Statement of Activities Outside the United States** 

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

Schedule F (Form 990) 2018

OMB No. 1545-0047

832071 10-31-18

39-0806312

# 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 (g) Amount of (h) Description (i) Method of (b) IRS code section (d) Purpose of (e) Amount (f) Manner of (a) Name of organization (c) Region noncash of noncash valuation (book, FMV, and EIN (if applicable) of cash grant cash disbursement grant assistance assistance appraisal, other) MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT, 5,000. CHECK Ο. GENERAL SUPPORT MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT, GENERAL SUPPORT 5 800. CHECK 0. MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT, GENERAL SUPPORT 15,100.CHECK 0. MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT, GENERAL SUPPORT 8,000. CHECK Ο. MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT, GENERAL SUPPORT 5,000. CHECK 0. MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT, GENERAL SUPPORT 1147111. ACH 0. MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT, 0. GENERAL SUPPORT 10,000.CHECK MIDDLE EAST AND NORTH AFRICA -ALGERIA, BAHRAIN, DJIBOUTI, EGYPT, GENERAL SUPPORT 7,000, CHECK 0. 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 8 by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2018

Page 2

39-0806312

#### Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)	

Schedule F (Form 990) 2018

Schedule F	(Form 990)	) 2018	THE	MILWAUKEE	JEWISH	FEDERATION,	INC.	39-0806312	Page 4
Part IV	Foreig	n Form	s						

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

Schedule F (Form 990) 2018

832074 10-31-18

832075 10-31-18	3				35			Schedule F (Forr	1 990) 2010
									n 000) 2019
			<u>10 D0 M</u>	01111 011					
	GRANT FUI					J.5 URG	ANIZATI(	ONS WHOSE	
								S AND THE US	AGE
	NTEER COM							JKEE JEWISH	
PART I,	, LINE 2:								
								d); and Part III, column ( ation. See instructions.	
		nation required	l by Part I, line					ng method; amounts of	

SCHEDULE G Supplemental Information Regarding Fundraising or Gaming Activities OMB No. 1545-0047											
(Form 990 or 990-EZ)		e organization answered "Yes" on				r 19,	or if the	2018			
5 · · · ///	L. L	organization entered more than \$1 Attach to Form 990						Open to Public			
Department of the Treasury Internal Revenue Service	► Go	to www.irs.gov/Form990 for instr				on.		Inspection			
Name of the organization								dentification number			
Part I Fundraisi		WAUKEE JEWISH FEDE					39-080				
	complete this par	Complete if the organization answe t.	ered "Y	es" or	1 Form 990, Part IV, I	ine 1	(. Form 990-E	-2 filers are not			
<ul> <li>a X Mail solicitati</li> <li>b X Internet and c</li> <li>c X Phone solicit</li> <li>d X In-person sol</li> <li>2 a Did the organization key employees lister</li> </ul>	ons email solicitations ations icitations n have a written c ed in Form 990, P highest paid indiv	f Solicita g X Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluc rofessi	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		XY				
	ast \$5,000 by the	l	1		1						
(i) Name and address of individual or entity (fundraiser)(ii) Activity(iii) Activity(iv) Gross receipts from activity(v) Amount p to (or retained fundraiser findraiser isted in col.							or retained by fundraiser				
G. STRATEGIES - P.O	. BOX 247,		Yes	No							
MILWAUKEE, WI 5320		FUNDRAISING CONSULTANT		X	162,625.		34,015	5. 128,610.			
ESTABROOK CONSULTIN NORTH BERKELEY BOUL		FUNDRAISING CONSULTANT		x	80,510.		6,325	5. 74,185.			
	,				,		,	, ,			
Total				<b>•</b>	243,135.	:1 :0 :	40,340	,			
or licensing.	ch the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	IT IS E	exempt from	registration			
WI											
I HA For Paperwork Re	duction Act Not	ice. see the Instructions for Form 9	990 or	990-F	Z. 9	Scheo	dule G (Form	990 or 990-EZ) 2018			

SEE PART IV FOR CONTINUATIONS

dule G (Form 990 or 990-EZ) 2

832081 10-03-18

 Schedule G (Form 990 or 990-EZ) 2018
 THE MILWAUKEE JEWISH FEDERATION, INC.
 39-0806312
 Page 2

 Part II
 Fundraising Events.
 Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

draiair

			(a) Event #1 ECONOMIC FORUM	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
۰			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Hevenue	1	Gross receipts	162,625.			162,625
	2	Less: Contributions	130,125.			130,125
	3	Gross income (line 1 minus line 2)	32,500.			32,500
	4	Cash prizes				
	5	Noncash prizes				
penses	6	Rent/facility costs	5,000.			5,000
Direct Expenses	7	Food and beverages	13,933.			13,933
זל	8	Entortoinmont	20,542.			20 542
		Entertainment Other direct expenses				20,542 42,797
		Direct expense summary. Add lines 4 through	· · · · · · · · · · · · · · · · · · ·	I	•	82,272
- 1		Net income summary. Subtract line 10 from I			•	-49,772
2				bingo/progressive bingo		
<b>Jevenu</b>						col. (a) through col. (c
Hevenu	<u>1</u>	Gross revenue				
		Cash prizes				
		Cash prizes				
	3 4	Cash prizes Noncash prizes Rent/facility costs	Yes%	Yes%	Yes %	
	3 4 5	Cash prizes Noncash prizes Rent/facility costs	Yes%		☐ Yes %	
	3 4 5 6	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	No	Yes%	No	
	3 4 5 6	Cash prizes	<b>No</b>	Yes %	No►	
Direct Expenses	3 4 5 7 8	Cash prizes	n 5 in column (d)	Yes %	No►	
	3 4 5 6 7 8 Ent	Cash prizes	No 5 in column (d) 7 from line 1, column (d) ucts gaming activities:	Yes%	No ►	
a Direct Expenses	3 4 5 6 7 8 Entils t	Cash prizes	No 5 in column (d) from line 1, column (d) ucts gaming activities: ctivities in each of these s	Yes%	No ►	
	3 4 5 6 7 8 Entit	Cash prizes	No No	Yes % No	No ►	Yes N
	3 4 5 6 7 8 Entit	Cash prizes	No No	Yes % No	No ►	Yes N

Schedule G (Form 990 or 990-EZ) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0	)806312 <sub>Рас</sub>	ge <b>3</b>
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		_
to administer charitable gaming?	Yes	No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility	13a	%
<b>b</b> An outside facility	13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
Name		
Address		
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	] No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount		
of gaming revenue retained by the third party $\triangleright$ \$		
c If "Yes," enter name and address of the third party:		
Name		
Address 🕨		
16 Gaming manager information:		
Name		
Gaming manager compensation 🕨 \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	Yes	No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year 🕨 \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	t III, lines 9, 9b, 10	Ĵb,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
COMEDINE C DADE I INE OD I ICH OF MEN MICHER DAID FUNDAIGED	1.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS		
(I) NAME OF FUNDRAISER: ESTABROOK CONSULTING		
(I) ADDRESS OF FUNDRAISER:		
4720 NORTH BERKELEY BOULEVARD, WHITEFISH BAY, WI 53211		
832083 10-03-18 Schedule G (Forn	n 990 or 990-EZ) (	2018

Schedule G (Form 990 or 990-EZ) 2018

Schedule G	(Form 990 or 990-EZ) Supplemental Inform	THE	MILWAUKEE	JEWISH	FEDERATION,	INC.	39-0806312	Page 4
Part IV	Supplemental Inform	nation	(continued)					
							Schedule G (Form 990 or	990-EZ)

832084 04-01-18

SCHEDULE I		G	arants and Oth	er Assistan	ce to Organ	izations,		ON	/IB No. 1545-0047
(Form 990)		Go	vernments, an ete if the organization	d Individual	s in the Ŭni <sup>.</sup>	ted States			2018
Department of the Treasury Internal Revenue Service		Comple	-	Attach to Fori s.gov/Form990 for	m 990.			O	pen to Public Inspection
Name of the organizatio			-	-					ification number
			SH FEDERATIO	ON, INC.				39	-0806312
	ormation on Grants a								
•	ation maintain records t		•		• • •	e e	•		Yes 🗌 No
2 Describe in Part IV	vard the grants or assis / the organization's pro	stance?	oring the use of grant :	funds in the United	States				
	Other Assistance to I					anization answered "Y	es" on Form 990 Par	t IV line 21 for an	
	at received more than \$	-							3
1 (a) Name and add	dress of organization ernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance		se of grant sistance
A. CHUDNOW & SONS	HIGHODICAL								
MUSEUM - 839 NORTH									
MILWAUKEE, WI 5323		39-1725827	501(C)(3)	21,100.	0.			GENERAL DONAT	FIONS
<i>.</i>				,					
ACLU FOUNDATION									
125 BROAD STREET,	18TH FLOOR								
NEW YORK, NY 10004		13-6213516	501(C)(3)	11,500.	0.			GENERAL DONAT	LIONS
ACLU OF WISCONSIN	FOINDATION								
207 EAST BUFFALO S									
MILWAUKEE, WI 5320	,	23-7052345	501(C)(3)	22,850.	0.			GENERAL DONAT	FIONS
,									
ACTS HOUSING									
2414 WEST VLIET ST	REET								
MILWAUKEE, WI 5320	5	39-1837474	501(C)(3)	26,350.	0.			GENERAL DONAT	CIONS
ADLER PLANETARIUM									
1300 LAKE SHORE DR CHICAGO, IL 60605	TAR	36-6210902	F(1/a)/2)	10,000.	0.			GENERAL DONAT	TONG
CHICAGO, IL 80805		30-0210902	501(C)(3)	10,000.	0.			GENERAL DONAL	.10NS
AL CAMPS									
7247 NORTH ST. LOU	IS								
SKOKIE, IL 60076		36-3529801	501(C)(3)	6,700.	0.			GENERAL DONAT	FIONS
2 Enter total numbe	r of section 501(c)(3) ar	nd government org	anizations listed in the	e line 1 table			•	· · · · · · · · · · · · · · · · · · ·	206.
3 Enter total numbe	r of other organizations	s listed in the line 1	table			·····			0.
LHA For Paperwork	Reduction Act Notice,	see the Instruction	ons for Form 990.					Schedule I (	Form 990) (2018)

### Schedule | (Form 990) THE MILWAUKEE JEWISH FEDERATION, INC.

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Schedule I (Form 990) THE MILWA	UKEE JEWI	SH FEDERATI	ON, INC.				99-0806312 Pa
Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sche	edule I (Form 990), Pa	irt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALVERNO COLLEGE							
P.O. BOX 343922							
MILWAUKEE, WI 53234	39-0806263	501(C)(3)	20.000	0.			GENERAL DONATIONS
ALZHEIMER'S ASSOCIATION-SOUTHEAST	39-0808283	501(C)(3)	20,000.	0.			GENERAL DONATIONS
WISCONSIN CHAPTER - 620 SOUTH 76							
STREET, SUITE 160 - MILWAUKEE, WI							
53214	13-3039601	501(C)(3)	21,250.	0.			GENERAL DONATIONS
AMERICAN LUNG ASSOCIATION IN	13-3039001	501(0)(3)	21,230.	0.			GENERAL DONATIONS
WISCONSIN - 13100 WEST LISBON							
ROAD, NO. 700 - BROOKFIELD, WI							
53005	13-1632524	501(C)(3)	5,000.	0.			GENERAL DONATIONS
	13 1032324	501(0)(3)	5,000.				
ANSHE SFARD KEHILLAT TORAH							
6717 NORTH GREEN BAY AVENUE							
GLENDALE, WI 53209	39-1572032	501(C)(3)	108,751.	0.			GENERAL DONATIONS
ANTI-DEFAMATION LEAGUE							
605 THIRD AVENUE							
NEW YORK, NY 10058	13-1818723	501(C)(3)	8,300.	0.			GENERAL DONATIONS
				<b>.</b>			
ARIE CROWN DAY SCHOOL							
4600 MAIN STREET							
SKOKIE, IL 60076	36-2129620	501(C)(3)	9,300.	0.			GENERAL DONATIONS
ARTS AT LARGE, INC.							
908 SOUTH 5TH STREET							
MILWAUKEE, WI 55320	33-1114575	501(C)(3)	10,100.	0.			GENERAL DONATIONS
,							
ASSOCIATION OF CHEVROS KADISHA,							
INC 85-18 117TH STREET -							
RICHMOND HILLS, NY 11418	11-3364887	501(C)(3)	11,800.	0.			GENERAL DONATIONS
			,				
AURORA HEALTH CARE FOUNDATION							
950 NORTH 12TH STREET, SUITE A511							
, MILWAUKEE, WI 53201	39-6044569	501(C)(3)	14,810.	0.			GENERAL DONATIONS
· · · · · · · · · · · · · · · · · · ·	1	1	,	- •		1	

		SH FEDERATI					9-0806312 Pag
Part II         Continuation of Grants and Other A           (a) Name and address of organization or government	Assistance to Gov (b) EIN	<b>(c)</b> IRC section if applicable	nizations in the Un (d) Amount of cash grant	ited States (Sche (e) Amount of non-cash assistance	edule I (Form 990), Pa (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BADER HILLEL ACADEMY 6401 NORTH SANTA MONICA BOULEVARD MILWAUKEE, WI 53217	39-1025262	501(C)(3)	355,993.	0.			GENERAL DONATIONS
BALANCE, INC. 1350 14TH AVENUE, SUITE 4 GRAFTON, WI 53024	39-1771303	501(C)(3)	18,100.	0.			GENERAL DONATIONS
BENEDICT CENTER, INC. 1849 NORTH KING DRIVE, SUITE 101 MILWAUKEE, WI 53212	39-1226475	501(C)(3)	6,850.	0.			GENERAL DONATIONS
BETHLEHEM CHABAD 493 DELAWARE AVENUE DELMAR, NY 12054 BIG BROTHERS AND BIG SISTERS OF	45-3828519	501(C)(3)	19,000.	0.			GENERAL DONATIONS
METROPOLITAN MILWAUKEE - 788 NORTH JEFFERSON STREET, SUITE 600 - MILWAUKEE, WI 53202	39-1239687	501(C)(3)	32,600.	0.			GENERAL DONATIONS
BIRTHRIGHT ISRAEL FOUNDATION 711 3RD AVENUE, 10TH FLOOR NEW YORK, NY 10017	13-4092050	501(C)(3)	9,230.	0.			GENERAL DONATIONS
B'NAI B'RITH BEBER CAMP 8833 GROSS POINT ROAD, SUITE 312 SKOKIE, IL 60077	27-2025066	501(C)(3)	5,400.	0.			GENERAL DONATIONS
B'NAI B'RITH YOUTH ORG WI REGION BBYO - 6255 NORTH SANTA MONICA BOULEVARD - MILWAUKEE, WI 53217	31-1794932	501(C)(3)	107,372.	0.			GENERAL DONATIONS
BOYS AND GIRLS CLUB OF GREATER MILWAUKEE, INC. – 1558 NORTH 6TH STREET – MILWAUKEE, WI 53212	39-0806292	501(C)(3)	5,230.	0.			GENERAL DONATIONS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMP MANITOWISH YMCA, INC.									
.O. BOX 246									
OULDER JUNCTION, WI 54512	39-1136315	501(C)(3)	102,100.	0.			GENERAL DONATIONS		
ARDINAL STRITCH UNIVERSITY, INC.									
801 NORTH YATES ROAD									
ILWAUKEE, WI 53217	39-0806196	501(C)(3)	45,000.	0.			GENERAL DONATIONS		
ARE: CANCER AWARENESS THROUGH			,						
RESEARCH AND EDUCATION ASSOCIATION									
P.O. BOX 3740 - CAREFREE, AZ									
5377	20-3771288	501(C)(3)	10,000.	0.			GENERAL DONATIONS		
ATHEDRAL CENTER, INC. 45 NORTH VAN BUREN STREET									
IILWAUKEE, WI 53202	74-3038890	501(C)(3)	10,550.	0.			GENERAL DONATIONS		
,			,						
EDARS-SINAI MEDICAL CENTER									
3730 ALDEN DRIVE, ROOM E123									
OS ANGELES, CA 90048	95-1644600	501(C)(3)	5,000.	0.			GENERAL DONATIONS		
ENTER FOR DEAF-BLIND PERSONS									
306 WEST LINCOLN AVENUE									
EST ALLIS, WI 53219	39-1491836	501(C)(3)	5,000.	0.			GENERAL DONATIONS		
,,									
HABAD OF DOWNTOWN, LTD.									
.O. BOX 510525									
ILWAUKEE, WI 53203	39-1672482	501(C)(3)	34,800.	0.			GENERAL DONATIONS		
HABAD STUDENT CENTER AT U OF M									
121 UNIVERSITY AVENUE									
INNEAPOLIS, MN 55414	27-2057339	501(C)(3)	12,500.	0.			GENERAL DONATIONS		
			, , , , , , , , , , , , , , , , , , , ,						
HABAD-LUBAVITCH									
70 EASTERN PARKWAY									
BROOKLYN, NY 11213	11-3587172	501(C)(3)	136,471.	Ο.			GENERAL DONATIONS		

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Part II Continuation of Grants and Other A	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sche	edule I (Form 990), Pa	urt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
HARLIE FOUNDATION TO HELP CURE							
EDIATRIC EPILEPSY - 515 OCEAN							
VENUE, NO. 602N - SANTA MONICA,							
A 90402	27-3778357	501(C)(3)	5,000.	0.			GENERAL DONATIONS
HILDREN'S HOSPITAL OF WISCONSIN							
OUNDATION, INC P.O. BOX 1997 -							
ILWAUKEE, WI 53201	39-1500075	501(C)(3)	128,450.	0.			GENERAL DONATIONS
UTI DEN'S HOSDIMAL OF MISSONSIN							
HILDREN'S HOSPITAL OF WISCONSIN,							
NC P.O. BOX 1997 - MILWAUKEE,	20 0012522	F(1/q)/2	6 000	0			GENERAL DONASTONG
	39-0812532	501(C)(3)	6,000.	0.			GENERAL DONATIONS
LAL-THE NATIONAL JEWISH CENTER							
OR LEARNING AND LEADERSHIP - 440							
ARK AVENUE SOUTH, 4TH FLOOR - NEW			15 000				
ORK, NY 10016	23-7390358	501(C)(3)	15,000.	0.			GENERAL DONATIONS
COA YOUTH & FAMILY CENTER							
009 EAST NORTH AVENUE							
ILWAUKEE, WI 53212	39-0806339	501(C)(3)	213,250.	0.			GENERAL DONATIONS
OACHELLA VALLEY REPERTORY THEATRE							
9-930 HIGHWAY 111, SUITE 116							
,	95-4304295	$F(1/\alpha)/2$	5,000.	Ο.			GENERAL DONATIONS
ANCHO MIRAGE, CA 92270	95-4304295	501(C)(3)	5,000.	υ.			GENERAL DONATIONS
OLLEGE OF THE DESERT FOUNDATION							
3-500 MONTEREY AVENUE							
ALM DESERT, CA 92260	95-3829219	501(C)(3)	12,000.	0.			GENERAL DONATIONS
COMMUNITY ADVOCATES, INC.							
,							
28 NORTH JAMES LOVELL STREET	20 1040400	F(1/a)/2	20.000	0			CENEDAL DONAUTONO
ILWAUKEE, WI 53233	39-1249426	DUT(C)(3)	20,000.	0.			GENERAL DONATIONS
COMMUNITY PARTNERS							
000 ALAMEDA STREET, NO. 240							
OS ANGELES, CA 90012	95-4302067	501(C)(3)	5,000.	٥.			GENERAL DONATIONS

## Schedule I (Form 990) THE MILWAUKEE JEWISH FEDERATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATION AGUDAS ACHIM CHABAD							
2233 WEST MEQUON ROAD							
MEQUON, WI 53092	39-1735636	501(C)(3)	46,381.	0.			GENERAL DONATIONS
- /							
CONGREGATION BAIS TORAH							
1037 EAST 13TH STREET							
BROOKLYN, NY 11230	11-2647410	501(C)(3)	20,000.	0.			GENERAL DONATIONS
CONGREGATION BETH ISRAEL NER TAMID							
6880 NORTH GREEN BAY AVENUE							
MILWAUKEE, WI 53209	39-0878010	501(C)(3)	273,052.	0.			GENERAL DONATIONS
CONGREGATION BETH JEHUDAH							
3100 NORTH 52ND STREET		$E_{01}(a)(2)$	121 646	0			CENEDAL DONATIONS
MILWAUKEE, WI 53216		501(C)(3)	131,646.	0.			GENERAL DONATIONS
CONGREGATION CNESSES ISRAEL							
815 SOUTH JEFFERSON STREET							
GREEN BAY, WI 54301		501(C)(3)	5,280.	0.			GENERAL DONATIONS
,							
CONGREGATION EMANU-EL B'NE							
JESHURUN - 2020 WEST BROWN DEER							
ROAD - RIVER HILLS, WI 53217	39-0863230	501(C)(3)	216,144.	0.			GENERAL DONATIONS
CONGREGATION SHEARITH ISRAEL							
9401 DOUGLAS AVENUE							
DALLAS, TX 75225	75-0976060	501(C)(3)	5,500.	0.			GENERAL DONATIONS
CONGREGATION SINAI							
8223 NORTH PORT WASHINGTON ROAD	20 0802407	F01(a)(2)	101 050	0			DENERAL DONATIONS
MILWAUKEE, WI 53217	39-0892487	DUT(C)(3)	191,058.	0.			GENERAL DONATIONS
DALLAS JEWISH COMMUNITY FOUNDATION							
12700 HILLCREST ROAD, SUITE 201							
		501(C)(3)				1	

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DICKINSON COLLEGE										
P.O. BOX 1773										
CARLISLE, PA 17013	23-1365954	501(C)(3)	45,000.	0.			GENERAL DONATIONS			
DOMINICAN CENTER FOR WOMEN										
2470 WEST LOCUST STREET										
MILWAUKEE, WI 53206	41-1685734	501(C)(3)	5,000.	٥.			GENERAL DONATIONS			
EISENHOWER HEALTH SERVICES 39000 BOB HOPE DRIVE										
RANCHO MIRAGE, CA 92270	33-0617193	501(C)(3)	5,000.	0.			GENERAL DONATIONS			
EMBER FOUNDATION 3553 WEST PETERSON AVENUE CHICAGO, IL 60659	20-8674232	501(C)(3)	6,000.	0.			GENERAL DONATIONS			
	20 0074232	501(0)(3)	0,000.							
FACING ADDICTION WITH NCADD 100 MILL PLAIN ROAD, FLOOR 3										
DANBURY, CT 06811	27-0163591	501(C)(3)	5,000.	٥.			GENERAL DONATIONS			
FEEDING AMERICA EASTERN WISCONSIN 1700 WEST FOND DU LAC AVENUE										
MILWAUKEE, WI 53205	39-1384593	501(C)(3)	21,440.	0.			GENERAL DONATIONS			
FIDELITY INVESTMENTS CHARITABLE GIFT FUND - P.O. BOX 770001 -										
CINCINNATI, OH 45277	11-0303001	501(C)(3)	12,000.	٥.			GENERAL DONATIONS			
FLORENTINE OPERA CO, INC.										
930 EAST BURLEIGH STREET										
MILWAUKEE, WI 53212	39-1098132	501(C)(3)	22,885.	0.			GENERAL DONATIONS			
FOUNDATION FOR INDIVIDUAL RIGHTS										
IN EDUCATION - 510 WALNUT STREET,										
SUITE 1250 - PHILADELPHIA, PA		501 ( 3) ( 3)		_						
19106	04-3467254	POT(C)(3)	7,500.	0.			GENERAL DONATIONS			

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Part II         Continuation of Grants and Other A           (a) Name and address of organization or government	Assistance to Gov (b) EIN	vernments and Orgar (c) IRC section if applicable	nizations in the Un (d) Amount of cash grant	ited States (Sche (e) Amount of non-cash assistance	edule I (Form 990), Pa (f) Method of valuation (book, FMV, appraisal, other)	rt II.) (g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDATION FOR WOMEN & GIRLS WITH BLOOD DISORDERS - P.O. BOX 1358 - MONTCLAIR, NJ 07042	27-2456813	501(C)(3)	10,000.	0.			GENERAL DONATIONS
FRANK P. ZEIDLER CENTER FOR PUBLIC DISCUSSION, INC. – 631 NORTH 19TH STREET – MILWAUKEE, WI 53233	47-2030781	501(C)(3)	5,500.	0.			GENERAL DONATIONS
FRIENDS OF CHABAD OF HEBRON 1178 EAST 23RD STREET BROOKLYN, NY 11210	26-1592721	501(C)(3)	5,000.	0.			GENERAL DONATIONS
PRIENDS OF MAYANOT INSTITUTE, INC. 228 PARK AVENUE SOUTH, SUITE 96553 NEW YORK, NY 10003	11-3348050	501(C)(3)	25,000.	0.			GENERAL DONATIONS
FRIENDS OF THE BOERNER BOTANICAL GARDENS - 9400 BOERNER DRIVE, SUITE 2 - HALES CORNERS, WI 53130	39-1487896	501(C)(3)	5,000.	0.			GENERAL DONATIONS
RIENDS OF THE FORUM P.O. BOX 365 WARTSDALE, NY 10530	20-8943695	501(C)(3)	20,000.	0.			GENERAL DONATIONS
SIGIS PLAYHOUSE, INC. 3685 NORTH PORT WASHINGTON ROAD 70X POINT, WI 53217	46-5021867	501(C)(3)	33,000.	0.			GENERAL DONATIONS
GRAND AVENUE CLUB, INC. 210 EAST MICHIGAN STREET MILWAUKEE, WI 53202	39-1708177	501(C)(3)	61,470.	0.			GENERAL DONATIONS
GREAT NECK SYNAGOGUE 26 OLD MILL ROAD GREAT NECK, NY 11023	11-1729399	501(C)(3)	5,000.	0.			GENERAL DONATIONS

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Part II Continuation of Grants and Other	Assistance to Gov	vernments and Orgar	nizations in the Un	ited States (Sche	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HADAR							
190 AMSTERDAM AVENUE							
NEW YORK, NY 10023	26-4412164	501(C)(3)	7,300.	٥.			GENERAL DONATIONS
HANNA SACKS BAIS YAAKOV HIGH							
SCHOOL - 3021 WEST DEVON AVENUE -							
CHICAGO, IL 60659	36-3827550	501(C)(3)	18,000.	0.			GENERAL DONATIONS
HARRY & ROSE SAMSON FAMILY JEWISH							
COMMUNITY CENTER, INC 6255							
NORTH SANTA MONICA BOULEVARD -							
MILWAUKEE, WI 53217	39-0806234	501(C)(3)	1,900,552.	0.			GENERAL DONATIONS
HEBRON FUND, INC.							
1760 OCEAN AVENUE							
BROOKLYN, NY 11230	11-2623719	501(C)(3)	17,680.	0.			GENERAL DONATIONS
HILLEL INDIANA UNIVERSITY							
730 EAST 3RD STREET							
BLOOMINGTON, IN 47401	20-2804389	501(C)(3)	63,500.	0.			GENERAL DONATIONS
HILLEL MILWAUKEE							
3053 NORTH STOWELL AVENUE							
MILWAUKEE, WI 53211	39-1445185	501(C)(3)	202,608.	0.			GENERAL DONATIONS
	55 1445105	501(0/(5/	202,000.	0.			GENERAL DONATIONS
HILLEL UNIVERSITY OF MINNESOTA							
1521 UNIVERSITY AVENUE SE							
MINNEAPOLIS, MN 55414	41-6038613	501(C)(3)	55,000.	0.			GENERAL DONATIONS
HUNGER TASK FORCE MILWAUKEE							
201 SOUTH HAWLEY COURT							
MILWAUKEE, WI 53214	39-1345847	501(C)(3)	162,915.	0.			GENERAL DONATIONS
INTERFAITH CONFERENCE OF GREATER							
MILWAUKEE - 5409 WEST VLIET STREET	20 1777046	E01(C)(2)	1 - 0 - 0	•			CENEDAL DONASTONO
- MILWAUKEE, WI 53208	39-1777946	DUT(C)(3)	15,850.	٥.			GENERAL DONATIONS

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Part II Continuation of Grants and Other A (a) Name and address of	(b) EIN	vernments and Orgar (c) IRC section	izations in the Un (d) Amount of	ited States (Sche (e) Amount of	edule I (Form 990), Pa ( <b>f)</b> Method of	(g) Description of	(h) Purpose of grant	
organization or government		if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance	
STREET EDUCATION FUND, INC.								
P.O. BOX 66073								
ASHINGTON, DC 20035	20-2777557	501(C)(3)	6,100.	0.			GENERAL DONATIONS	
AZALE'S ART STUDIO								
201 NORTH MARTIN LUTHER KING JR. D	46 1090202	E01(0)(2)	15 000	0.			GENERAL DONAMIONS	
IILWAUKEE, WI 53212	46-1080293	501(C)(3)	15,000.	0.			GENERAL DONATIONS	
JEWISH BEGINNINGS LUBAVITCH								
PRESCHOOL - 6401 NORTH SANTA								
MONICA BOULEVARD - MILWAUKEE, WI			100 500					
3217	39-1732588	501(C)(3)	128,520.	0.			GENERAL DONATIONS	
JEWISH COLORADO								
300 SOUTH DAHLIA STREET, NO. 300								
DENVER, CO 80246	01-0831698	501(C)(3)	99,500.	Ο.			GENERAL DONATIONS	
JEWISH EXPERIENCE OF MADISON								
AILWAUKEE - 3453 NORTH 54TH STREET								
MILWAUKEE, WI 53216	20-2142497	501(C)(3)	11,140.	Ο.			GENERAL DONATIONS	
EWISH FAMILY SERVICE OF THE								
DESERT - 490 SOUTH FARRELL DRIVE,								
SUITE C-208 - PALM SPRINGS, CA								
2262	33-0613083	501(C)(3)	6,200.	Ο.			GENERAL DONATIONS	
2202	33 0013003	501(0)(5)	0,200.					
EWISH FAMILY SERVICES								
300 NORTH JACKSON STREET								
IILWAUKEE, WI 53202	39-0806291	501(C)(3)	983,279.	0.			GENERAL DONATIONS	
ILWAOKEE, WI 55202	55 0000251	501(0/(3/	505,275.	0.			GENERAL DONATIONS	
EWISH FEDERATION OF GREATER LOS								
NGELES - 6505 WILSHIRE BOULEVARD								
- LOS ANGELES, CA 90048	95-6111928	501(C)(3)	29,000.	0.			GENERAL DONATIONS	
LOS ANGELLES, CA JUU40	32-0111320	501(C)(3)	29,000.	υ.			SENERAL DONATIONS	
EWISH FEDERATION OF METROPOLITAN								
CHICAGO - 30 SOUTH WELLS STREET -								
CHICAGO, IL 60606	36-2167761	501(C)(3)	35,000.	0.			GENERAL DONATIONS	

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Part II         Continuation of Grants and Other A           (a) Name and address of organization or government	Assistance to Gov (b) EIN	<b>(c)</b> IRC section if applicable	nizations in the Un (d) Amount of cash grant	ited States (Sche (e) Amount of non-cash assistance	edule I (Form 990), Pa (f) Method of valuation (book, FMV, appraisal, other)	art II.) (g) Description of non-cash assistance	(h) Purpose of grant or assistance	
JEWISH FEDERATION OF PALM BEACH COUNTY – 1 HARVARD CIRCLE, SUITE 100 – WEST PALM BEACH, FL 33409	59-0948696	501(C)(3)	5,000.	0.			GENERAL DONATIONS	
JEWISH FEDERATION OF SO PALM BEACH COUNTY - 9901 DONNA KLEIN GOULEVARD - BOCA RATON, FL 33428	59-1945109	501(C)(3)	71,400.	0.			GENERAL DONATIONS	
JEWISH FEDERATION OF SOUTHERN ARIZONA – 3718 EAST RIVER ROAD, SUITE 100 – TUCSON, AZ 85718	86-0096795	501(C)(3)	28,500.	0.			GENERAL DONATIONS	
JEWISH FEDERATION OF THE DESERT 59-710 HIGHWAY 111 RANCHO MIRAGE, CA 92270	23-7211881	501(C)(3)	25,250.	0.			GENERAL DONATIONS	
JEWISH FEDERATIONS OF NORTH AMERICA, INC. – 25 BROADWAY, SUITE 1700 – NEW YORK, NY 10004	13-1624240	501(C)(3)	271,708.	0.			GENERAL DONATIONS	
VEWISH HOME & CARE CENTER FOUNDATION - 1414 NORTH PROSPECT AVENUE - MILWAUKEE, WI 53202	39-1555857	501(C)(3)	420,738.	0.			GENERAL DONATIONS	
VEWISH NATIONAL FUND 12 EAST 69TH STREET NEW YORK, NY 10021	13-1659627	501(C)(3)	56,160.	0.			GENERAL DONATIONS	
YEWISH UNITED FUND OF METRO CHICAGO – 30 SOUTH WELLS STREET – CHICAGO, IL 60606	36-2167034	501(C)(3)	7,200.	0.			GENERAL DONATIONS	
JEWISH YOUTH FOUNDATION 3825 NORTH LAKE DRIVE 41LWAUKEE, WI 53217	39-1819245	501(C)(3)	23,360.	0.			GENERAL DONATIONS	

origanization or government     If applicable     icash grant     inon-cash assistance     ivaluation (assistance     non-cash assistance     ivaluation (aspirated, other)       JOINSSON CANCER CENTER FOUNDATION = 550 LOUTS FACOR BUILDIN LOG ANGELES, CA 90055     95-2242757     501(C)(3)     10,000.     0.     External     External       RNOW THYGELF     95-2242757     501(C)(3)     10,000.     0.     External     External       RNOW THYGELF     27-1255826     501(C)(3)     32,500.     0.     External     DONATIONE       LACUNA LOFT     323 Extool (C)(3)     5,000.     0.     External     DONATIONE       LACUNA LOFT     323 Extool (C)(3)     5,000.     0.     External     DONATIONE       L'CIALIN CHAPEUT MORTHENDRE     81-4807474     501(C)(3)     12,850.     0.     External     DONATIONE       LEGATUS     81-4807474     501(C)(3)     12,850.     0.     External     DONATIONE       LIGUATUS     81-4807474     501(C)(3)     11,000.     0.     External     DONATIONE       LIGUATUS     20-1671617     501(C)(3)     11,000.     0.     External     DONATIONE       LIGUATUS     39-1170927     501(C)(3)     11,000.     0.     External     DONATIONE       LIGUATUS     39-1170927			SH FEDERATI			/=		39-0806312 Pag		
-950 LOUIS FACTOR BUILDING OG ANGLES, CA 9095595-2242757501(C)(3)10,000.0.DENERAL DONATIONSNOW THYSELP 1512 NORTH FORK WASHINGTON ROAD EQUON, WI 5309227-1255926501(C)(3)32,500.0.DENERAL DONATIONSACUNA LOFT 333 BRADMAY AKLAND, CA 9461247-3741634501(C)(3)5,000.0.DENERAL DONATIONS'CHAIM CHAVERUT NORTHSHORE 52 MEST AURUN PATH LANE AYSIDE, WI 5321747-3741634501(C)(3)12,850.0.DENERAL DONATIONSEGATUS 10. NARDOR, MI 4610620-1671617501(C)(3)12,850.0.DENERAL DONATIONSUEAVITCH OF WISCONSIN 109 NORTH LAKE DRIVE SOID GO GRAMD AVENUE AINT FAUL, MI 5510541-0693962501(C)(3)10,000.0.CALBESTER COLLEGE 600 GRAMD AVENUE AINT FAUL, MI 5510541-0693962501(C)(3)5,000.0.DENERAL DONATIONSARCUEST UNIVERSITY LAN SCHOOL 125 WEST AURICEN SCHOL 125 WEST FLANK COURT, SUTTE 200 ARMATCS, MI 55226639-1543541501(C)(3)18,700.0.DENERAL DONATIONSARQUESTE UNIVERSITY LAW SCHOOL 125 WEST FLANK COURT, SUTTE 200 ARMATCS, MI 55226639-1543541501(C)(3)18,700.0.DENERAL DONATIONSARQUESTE UNIVERSITY LAW SCHOOL 	(a) Name and address of		(c) IRC section	(d) Amount of	<b>(e)</b> Amount of non-cash	<b>(f)</b> Method of valuation (book, FMV,	(g) Description of	(h) Purpose of grant or assistance		
3-350 LOUIS PACTOR BUILDING OSE ANGLES, CA 9009595-224275791(C)(3)10,000.0.DEMERAL DONATIONSNOW THYSELP LISI NORTH PORT WASHINGTON ROAD AEQUON, WI 5309227-1255826501(C)(3)32,500.0.DEMERAL DONATIONSACUNA LOFT 3233 BROADWAY DARLAND, CA 9461247-374163401(C)(3)5,000.0.DEMERAL DONATIONS'CHAIM CHAVERUT NORTHSHORE 525 WEST AUTOM PARTH LANE SARSIDE, WI 5321781-480747401(C)(3)12,850.0.DEMERAL DONATIONS'COALM CHAVERUT NORTHSHORE 525 WEST AUTOM PARTH LANE SARSIDE, WI 5321781-480747401(C)(3)12,850.0.DEMERAL DONATIONS'COALM CHAVERUT NORTHSHORE 	IONSSON CANCER CENTER FOUNDATION									
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ARQUETTE UNIVERSITY LAW SCHOOL 215 WEST MICHIGAN STREET	•	39-1543541	501(C)(3)	18 700	n			GENERAL DONATIONS		
215 WEST MICHIGAN STREET		55 1545541		10,700.				Service South Ford		
215 WEST MICHIGAN STREET	AROUETTE UNIVERSITY LAW SCHOOL									
ILWAUKEE, WI 53233 39-0806251 501(C)(3) 25,100. 0. GENERAL DONATIONS		39-0806251	501(C)(3)	25,100.	^			GENERAL DONATIONS		

## Schedule I (Form 990) THE MILWAUKEE JEWISH FEDERATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

39-0806312 Page 1

(a) Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MCCALLUM THEATRE							
73000 FRED WARING DRIVE							
PALM DESERT, CA 92260	95-2834871	501(C)(3)	50,440.	0.			GENERAL DONATIONS
	55 2051071	501(0)(3)					
MEDICAL COLLEGE OF WISCONSIN							
8701 WATERTOWN PLANK ROAD							
WAUWATOSA, WI 53226	39-0806261	501(C)(3)	15,450.	0.			GENERAL DONATIONS
			,				
MEMORIAL SLOAN KETTERING CANCER							
CENTER - 1275 YORK AVENUE - NEW							
YORK, NY 10021	13-1924236	501(C)(3)	20,500.	0.			GENERAL DONATIONS
MEQUON JEWISH PRESCHOOL, INC.							
11112 NORTH CROWN COURT							
MEQUON, WI 53092	39-1966107	501(C)(3)	7,800.	0.			GENERAL DONATIONS
META HOUSE, INC.							
2625 NORTH WEIL STREET							
MILWAUKEE, WI 53212	39-1017822	501(C)(3)	6,200.	0.			GENERAL DONATIONS
MICAH							
2821 NORTH VEL PHILLIPS AVENUE, SUI							
MILWAUKEE, WI 53212	39-1627853	501(C)(3)	11,000.	٥.			GENERAL DONATIONS
MIDWEST ATHLETES AGAINST CHILDHOOD							
CANCER, INC 10000 INNOVATION							
DRIVE, SUITE 135 - MILWAUKEE, WI							
53226	39-1270290	501(C)(3)	40,600.	0.			GENERAL DONATIONS
MILWAUKEE ALLIANCE FOR JEWISH							
RECONNECTION (MAJOR) - 3322 NORTH							
51 BOULEVARD - MILWAUKEE, WI 53216	80-0207872	501(C)(3)	9,750.	0.			GENERAL DONATIONS
MILWAUKEE ART MUSEUM, INC.							
626 EAST WISCONSIN AVENUE							
MILWAUKEE, WI 53202	39-0806316	501(C)(3)	67,631.	0.			GENERAL DONATIONS

### Schedule | (Form 990) THE MILWAUKEE JEWISH FEDERATION, INC.

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Part II Continuation of Grants and Other	Assistance to Gov	vernments and Orgar	nizations in the Un	ited States (School	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILWAUKEE BALLET COMPANY, INC. 504 WEST NATIONAL AVENUE							
MILWAUKEE, WI 53204	39-1134735	501(C)(3)	11,050.	0.			GENERAL DONATIONS
MILWAUKEE CENTER FOR INDEPENDENCE 2020 WEST WELLS STREET MILWAUKEE, WI 53233	39-0806257	501(C)(3)	32,773.	0.			GENERAL DONATIONS
MILWAUKEE COLLEGE PREPARATORY SCHOOL – 2449 NORTH 36TH STREET – MILWAUKEE, WI 53210	39-1881295	501(C)(3)	10,550.	0.			GENERAL DONATIONS
MILWAUKEE INSTITUTE OF ART & DESIGN, INC 273 EAST ERIE STREET - MILWAUKEE, WI 53202	39-1201561	501(C)(3)	30,250.	0.			GENERAL DONATIONS
MILWAUKEE JEWISH DAY SCHOOL 6401 NORTH SANTA MONICA BOULEVARD MILWAUKEE, WI 53217	39-1384843	501(C)(3)	1,017,361.	0.			GENERAL DONATIONS
MILWAUKEE JEWISH FREE LOAN ASSOCIATION - 409 EAST SILVER SPRING DRIVE - MILWAUKEE, WI 53217	26-4557997	501(C)(3)	14,050.	0.			GENERAL DONATIONS
MILWAUKEE PBS (MPTV 10/36, WMVS, WMVT) – P.O. BOX 88401 – MILWAUKEE, WI 53288	39-1341603	501(C)(3)	11,730.	0.			GENERAL DONATIONS
MILWAUKEE PUBLIC MUSEUM, INC. 800 WEST WELLS STREET MILWAUKEE, WI 53233	39-1723105	501(C)(3)	9,265.	0.			GENERAL DONATIONS
MILWAUKEE REPERTORY THEATER, INC. 108 EAST WELLS STREET MILWAUKEE, WI 53202	39-0946025	501(C)(3)	15,950.	0.			GENERAL DONATIONS

## Schedule I (Form 990) THE MILWAUKEE JEWISH FEDERATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILWAUKEE SYMPHONY ORCHESTRA							
1101 NORTH MARKET STREET, SUITE 100							
MILWAUKEE, WI 53202	39-6023436	501(C)(3)	88,550.	0.			GENERAL DONATIONS
,			,	-			
MILWAUKEE URBAN LEAGUE							
435 WEST NORTH AVENUE							
MILWAUKEE, WI 53208	39-0826861	501(C)(3)	25,500.	0.			GENERAL DONATIONS
MILWAUKEE YOUTH SYMPHONY							
ORCHESTRA, INC 325 WEST WALNUT							
STREET - MILWAUKEE, WI 53212	39-0973594	501(C)(3)	14,850.	0.			GENERAL DONATIONS
NATIONAL BRAIN TUMOR SOCIETY, INC.							
55 CHAPEL STREET, SUITE 200							
NEWTON, MA 02458	04-3068130	501(C)(3)	5,000.	0.			GENERAL DONATIONS
NATIONAL MULTIPLE SCLEROSIS							
SOCIETY - WI CHAPTER - 1120 JAMES							
DRIVE, SUITE A - HARTLAND, WI							
53029	13-5661935	501(C)(3)	6,600.	0.			GENERAL DONATIONS
NELL LEE COMMINIENT DEVELODMENT							
NEU-LIFE COMMUNITY DEVELOPMENT, INC 2014 WEST NORTH AVENUE -							
MILWAUKEE, WI 53205	39-1805861	501(C)(3)	5,000.	0.			GENERAL DONATIONS
MILWROKEE, WI 55205	59-1005001	501(0)(5)	5,000.	0.			GENERAL DONATIONS
NEW CONCEPT SELF DEVELOPMENT							
CENTER - 1531 WEST VLIET STREET -							
MILWAUKEE, WI 53205	39-1220236	501(C)(3)	10,450.	0.			GENERAL DONATIONS
NEW DIRECTIONS FOR PEOPLE WITH			,	<b>```</b>			
DISABILITIES - 5276 HOLLISTER							
AVENUE, NO. 207 - SANTA BARBARA,							
CA 93111	77-0147768	501(C)(3)	87,426.	0.			GENERAL DONATIONS
		-	, , ,				
NEW URBAN ARTS							
705 WESTMINSTER STREET							
PROVIDENCE, RI 02903	05-0498654	501(C)(3)	5,000.	Ο.			GENERAL DONATIONS

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Part II Continuation of Grants and Other A (a) Name and address of organization or government	Assistance to Gov (b) EIN	(c) IRC section (c) IRC section if applicable	nizations in the Un (d) Amount of cash grant	ited States (Sche (e) Amount of non-cash assistance	edule I (Form 990), Pa (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK UNIVERSITY							
726 BROADWAY, 2ND FLOOR							
NEW YORK, NY 10003	13-5562308	501(C)(3)	11,000.	0.			GENERAL DONATIONS
NEXT ACT THEATRE							
.O. BOX 394							
IILWAUKEE, WI 53201	39-1553360	501(C)(3)	10,100.	0.			GENERAL DONATIONS
NEXT DOOR FOUNDATION, INC. 2545 NORTH 29TH STREET							
MILWAUKEE, WI 53210	39-1162969	501(C)(3)	8,000.	0.			GENERAL DONATIONS
NICOLET HIGH SCHOOL FOUNDATION 5701 NORTH JEAN NICOLET ROAD							
IILWAUKEE, WI 53217	39-1528691	501(C)(3)	7,010.	0.			GENERAL DONATIONS
NORTHERN SKY THEATER P.O. BOX 273							
ISH CREEK, WI 54212	39-1666391	501(C)(3)	6,500.	0.			GENERAL DONATIONS
IORTHWESTERN UNIVERSITY 201 DAVIS STREET							
WANSTON, IL 60208	36-2167817	501(C)(3)	102,773.	Ο.			GENERAL DONATIONS
DHOLEI YOSEF YITZCHAK LUBAVITCH .4100 WEST 9 MILE ROAD							
DAK PARK, MI 48237	38-3253099	501(C)(3)	14,000.	0.			GENERAL DONATIONS
DHR HATORAH, INC. 1020 NORTH GREEN BAY AVENUE							
LENDALE, WI 53209	74-2986109	501(C)(3)	5,763.	0.			GENERAL DONATIONS
OPERATION DREAM, INC. 555 NORTH RIVERCENTER DRIVE, SUITE							
ILWAUKEE, WI 53212	26-1455938	501(C)(3)	27,100.	Ο.			GENERAL DONATIONS

## Schedule I (Form 990) THE MILWAUKEE JEWISH FEDERATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
DRLANDO TORAH ACADEMY, INC.							
8651 COMMODITY CIRCLE							
ORLANDO, FL 32819	27-2575267	501(C)(3)	5,280.	٥.			GENERAL DONATIONS
· · · · · · · · · · · · · · · · · · ·							
OUR NEXT GENERATION							
3421 WEST LISBON AVENUE							
MILWAUKEE, WI 53208	39-1761838	501(C)(3)	115,250.	0.			GENERAL DONATIONS
PALM SPRINGS ART MUSEUM							
101 MUSEUM DRIVE							
PALM SPRINGS, CA 92263	95-1809576	501(C)(3)	8,315.	0.			GENERAL DONATIONS
PALM SPRINGS FRIENDS OF THE							
PHILHARMONIC - P.O. BOX 12770 -							
PALM DESERT, CA 92255	23-7369948	501(C)(3)	6,610.	0.			GENERAL DONATIONS
TRIM DESERT, CR 92233	23 7305540	501(0/(3)	0,010.	· · ·			GENERAL DONATIONS
PARK SYNAGOGUE							
27500 SHAKER BOULEVARD							
PEPPER PIKE, OH 44124	34-0714533	501(C)(3)	21,486.	٥.			GENERAL DONATIONS
			,				
PARTNERS BRIDGING THE DIGITAL							
DIVIDE - 2S475 RIVERSIDE AVENUE -							
WARRENVILLE, IL 60555	47-3424954	501(C)(3)	7,500.	٥.			GENERAL DONATIONS
PASTORS UNITED COMMUNITY ADVOCACY							
2803 NORTH TEUTONIA AVENUE							
MILWAUKEE, WI 53206	90-0947280	501(C)(3)	11,200.	0.			GENERAL DONATIONS
PLANNED PARENTHOOD OF WISCONSIN,							
INC 302 NORTH JACKSON STREET -		501 ( 3) ( 3)		_			
MILWAUKEE, WI 53202	39-0863391	501(C)(3)	34,315.	0.			GENERAL DONATIONS
PROJECT RETURN							
2821 VEL R. PHILLIPS AVENUE, NO. 22							
MILWAUKEE, WI 53212	39-1411980	501(C)(3)	5,000.	0.			GENERAL DONATIONS
ALLMIONEE, WI JJZIZ	0.02 1411930	501(0)(5)	3,000.	U			PURENT DONALIONS

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Part II Continuation of Grants and Other A	Assistance to Gov	vernments and Orgar	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
QUANTUM LEEP ACADEMY BOOSTERS							
1447 WEST MONTROSE							
CHICAGO, IL 60613	30-0281785	501(C)(3)	30,000.	0.			GENERAL DONATIONS
RAMAH IN THE ROCKIES							
300 SOURTH DAHLIA STREET, NO. 205							
DENVER, CO 80246	20-4078988	501(C)(3)	149,000.	٥.			GENERAL DONATIONS
READING & MATH, INC.							
1200 WASHINGTON AVENUE SOUTH, SUITE							
MINNEAPOLIS, MN 55415	47-2306902	501(C)(3)	7,500.	٥.			GENERAL DONATIONS
RENAISSANCE THEATERWORKS, INC.							
158 NORTH BROADWAY	20.4502605						
MILWAUKEE, WI 53202	39-1783607	501(C)(3)	7,934.	0.			GENERAL DONATIONS
ROCK AND ROLL HALL OF FAME AND							
MUSEUM, INC 1100 ROCK AND ROLL							
BOULEVARD - CLEVELAND, OH 44114	34-1520995	501(C)(3)	13,500.	0.			GENERAL DONATIONS
ROHR FAMILY CHABAD AT THE	51 1520555	501(0)(0)	10,000.				
UNIVERSITY OF WISCONSIN-MADISON -							
223 WEST GILMAN STREET - MADISON,							
wi 53703	39-1732644	501(C)(3)	6,380.	٥.			GENERAL DONATIONS
RUACH, INC.							
6815 WEST CAPITOL DRIVE, SUITE 302							
MILWAUKEE, WI 53216	20-3268560	501(C)(3)	36,680.	٥.			GENERAL DONATIONS
SECUREFUTURES (MAKE A DIFFERENCE)							
710 NORTH PLANKINTON AVENUE, SUITE							
MILWAUKEE, WI 53203	20-5203533	501(C)(3)	30,250.	0.			GENERAL DONATIONS
SHALOM HARTMAN INSTITUTE OF NORTH							
AMERICA - 475 RIVERSIDE DRIVE,							
SUITE 1450 - NEW YORK, NY 10115	13-3014387	501(C)(3)	10,100.	0.			GENERAL DONATIONS
CTIDI 1400 - NEW TORK, NI TOTO	T2-2014201		1 10,100.	υ.			PENERAL DONATIONS

## Schedule I (Form 990) THE MILWAUKEE JEWISH FEDERATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SIERRA CLUB FOUNDATION							
2101 WEBSTER STREET, SUITE 1250							
DAKLAND, CA 94612	94-6069890	501 (C) (3)	5,775.	0.			GENERAL DONATIONS
	51 0005050	561(6)(6)	5,,,,5.				
SKYLIGHT MUSIC THEATRE CORPORATION							
158 NORTH BROADWAY							
MILWAUKEE, WI 53202	39-0975374	501(C)(3)	10,240.	0.			GENERAL DONATIONS
,			,				
SOCIAL GOOD FUND							
12651 SAN PABLO AVENUE, UNIT 5473							
RICHMOND, CA 94805	46-1323531	501(C)(3)	25,000.	Ο.			GENERAL DONATIONS
SOUTHERN CALIFORNIA EDUCATION FUND							
P.O. BOX 151495							
LOS ANGELES, CA 90015	95-3713168	501(C)(3)	5,000.	0.			GENERAL DONATIONS
SOUTHERN POVERTY LAW CENTER							
400 WASHINGTON AVENUE							
MONTGOMERY, AL 36104	63-0598743	501(C)(3)	14,250.	0.			GENERAL DONATIONS
ST. OLAF COLLEGE							
1520 SAINT OLAF AVENUE							
NORTHFIELD, MN 55057	41-0693979	501(C)(3)	5,000.	0.			GENERAL DONATIONS
SUSAN G. KOMEN SE WISCONSIN							
2025 WEST OKLAHOMA AVENUE, SUITE 11	76 1035000	F01(a)(2)	10 500	•			
MILWAUKEE, WI 53215	75-1835298	DUT(C)(3)	12,500.	0.			GENERAL DONATIONS
TBEY ARTS CENTER							
2266 NORTH PROSPECT AVENUE, SUITE 3							
MILWAUKEE, WI 53202	02-0739623	501(C)(3)	5,000.	0.			GENERAL DONATIONS
ALLMANNE, MI 55202	02 0133023	501(0)(5)	5,000.	0.			SEVENCE DOWATIONS
TEMPLE EMANUEL							
10101 CONNECTICUT AVENUE							
						1	1

## Schedule I (Form 990) THE MILWAUKEE JEWISH FEDERATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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TEMPLE MENORAH OF MILWAUKEE							
WISCONSIN - 9363 NORTH 76TH STREET							
- MILWAUKEE, WI 53223	39-1016320	501(C)(3)	25,879.	0.			GENERAL DONATIONS
	55 1010520	501(0)(0)	20,075.				
TEN CHIMNEYS FOUNDATION, INC.							
P.O. BOX 225							
GENESEE DEPOT, WI 53127	39-1862290	501(C)(3)	5,000.	0.			GENERAL DONATIONS
THE BARARA SINATRA CHILDREN'S				- •			
CENTER AT EISENHOWER - 39000 BOB							
HOPE DRIVE - RANCHO MIRAGE, CA							
92270	33-0136550	501(C)(3)	15,120.	0.			GENERAL DONATIONS
			,				
THE CLAYCO FOUNDATION							
35 EAST WACKER DRIVE, SUITE 1300							
CHICAGO, IL 60601	47-1330583	501(C)(3)	5,000.	0.			GENERAL DONATIONS
THE CONSERVATIVE SYNAGOGUE OF							
WESTPORT - 30 HILLSPOINT ROAD -							
WESTPORT, CT 06880	06-1203591	501(C)(3)	18,000.	٥.			GENERAL DONATIONS
THE LUX CENTER FOR CATHOLIC JEWISH							
STUDIES - 7335 SOUTH HIGHWAY 100 -							
HALES CORNERS, WI 53130	39-1243521	501(C)(3)	5,650.	0.			GENERAL DONATIONS
THE UNION FOR REFORM JUDAISM							
633 THIRD AVENUE							
NEW YORK, NY 10017	13-1663143	501(C)(3)	272,051.	0.			GENERAL DONATIONS
TIKKUN HA-IR OF MILWAUKEE							
P.O. BOX 090287							
MILWAUKEE, WI 53209	77-0596241	501(C)(3)	28,524.	0.			GENERAL DONATIONS
TORAH ACADEMY OF MILWAUKEE HIGH							
SCHOOL - 6800 NORTH GREEN BAY							
AVENUE - GLENDALE, WI 53209	93-0869475	501(C)(3)	28,565.	0.			GENERAL DONATIONS

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Part II Continuation of Grants and Other A (a) Name and address of organization or government	Assistance to Gov (b) EIN	(c) IRC section if applicable	nizations in the Un (d) Amount of cash grant	ited States (Sche (e) Amount of non-cash assistance	dule I (Form 990), Pa <b>(f)</b> Method of valuation (book, FMV, appraisal, other)	rt II.) (g) Description of non-cash assistance	(h) Purpose of grant or assistance
FORAH LEARNING ENRICHMENT, INC.							
137-12 73RD TERRACE							
LUSHING, NY 11367	83-1104863	501(C)(3)	12,500.	0.			GENERAL DONATIONS
TREEPEOPLE							
2601 MULHOLLAND DRIVE							
EVERLY HILLS, CA 90210	23-7314838	501(C)(3)	7,500.	Ο.			GENERAL DONATIONS
TUFTS UNIVERSITY							
19 BOSTON AVENUE							
EDFORD, MA 02155	04-2103634	501(C)(3)	5,000.	0.			GENERAL DONATIONS
NITE AMERICA INSTITUTE							
000 EAST EVANS AVENUE, NO. 1-121							
ENVER, CO 80222	27-3001286	501(C)(3)	6,000.	Ο.			GENERAL DONATIONS
NITED COMMUNITY CENTER, INC.							
.028 SOUTH 9TH STREET							
ILWAUKEE, WI 53204	39-1146191	501(C)(3)	10,000.	0.			GENERAL DONATIONS
NITED PERFORMING ARTS FUND							
01 WEST WISCONSIN AVENUE, SUITE 60							
ILWAUKEE, WI 53203	39-6100399	501(C)(3)	59,460.	Ο.			GENERAL DONATIONS
,				••			
NITED WAY OF GREATER MILWAUKEE							
25 WEST VINE STREET							
ILWAUKEE, WI 53212	39-0806190	501(C)(3)	142,885.	0.			GENERAL DONATIONS
NEWEDGEWY OF OUTO SO DEVILOSING							
NIVERSITY OF CHICAGO RENAISSANCE							
OCIETY - 5811 SOUTH ELLIS AVENUE	26 6100822	F(1/2)/2	E 000	0.			CENEDAL DONATIONS
CHICAGO, IL 60637	36-6109822	501(C)(S)	5,000.	υ.			GENERAL DONATIONS
NIVERSITY OF KANSAS							
.O. BOX 414680							
ANSAS CITY , MO 64141		501(C)(3)	5,000.	0.			GENERAL DONATIONS

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Part II Continuation of Grants and Other A (a) Name and address of organization or government	Assistance to Gov (b) EIN	<b>(c)</b> IRC section if applicable	nizations in the Un (d) Amount of cash grant	ited States (Sche (e) Amount of non-cash assistance	edule I (Form 990), Pa (f) Method of valuation (book, FMV, appraisal, other)	art II.) (g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WISCONSIN CARBONE CANCER CENTER - 600 HIGHLAND AVENUE - MADISON, WI 53792	27-5017177	501(C)(3)	15,000.	0.			GENERAL DONATIONS
INIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVENUE MILWAUKEE, WI 53278	39-0743975	501(C)(3)	231,307.	0.			GENERAL DONATIONS
UNIVERSITY OF WISCONSIN WHITEWATER P.O. BOX 88 WHITEWATER, WI 53190		501(C)(3)	5,000.	0.			GENERAL DONATIONS
NIVERSITY SCHOOL OF MILWAUKEE 2100 WEST FAIRY CHASM ROAD MILWAUKEE, WI 53217	39-6076442	501(C)(3)	7,300.	0.			GENERAL DONATIONS
JS HOLOCAUST MEMORIAL MUSEUM MIDWEST REGION - P.O. BOX 1852 - MIGHLAND PARK, IL 60035	52-1309391	501(C)(3)	73,750.	0.			GENERAL DONATIONS
W HILLEL FOUNDATION FOR JEWISH AMPUS LIFE - 611 LANGDON STREET - NADISON, WI 53703	39-2035142	501(C)(3)	128,614.	0.			GENERAL DONATIONS
WM FOUNDATION, INC. 440 EAST NORTH AVENUE IILWAUKEE, WI 53202	23-7337744	501(C)(3)	95,350.	0.			GENERAL DONATIONS
TERSITI BLOOD RESEARCH INSTITUTE COUNDATION, INC P.O. BOX 2178 - IILWAUKEE, WI 53201	39-1372542	501(C)(3)	5,800.	0.			GENERAL DONATIONS
/ISION FORWARD ASSOCIATION 012 NORTH HAWLEY ROAD MILWAUKEE, WI 53213	39-2040359	501(C)(3)	115,300.	0.			GENERAL DONATIONS

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,	52-1376034	501(C)(3)				
POLICY - 1111 19TH STREET NW,	52-1376034	501(C)(3)				
SUITE 500 - WASHINGTON, DC 20036	52-1376034	501(C)(3)				
SOTIE JOO - MASHINGION, DC 20030			11,000.	0.		GENERAL DONATIONS
,			, ,			
WASHINGTON UNIVERSITY IN ST. LOUIS						
1 BROOKINGS DRIVE						
ST LOUIS, MO 63130	43-0653611	501(C)(3)	63,250.	0.		GENERAL DONATIONS
WISCONSIN CONSERVATORY OF MUSIC						
1584 NORTH PROSPECT AVENUE	20.0015050					
MILWAUKEE, WI 53202	39-0915050	501(C)(3)	6,114.	0.		GENERAL DONATIONS
WISCONSIN INSTITUTE FOR TORAH						
STUDY (WITS) - 3288 NORTH LAKE						
DRIVE - MILWAUKEE, WI 53211	39-1366081	501(C)(3)	114,613.	0.		GENERAL DONATIONS
	55 1500001	501(0)(3)				
WISCONSIN PRESERVATION FUND, INC.						
1000 NORTH WATER STREET, 17TH FLOOR						
, MILWAUKEE, WI 53202	39-1657657	501(C)(3)	5,000.	0.		GENERAL DONATIONS
WOODLAND PATTERN						
720 EAST LOCUST STREET						
MILWAUKEE, WI 53212	39-1332252	501(C)(3)	10,000.	0.		GENERAL DONATIONS
WORLD UNION FOR PROGRESSIVE						
JUDAISM - 633 3RD AVENUE, 7TH						
FLOOR - NEW YORK, NY 10017	13-1930176	501(C)(3)	15,500.	0.		GENERAL DONATIONS
WUWM MILWAUKEE PUBLIC RADIO 89.7						
FM - 111 EAST WISCONSIN AVENUE,		501 ( 2) ( 2)				
SUITE 700 - MILWAUKEE, WI 53202	20-1257939	DUT(C)(3)	34,460.	0.		GENERAL DONATIONS
YESHIVA ELEMENTARY SCHOOL OF						
MILWAUKEE - 5115 WEST KEEFE AVENUE						
- MILWAUKEE, WI 53216	39-1631932	501(C)(3)	183,255.	0.		GENERAL DONATIONS

#### THE MILWAUKEE JEWISH FEDERATION, INC. Schedule I (Form 990)

39-0806312 Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MCA OF METROPOLITAN MILWAUKEE 61 WEST WISCONSIN AVENUE, SUITE 40 IILWAUKEE, WI 53203	39-0806314	501(C)(3)	6,000.	0.			GENERAL DONATIONS
YOUTHAITI, INC. P.O. BOX 170826 MILWAUKEE, WI 53217	26-2061977	501(C)(3)	6,650.	0.			GENERAL DONATIONS

#### 832102 11-02-18

#### Schedule | (Form 990) (2018) THE MILWAUKEE JEWISH FEDERATION, INC.

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.

(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
252	500,000.	0.		
		recipients cash grant	recipients cash grant cash 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:

#### A VOLUNTEER COMMITTEE DETERMINES GRANTS TO BE MADE. MILWAUKEE JEWISH

#### FEDERATION STAFF MONITOR THE ACTUAL DISTRIBUTION OF GRANTS AND THE USAGE OF

THE GRANT FUNDS.



39-0806312

SC	HEDULE J   Compensation Information	I	OMB No. 1	545-004	17		
(Fo	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest		00	40	<u> </u>		
•	Compensated Employees		20	ĬŎ	j –		
_	► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.		Open to	Publ	ic		
	tment of the Treasury al Revenue Service ■ Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction			
Nam	e of the organization E	mployer i	dentificatio	on nur	nber		
	THE MILWAUKEE JEWISH FEDERATION, INC.	39-0	806312	2			
Pa	rt I Questions Regarding Compensation						
				Yes	No		
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 99	90,					
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or charter travel Housing allowance or residence for personal	l use					
Travel for companions Payments for business use of personal residence							
Tax indemnification and gross-up payments							
Discretionary spending account Personal services (such as maid, chauffeur, chef)							
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No." complete Part III to explain							
•	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain						
2	2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?						
2	Indicate which if any of the following the filing experimetion used to establish the companyation of the experimetion						
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization						
	establish compensation of the CEO/Executive Director, but explain in Part III.	10					
	Image: Stability Compensation committee       Image: Stability Compensation committee         Image: Stability Compensation committee       Image: Stability Compensation committee						
	Independent compensation consultant  X Compensation survey or study						
	X       Form 990 of other organizations         X       Approval by the board or compensation committee						
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
•	organization or a related organization:						
а	Receive a severance payment or change-of-control payment?		4a		X		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				X		
с	Participate in, or receive payment from, an equity-based compensation arrangement?				X		
	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:						
	The organization?				X		
b	Any related organization?		<b>5</b> b		X		
	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?		<b>6b</b>		X		
_	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		-		v		
•	not described on lines 5 and 6? If "Yes," describe in Part III		7		X		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract expection described in Pagulations spaction 52 4058 4(a)(2)2 If "Yes " describe in Part III				x		
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8				
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in							
	Regulations section 53.4958-6(c)?           For Paperwork Reduction Act Notice, see the Instructions for Form 990.			000	2010		
гпа	יסיר מאבו אטוג הפעונוטוז אנו זטוונב, שב נווב וושנו ענוטוזש וטו דטו ווו ששט.	Sched	ule J (Forn	1 990)	2010		

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) HANNAH ROSENTHAL	(i)	302,665.	0.	0.	29,390.	473.	332,528.	0.
PRESIDENT & CEO (THRU 12/18)	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) THOMAS LINDOW	(i)	160,815.	1,500.	0.	6,518.	1,000.	169,833.	0.
CFO/COO (THRU 5/19)	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CAREN GOLDBERG	(i)	170,693.	0.	0.	7,101.	19,025.	196,819.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) STEPHANIE WAGNER	(i)	141,749.	0.	0.	5,827.	7,242.	154,818.	0.
VP OF STRATEGIC INITIATIVE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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# 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.

SCHEDULE K (Form 990)       Supplemental Information on Tax-Exempt Bonds         Department of the Treasury Internal Revenue Service       Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.         Department of the Treasury Internal Revenue Service       Attach to Form 990.										OMB No. 1545-0047 2018 Open to Public Inspection				
Nam	e of the organization THE MILWAU	KEE JEWISH I	FEDERATIO	N, INC.						loyer i 9 – 0			n num	ber
Par	t I Bond Issues S	EE PART VI	FOR COLUM	NS (A) AN	D (F) C	CONTIN	NUATIONS							
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	d (e) Issu	ie price	(f) Descript	ion of purpose	(g) De	efeased	<b>(h)</b> On of is		(i) Po finan	
									Yes	No	Yes	No	Yes	No
(	COLORADO EDUCATIONAL AN	)					PROVIDE	FUNDS TO						
A	CULTURAL FACILITIES AUT	84-0896727	NONE	12/03/12	2 5434	0000.	REFUND T	WO PRIOR		X		x		Х
В														
c														
D														
Par	Part II Proceeds													
	A B C									D				
_1	Amount of bonds retired													
2	Amount of bonds legally defeased													
3	Total proceeds of issue				40,000.									
4														
_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				00,000.					_				
10	Capital expenditures from proceeds				40,000.					_				
<u>11</u>	Other spent proceeds			5,70	00,000.									
12	Other unspent proceeds													
13	Year of substantial completion				1					_				
				Yes	No	Yes	No	Yes	No	_	Yes		No	
14	Were the bonds issued as part of a refunding													
	if issued prior to 2018, a current refunding is			X				<b>├</b> ── <b>│</b>		_				
15	Were the bonds issued as part of a refunding				37									
	issued prior to 2018, an advance refunding i				X			├		_				
16	Has the final allocation of proceeds been ma			X				<u>├</u>						
17	Does the organization maintain adequate bo	oks and records to sup	pport the	v										
	final allocation of proceeds?			Х										

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

### Schedule K (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312

Par	t III Private Business Use								
			Α		В		С		D
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	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?	Х							
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?	Х							
с	Are there any research agreements that may result in private business use of								
	bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		1.20 %		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of								
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		1.20 %		%		%		%
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		%		%		%		%
с	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							
Par	t IV Arbitrage								
			Α		В		C		D
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
2	If "No" to line 1, did the following apply?								
	Rebate not due yet?		X						
	Exception to rebate?		X						
	No rebate due?	Х							
	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							

Page **2** 

### Schedule K (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312

Part IV Arbitrage (Continued)								
	A	λ	E	3	0	;	C	)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?	X					ĺ		
<b>b</b> Name of provider	US BANK N.	Α.						
c Term of hedge	10.0	0000000						
d Was the hedge superintegrated?		Х						
e Was the hedge terminated?		Х						
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the requirements of								
section 148?	X							
Part V Procedures To Undertake Corrective Action								
	A	Α	В		С		D	
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary						i		
closing agreement program if self-remediation isn't available under applicable						i		
regulations?	X							
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instru	ctions					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: COLORADO EDUCATIONAL AND CULTURA	AL FACII	LITIES 2	AUTHORI	TY				
(F) DESCRIPTION OF PURPOSE:								
PROVIDE FUNDS TO REFUND TWO PRIOR ISSUES, ISSUED ON 6/16/05 AND 10/25/07								

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#### SCHEDULE M (Form 990)

### Noncash Contributions

OMB No. 1545-0047 2018

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

ployer	identification	number

#### Emp 39-0806312 THE MILWAUKEE JEWISH FEDERATION, INC. Part I Types of Property (a) (b) (c) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts Form 990, Part VIII, line 1g items contributed Art - Works of art 1 Art - Historical treasures 2 Art - Fractional interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 114 3,841,236.FAIR MARKET VALUE Х 9 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 18 Collectibles Food inventory 19 Drugs and medical supplies 20 Taxidermy \_\_\_\_\_ 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 25 Other ) 26 Other ) 27 Other ► ) ( 28 Other 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement \_\_\_\_\_ 29 0 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for Х exempt purposes for the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. х Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 31

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

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

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Schedule M (Form 990) 2018

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#### Schedule M (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 2

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 M, PART I, COLUMN (B):

#### THE ORGANIZATION TRACKS AND REPORTS THE ACTUAL NUMBER OF CONTRIBUTIONS

RECEIVED.

Schedule M (Form 990) 2018

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

INC.



39-0806312

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

THE MILWAUKEE JEWISH FEDERATION,

SOCIAL, HEALTH AND WELFARE, EDUCATIONAL, RECREATIONAL, CULTURAL, AND

OTHER NEEDS OF GENERAL CONCERN TO THE JEWISH COMMUNITY OF METROPOLITAN

MILWAUKEE.

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

MILWAUKEE, IN ISRAEL, AND THROUGHOUT THE WORLD. IN FULFILLING ITS

MISSION, THE FEDERATION IS COMMITTED TO THE PRINCIPLES OF KLAL YISRAEL

(THE COLLECTIVE UNITY OF THE JEWISH PEOPLE), TZEDAKAH (THE OBLIGATION

TO CARE FOR ONE ANOTHER) AND TIKKUN OLAM (IMPROVING THE SOCIETY IN

WHICH WE LIVE).

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

CYCLE EVENTS THROUGH ARTICLES AND PHOTOGRAPHS, SO AS TO ACT AS A

HISTORY OF THE COMMUNITY, AND MAINTAIN AN ADVERTISING MEDIUM FOR

REACHING THE JEWISH POPULATION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAMS INCLUDE PASSPORT 2 GALILEE AND THE SCHLICHUT PROGRAM,

WHICH PLAY A KEY ROLE IN ENSURING ONGOING CULTURAL AND PERSONAL CONTACT

BETWEEN THE MILWAUKEE JEWISH COMMUNITY AND ISRAEL, WITH A FOCUS ON THE

REGION OF THE SOVEV KINNERET. MILWAUKEE JEWISH FEDERATION PROGRAM

SERVICES ALSO INCLUDE THE COALITION FOR JEWISH LEARNING (CJL), THE

EDUCATION PROGRAM OF THE MILWAUKEE JEWISH FEDERATION. CJL COORDINATES A

DAY SCHOOL SCHOLARSHIP COMMITTEE TO REVIEW APPLICATIONS FOR FINANCIAL

AID AT DAY SCHOOLS AND DISTRIBUTES \$500,000 IN SCHOLARSHIP GRANT

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990 or 990-EZ) (2018)83221110-10-18

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DOLLARS FROM BADER PHILANTHROPIE	lS.
EXPENSES \$ 22,617,147. INCL GRA	ANTS OF \$ 14,824,052. REVENUE \$ 2,139,667.
FORM 990, PART VI, SECTION A, LI	INE 2:
FAMILY RELATIONSHIPS:	
JOAN LUBAR - SUSAN SOLVANG	
CHERYL MOSER - MITCHELL MOSER	
BUSINESS RELATIONSHIP:	
DANIEL BADER - LISA HILLER	
FORM 990, PART VI, SECTION A, LI	INE 6:
ANNUAL MEMBERSHIP SHALL BE GRANI	TED TO ALL JEWISH PERSONS WHO ARE (A) AT
LEAST 13 YEARS OF AGE, AND (B) F	PLEDGE AT LEAST \$18.00 TO THE CORPORATION
DURING SUCH YEAR.	
FORM 990, PART VI, SECTION A, LI	INE 7A:
THE GOVERNANCE/NOMINATING COMMIT	TTEE SHALL SUBMIT TO THE ANNUAL MEETING OF
THE MEMBERS OF THE CORPORATION A	A LIST OF NAMES CHOSEN FROM THE MEMBERSHIP
FOR ELECTION TO THE BOARD OF DIR	RECTORS. ADDITIONAL NAMES MAY BE PLACED IN
NOMINATION UPON THE PETITION OF	AT LEAST TWENTY-FIVE (25) MEMBERS OF THE
CORPORATION, PROVIDED THAT SUCH	PETITION IS RECEIVED BY THE CHAIR OF THE
GOVERNANCE/NOMINATING COMMITTEE	NOT LESS THAN TWENTY (20) DAYS PRIOR TO THE
CORPORATION'S ANNUAL MEETING. NO	TICE OF THE NAMES CHOSEN BY THE
GOVERNANCE/NOMINATING COMMITTEE	AND ANY NAMES SUBMITTED BY PETITION SHALL
	JANT TO THE NOTICE PROVISION IN ARTICLE II,
	)) DAYS PRIOR TO THE CORPORATION'S ANNUAL
MEETING. AT THE ANNUAL MEETING M	
832212 10-10-18	Schedule O (Form 990 or 990-EZ) (2018) 7 4

THE MILWAUKEE JEWISH FEDERATION,

Page **2** 

Employer identification number

39-0806312

INC.

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization	Employer identification number
THE MILWAUKEE JEWISH FEDERATION, INC.	39-0806312
VACANCIES ON THE BOARD. THE NUMBER OF DIRECTORS SHALL BE E	STABLISHED FROM
TIME TO TIME BY THE BOARD. THE NUMBER OF DIRECTORS SHALL B	E NOT LESS THAN
THREE (3) AND NOT MORE THAN THIRTY (30). EACH NEWLY ELECTE	D DIRECTOR SHALL
HOLD OFFICE FOR A TWO (2) YEAR TERM OR UNTIL HIS/HER SUCCE	SSOR SHALL HAVE
BEEN ELECTED. NO DIRECTOR SHALL SERVE MORE THAN THREE (3)	CONSECUTIVE
TERMS, AFTER WHICH HE/SHE SHALL NOT BE ELIGIBLE FOR ELECTION	ON TO THE BOARD
UNTIL AT LEAST ONE (1) YEAR HAS ELAPSED. THIS PROVISION DO	ES NOT APPLY TO
SOMEONE SERVING ON THE BOARD BY VIRTUE OF THEIR POSITION A	S AN OFFICER.

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

THE FORM 990 WILL BE AVAILABLE FOR REVIEW TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

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

THE MILWAUKEE JEWISH FEDERATION DOES REGULARLY AND CONSISTENTLY MONITOR AND ENFORCE COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. SPECIFICALLY, EACH YEAR ALL BOARD MEMBERS ARE PROVIDED A COPY OF THE POLICY AND A STATEMENT TO COMPLETE, SIGN AND RETURN TO THE FEDERATION OFFICE. A COMMITTEE REVIEWS THE STATEMENTS FOR ANY CONFLICTS AND ADDRESSES ANY CONFLICTS.

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

DURING THE 2018 TAX YEAR, THE INCOMING PRESIDENT & CEO'S COMPENSATION WAS

DETERMINED THROUGH THE SEARCH PROCESS. THE BOARD CHAIR WORKED WITH A LAY

SEARCH COMMITTEE AND INDEPENDENT SEARCH FIRM. THE SEARCH FIRM COMPLETED A

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REVIEW OF COMPENSATION LEVELS FOR COMPARABLE POSITIONS NATIONALLY. FOR

OTHER OFFICERS, THE CEO WILL WORK WITH THE SEARCH COMMITTEE AND SEARCH

FIRM, FOLLOWING THE SAME PROCESSES.

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Schedule O (Form 990 or 990-EZ) (2018) Page									
Name of the organization THE MILWAUKEE JEWISH FEDERATION, INC.	Employer identification number 39-0806312								

THE PRESIDENT & CEO'S AND OTHER OFFICERS' COMPENSATION WILL CONTINUE TO BE REVIEWED AND NEGOTIATED BY A COMPENSATION SUBCOMMITTEE OF THE OFFICERS. THE PROCESS WILL OCCUR EVERY 3 YEARS IN TIME WITH THE COMPENSATION CONTRACT RENEWAL.

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

THE AUDITED FINANCIAL STATEMENTS AND ANNUAL REPORT ARE AVAILABLE ON THE MILWAUKEE JEWISH FEDERATION'S WEBSITE. THE ANNUAL REPORT PROVIDES A SUMMARY OF INCOME AND COMMUNITY ALLOCATIONS. THE CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

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

GAIN (LOSS) ON INTEREST RATE SWAP	-467,042.
CHANGE IN TRUST LIABILITIES	-222,475.
TOTAL TO FORM 990, PART XI, LINE 9	-689,517.

SCH	EDULE	R
	1	

## (Form 990)

#### (1 0111 000)

# **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.

OMB No. 1545-0047

2018 Open to Public Inspection

Employer identification number

39-0806312

Department of the Treasury Internal Revenue Service

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

Name of the organization

## THE MILWAUKEE JEWISH FEDERATION, INC.

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

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
MJF HOLDINGS OF MILWAUKEE - 20-1088480 1360 NORTH PROSPECT AVENUE	_		10.000		MILWAUKEE JEWISH
MILWAUKEE, WI 53202	HOUSING	WISCONSIN	16,252.	0.	FEDERATION, INC.
	_				

# 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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section	(f) Direct controlling entity	cont	<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
MJF HOUSING NO 2, INC 39-1853067							
1360 NORTH PROSPECT AVENUE					MILWAUKEE JEWISH		
MILWAUKEE, WI 53202	LOW-INCOME HOUSING	WISCONSIN	501(C)(3)	LINE 12B, II	FEDERATION, INC.	X	
MJF HOUSING NO 3, INC 39-1882504							
1360 NORTH PROSPECT AVENUE					MILWAUKEE JEWISH		
MILWAUKEE, WI 53202	LOW-INCOME HOUSING	WISCONSIN	501(C)(3)	LINE 12B, II	FEDERATION, INC.	X	

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

Schedule R (Form 990) 2018

# Schedule R (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC.

39-0806312 Page 2

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

	· · · · · · · · · · · · · · · · · · ·	,													
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)		j)	(k)			
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Predominant income (related, unrelated, excluded from tax under	Predominant income (related, unrelated, excluded from tax under	Predominant income (related, unrelated, excluded from tax under	ne Share of total S , income er der	Share of end-of-year assets		ortionate itions?	Code V-UBI amount in box 20 of Schedule	Gene mana part	ral or aging ner?	Percentage ownership
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	No				
	1														
	1														
	1														
	1														
										+	$\vdash$				
	1														
	{														
	{														

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.

<b>(a)</b> Name, address, and EIN of related organization	(b) (c) Primary activity (state or foreign		<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	( Sec 512(l contr ent	tion b)(13) rolled tity?
		country)						Yes	No
MJF GOLDA MEIR HOUSING, INC 45-4756528 1360 NORTH PROSPECT AVENUE			MILWAUKEE JEWISH						
MILWAUKEE, WI 53202	HOUSING	WI	FEDERATION,	C CORP	1,345,755.	2,855,451.	100%	X	
	-								
	-								
	-								

# Schedule R (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC.

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

pte: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s I
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		
Gift, grant, or capital contribution to related organization(s)			
Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)			
Loans or loan guarantees by related organization(s)			Ŧ
Dividends from related organization(s)	1f	x	
Sale of assets to related organization(s)	1g		
Purchase of assets from related organization(s)			
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		+
Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)	11		
n Performance of services or membership or fundraising solicitations by related organization(s)			
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	<b>1</b> n		
Sharing of paid employees with related organization(s)			_
Reimbursement paid to related organization(s) for expenses			
Reimbursement paid by related organization(s) for expenses			-
Other transfer of cash or property to related organization(s)	1r	x	
Other transfer of cash or property from related organization(s)		X	

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) MJF GOLDA MEIR HOUSING, INC	F	133,630.	COST
(2) MJF HOUSING NO. 2, INC.	R	1,416,400.	соѕт
(3) MJF HOUSING NO. 3, INC.	R	1,391,400.	соят
<u>(4)</u>			
<u>(5)</u>			
<u>(</u> 6)			

# Schedule R (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC.

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partne 501( org	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h Dispr tior alloca <b>Yes</b>	opor- ate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partn <b>Yes</b>	l or Percel <sup>ing</sup> r? owne	<b>k)</b> entage ership

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 THE MILWAUKEE JEWISH FEDERATION, INC. 39-0806312 Page 5 Part VII Supplemental Information.

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

# PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:

NAME OF RELATED ORGANIZATION:

MJF GOLDA MEIR HOUSING, INC.

DIRECT CONTROLLING ENTITY: MILWAUKEE JEWISH FEDERATION, INC.

Schedule R (Form 990) 2018

832165 10-02-18

Form	990-T	E	Exempt Orga				ax Return	L	OMB No. 1545-0687		
			-	nd proxy tax unde		• • •	T 20 201	~	2010		
		For ca	lendar year 2018 or other tax year					<u>9</u> .	2018		
	tment of the Treasury al Revenue Service	►	► Go to www • Do not enter SSN numbe	rs on this form as it may	be ma			5	Open to Public Inspection for i01(c)(3) Organizations Only		
A [	Check box if address changed		Name of organization ( Check box if name changed and see instructions.) D Employer identification number (Employees' trust, see instructions.)								
B Ex	kempt under section	Print	THE MILWAUK	EE JEWISH FI	EDEF	RATION, INC.			9-0806312		
X	] 501( <b>c</b> )( <b>3</b> ) ] 408(e) 220(e)	or Type		n or suite no. If a P.O. box <b>PROSPECT</b> AVI					ted business activity code structions.)		
	] 408A530(a) ] 529(a)		City or town, state or pro MILWAUKEE ,	vince, country, and ZIP or <b>WI 53202</b>	r foreigi	n postal code		5111	L10		
C Boo	ok value of all assets										
are	229,743,4	15.	<b>F</b> Group exemption num <b>G</b> Check organization typ	e 🕨 🚺 501(c) corp	oration	501(c) trust	401(a)	trust	Other trust		
		•	tion's unrelated trades or l	· · · · · · · · · · · · · · · · · · ·	2	Describe t	he only (or first) un	related			
tra	de or business here 🕨	► <u> </u>	EE STATEMENI	1		. If only one,	complete Parts I-V.	lf more	than one,		
des	scribe the first in the bl	lank spa	ce at the end of the previo	us sentence, complete Pa	rts I an	d II, complete a Schedule	M for each additiona	al trade	or		
	siness, then complete I						F				
			oration a subsidiary in an		nt-subsi	diary controlled group?	► L	Yes	s 🚺 No		
			tifying number of the parer			Talaaba		111	390-5700		
			THOMAS OECHL le or Business Inc			(A) Income	ne number 🕨 ( (B) Expenses	414	(C) Net		
	Gross receipts or sale							'			
	Less returns and allow			c Balance ►	1c						
2			A, line 7)	-	2						
3	Gross profit. Subtract				3						
4 a			h Schedule D)		4a						
			art II, line 17) (attach Forn		4b						
C			sts		4c						
5			ship or an S corporation (a		5						
6	Rent income (Schedul				6						
7	Unrelated debt-finance	ed incor	ne (Schedule E)		7						
8	Interest, annuities, roy	alties, a	nd rents from a controlled	organization (Schedule F)	8						
9			on 501(c)(7), (9), or (17) o	- , ,	9						
10			me (Schedule I)		10			<u> </u>			
11	Advertising income (S	Schedule	e J)		11	244,268.	177,2	65.	67,003.		
12			s; attach schedule)			044 060	100 0	<u> </u>	67 002		
	Total. Combine lines	3 throu	gh 12		13		177,2	65.	67,003.		
Pa			ot Taken Elsewher utions, deductions must				income )				
14								44			
14 15			rectors, and trustees (Sche					14			
15 16								15 16			
17								17			
18	Interest (attach sche	dule) (s	ee instructions)					18			
19								19			
20	Charitable contribution	ons (See	e instructions for limitation	rules)				20			
21	Depreciation (attach	Form 4	562)	,		21					
22			n Schedule A and elsewher					22b			
23								23			
24	Contributions to defe	erred co	mpensation plans					24			
25	Employee benefit pro							25			
26			chedule I)					26			
27	Excess readership co	osts (Sc	hedule J)					27	67,003.		
28	Other deductions (at	tach sch	nedule)					28			
29			14 through 28					29	67,003.		
30			ncome before net operating					30	0.		
31		-	loss arising in tax years be		-	· /		31	<u> </u>		
32			ncome. Subtract line 31 fro					32	0 . Form <b>990-T</b> (2018)		
82370	1 01-09-19 LHA FO	or Paper	work Reduction Act Notic	e, see instructions.	~				FORM 330-1 (2018)		

Form 990-		THE MILWAUKEE JEWI				39-08	06312	Page <b>2</b>
Part		otal Unrelated Business Taxa						16 252
33		f unrelated business taxable income comput					33	16,252.
34		nts paid for disallowed fringes					34	0.002
35		tion for net operating loss arising in tax year				I.W.I. 7	35	8,963.
36		f unrelated business taxable income before s	•					7 200
	lines 3	3 and 34	· · · · · · · · · · · · · · · · · · ·				36	7,289.
37		c deduction (Generally \$1,000, but see line 3					37	1,000.
38		ted business taxable income. Subtract line	-					6,289.
Dart		he smaller of zero or line 36 ax Computation					38	0,209.
39		izations Taxable as Corporations. Multiply	ling 29 by 21% (0.21)				39	1,321.
40		Taxable at Trust Rates. See instructions fo					- 39	1,521.
40			rm 1041)				40	
41							40	
41		tax. See instructions					41	
42		Noncompliant Facility Income. See instruc					42	
43		Add lines 41, 42, and 43 to line 39 or 40, wh					43	1,321.
Part		ax and Payments					44	1,521.
		n tax credit (corporations attach Form 1118;	trusts attach Form 1116)	45	a			
c		al business credit. Attach Form 3800						
		for prior year minimum tax (attach Form 880						
		redits. Add lines 45a through 45d					45e	
46		ct line 45e from line 44					46	1,321.
47	Other t	axes. Check if from: Form 4255	Form 8611 Form 8697 For	rm 8866 「	Other	(attach schedule)	47	
48		<b>ax.</b> Add lines 46 and 47 (see instructions)		_			48	1,321.
49		net 965 tax liability paid from Form 965-A or					49	0.
50 a		ents: A 2017 overpayment credited to 2018				173		
		estimated tax payments						
		posited with Form 8868			c	2,500	-	
		n organizations: Tax paid or withheld at sour			d			
		o withholding (see instructions)			е			
		for small employer health insurance premiur			f			
g	Other of	credits, adjustments, and payments: 🔲 F	orm 2439					
	F	Form 4136 0	ther Total	► <u>50</u>	g			
51	Total p	ayments. Add lines 50a through 50g					51	2,673.
52		ted tax penalty (see instructions). Check if F					52	45.
53	Tax du	e. If line 51 is less than the total of lines 48,	49, and 52, enter amount owed			►	53	
54	Overpa	<b>ayment.</b> If line 51 is larger than the total of l	ines 48, 49, and 52, enter amount overpa		·····	►	54	1,307.
55		he amount of line 54 you want: Credited to		1,30		funded 🕨 🕨	55	0.
Part		tatements Regarding Certain		```		/		
56	-	time during the 2018 calendar year, did the				-		Yes No
		financial account (bank, securities, or other)		-		9		
		Form 114, Report of Foreign Bank and Fina	Incial Accounts. If "Yes," enter the name o	of the forei	gn country			37
	here					0		
57	-	the tax year, did the organization receive a d		r, or transte	eror to, a to	reign trust?		
58		," see instructions for other forms the organi he amount of tax-exempt interest received o	-					
0		ler penalties of perjury, I declare that I have examined		and statemen	nts, and to the	best of my knowl	edge and belie	f, it is true,
Sign	corr	ect, and complete. Declaration of preparer (other than	n taxpayer) is based on all information of which p	preparer has a	any knowledg			
Here			PRES	IDENT	& CE	0		scuss this return with nown below (see
		Signature of officer	Date Title				instructions)?	
	<u> </u>	Print/Type preparer's name	Preparer's signature	Date		Check	if PTIN	
Paid						self- employed		
Prepa	arer <sup> </sup>	BRITTANY MERGEN	BRITTANY MERGEN	03/2	4/20			L656288
Use (		Firm's name <b>&gt; WIPFLI LLP</b>			^	Firm's EIN		-0758449
536 (		PO BOX 870	0					
		Firm's address 🕨 MADISON, 🕅	11 53708-8700			Phone no.	608.27	74.1980
823711 01	1-09-19						F	orm <b>990-T</b> (2018)
			83					

2	Page	3
		_

Schedule A - Cost of Goods	Sold. Enter	method of inven	tory v	aluation 🕨 N/A					
1 Inventory at beginning of year	6	Inventory at end of yea		6					
2 Purchases			Cost of goods sold. Su						
3 Cost of labor				from line 5. Enter here					
4a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (v	vith respect to		Yes	No
<b>b</b> Other costs (attach schedule)				property produced or a					
5 Total. Add lines 1 through 4b					•				
Schedule C - Rent Income (I		Property and	Per		eased	d With Real Prop	erty	)	<u> </u>
(see instructions)						-	-	-	
1. Description of property									
_(1)									
(2)									
(3)									
(4)									
	2. Rent receive	ed or accrued							
(a) From personal property (if the perconduction of	entage of han	of rent for p	ersonal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	<b>3(a)</b> Deductions directly columns 2(a) and	r conne nd 2(b)	cted with the income in (attach schedule)	I
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns 2 here and on page 1, Part I, line 6, column	(A)	►			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)			0.
Schedule E - Unrelated Deb	t-Financed	Income (see	instru	ctions)		3. Deductions directly con	nected	with or allocable	
			2	<ol> <li>Gross income from or allocable to debt-</li> </ol>		to debt-finance	ced pro		
1. Description of debt-fina	anced property			financed property	(a)	Straight line depreciation (b (attach schedule)		( <b>b</b> ) Other deduction (attach schedule)	S
(1)							-		
(2)									
(3)									
(4)									
<ul> <li>4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> <li>5. Average adjusted basis of or allocable to debt-financed property (attach schedule)</li> </ul>			6	by column 5 repor		7. Gross income reportable (column 2 x column 6)		8. Allocable deducti (column 6 x total of co 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
				70		nter here and on page 1, Part I, line 7, column (A).		Enter here and on page Part I, line 7, column (	
Totals				▶		0			0.
Total dividends-received deductions inc	cluded in columr	18			1		•		0.
									••

Form **990-T** (2018)

823721 01-09-19

Form 990-T (2018) THE M	ILWAUKE	<u>E JEW</u>	ISH F	'EDER	ATION,	INC.			<u>39-08</u>	<u>06312</u>	2 Page
Schedule F - Interest,	Annuities,	Royalt						ations	see ins	structions	5)
				Exempt	Controlled C	Organizatio	ons				
1. Name of controlled organization		2. Employer identification number			Net unrelated income oss) (see instructions)		<ol> <li>Total of specified payments made</li> </ol>		5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5
(1)											
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organ				•		.	40				
7. Taxable Income	8. Net unre (see	instructions)		<b>9.</b> lota	l of specified pay made	rments	10. Part of colu in the controll gros	imn 9 tha ling orgar s income	t is included hization's		luctions directly connected income in column 10
(1)											
(2)											
(3)											
(4)											
							Add colur Enter here and line 8,		1, Part I,	Enter he	d columns 6 and 11. ere and on page 1, Part I, line 8, column (B).
<b>Fotals</b>									0.		0
otals Schedule G - Investme	ent Income	of a S	ection 5	501(c)(	7). (9). or	(17) Org	anization		•••	I	
	tructions)				.,, (-,,	,					
<b>1</b> . Des	scription of income				2. Amount o	f income	3. Deduction directly connection (attach scheder)	ected	<b>4.</b> Set- (attach s	asides schedule)	<b>5.</b> Total deductions and set-asides (col. 3 plus col. 4)
(1)											
(2)											
(3)											
(4)											
< /					Enter here and Part I, line 9, c				I		Enter here and on page Part I, line 9, column (B)
[otolo						0.					0
<sup>Totals</sup> Schedule I - Exploited	Exampt A	otivity	Incomo	Othor	Thon Ad		a Incomo				0
(see instr		Clivity	income,	, other	man Au	verusin	y income				
1. Description of exploited activity	2. Gros unrelated bu income fr trade or bus	siness	<b>3.</b> Expedirectly co with prod of unrel business	nnected luction lated	4. Net inco from unrelate business (c minus colun gain, compu throug	d trade or olumn 2 nn 3). If a te cols. 5	5. Gross inco from activity is not unrela business inco	that ted	at attributable to		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
	Enter here a page 1, Pa line 10, co	art I,	Enter here page 1, line 10, c	Part I,							Enter here and on page 1, Part II, line 26.
otals	•	0.		0.							0
Schedule J - Advertis	ing Income	-	structions								
Part I Income From			rted on	a Con	solidated	Basis					
1. Name of periodical		2. Gross dvertising		. Direct	or (loss) (	rtising gain col. 2 minus	5. Circula		6. Read		7. Excess readership costs (column 6 minus column 5 but not more

1. Name of periodical	2. Gross advertising income	<b>3.</b> Direct advertising costs	or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	costs (column 6 minus column 5, but not more than column 4).
(1) WISCONSIN JEWISH						
(2) CHRONICLE	244,268.	177,265.		0.	146,772.	
(3)						
(4)						
Totals (carry to Part II, line (5))	244,268.	177,265.	67,003.		146,772.	67,003.
						Form <b>990-T</b> (2018)

823731 01-09-19

# Form 990-T (2018) THE MILWAUKEE JEWISH FEDERATION, INC.

39-0806312

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

4. Advertising gain or (loss) (col. 2 minus 7. Excess readership costs (column 6 minus 2. Gross advertising 3. Direct 5. Circulation 6. Readership 1. Name of periodical col. 3). If a gain, compute cols. 5 through 7. advertising costs income costs column 5, but not more income than column 4). (1) (2) (3) (4) 244,268. 177,265. 67,003. Totals from Part I ► Enter here and on page 1, Part II, line 27. Enter here and on Enter here and on page 1, Part I, line 11, col. (A). page 1, Part I, line 11, col. (B). Totals, Part II (lines 1-5) 244,268. 177,265 67,003. ► Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) Percent of 4. Comp ation attributable

1. Name	2. Title	time devoted to business	to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14	0.		

Form 990-T (2018)

823732 01-09-19

# FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1 BUSINESS ACTIVITY

# ADVERTISING INCOME FROM WISCONSIN JEWISH CHRONICLE

TO FORM 990-T, PAGE 1

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/14	1,952.	1,952.	0.	0.
06/30/16	4,642.	0.	4,642.	4,642.
06/30/18	4,321.	0.	4,321.	4,321.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	8,963.	8,963.

SCL		Liprolated I	Rucinoc	Т	avabla	Incom	o for	ĺ	ENTITY 1		
	SCHEDULE M Unrelated Business Taxable Income for (Form 990-T) Unrelated Trade or Business								OMB No. 1545-0687		
(1 01	Unrelated Trade or Business								0040		
		For calendar year 2018 or other tax year begir	nning JUL	1,	2018	and ending <b>J</b>	UN 30, 20	019	2018		
	Department of the Treasury b Go to www.irs.gov/Form990T for instructions and the latest information.										
Interna	Internal Revenue Service (99) Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).										
Name	Name of the organization THE MILWAUKEE JEWISH FEDERATION, INC. Employer identification 39-08063										
<u> </u>			90009		TTON,	INC.	39-08	0003	12		
		activity code (see instructions)	STHROUG			р.					
Par	t I Unrelated	Trade or Business Income			(A) In	come	(B) Expens	es	(C) Net		
1a	Gross receipts or s	sales									
b	Less returns and allo	owances c	Balance 🕨	1c							
2	Cost of goods sold	d (Schedule A, line 7)		2							
3	Gross profit. Subtr	ract line 2 from line 1c		3							
4a		come (attach Schedule D)		4a							
b		rm 4797, Part II, line 17) (attach Forr	m 4797)	4b							
С	Capital loss deduc			4c							
5	. ,	a partnership or an S corporation (				< 0.50			16 050		
				5	1	6,252.			16,252.		
6		edule C)		6							
7		anced income (Schedule E)		7							
8		, royalties, and rents from a controlle edule F)		8							
9		e of a section 501(c)(7), (9), or (17)									
	organization (Sche	edule G)		9							
10	Exploited exempt	activity income (Schedule I)		10							
11	Advertising incom	e (Schedule J)		11							
12	Other income (See	e instructions; attach schedule)		12							
13	Total. Combine lin	nes 3 through 12		13	1	6,252.			16,252.		
Par		ns Not Taken Elsewhere (Se						cept fo	or contributions,		
	deductions	s must be directly connected	l with the u	nrela	ted busin	ess incom	e.)				
	0	- ff'						44			
14	•	officers, directors, and trustees (Sch	,					14			
15		9S						15 16			
16 17		enance						17			
17 18		hadula) (aco instructiona)						18			
19		hedule) (see instructions)						19			
20		s utions (See instructions for limitatior						20			
21		ch Form 4562)						20			
22		claimed on Schedule A and elsewh						22b			
23								23			
24		leferred compensation plans						24			
2 <del>.</del> 25		programs						25			
26		programs						26			
27		costs (Schedule J)						27			
28		(attach schedule)						28			
29		Add lines 14 through 28						29	0.		
30		s taxable income before net operati						30	16,252.		
31		operating loss arising in tax years be	-					_			
								31			
32	,	s taxable income. Subtract line 31 f						32	16,252.		
LHA		Reduction Act Notice, see instruct						Schedu	le M (Form 990-T) 2018		

823741 01-28-19