

**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](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the 2021 calendar year, or tax year beginning **SEP 1, 2021** and ending **AUG 31, 2022**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Houston Jewish Community Foundation</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>5603 South Braeswood Blvd.</b> City or town, state or province, country, and ZIP or foreign postal code <b>Houston, TX 77096</b>	<b>D</b> Employer identification number <b>76-0187329</b>  <b>E</b> Telephone number <b>346-699-4523</b>
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G</b> Gross receipts \$ <b>45,031,273.</b>
<b>J</b> Website: ▶ <b>www.hjcf.org</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1985</b> <b>M</b> State of legal domicile: <b>TX</b>

**Part I Summary**

	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>See Schedule O</b>	
Activities & Governance	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....	<b>30</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>30</b>
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a) .....	<b>6</b>
	<b>6</b> Total number of volunteers (estimate if necessary) .....	<b>30</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>618,933.</b>
	<b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 .....	<b>269,195.</b>
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	<b>19,964,242.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) .....	<b>347,017.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	<b>5,004,520.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	<b>-1,301,609.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	<b>24,014,170.</b>
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....		<b>0.</b>
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....		<b>739,631.</b>
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....		<b>0.</b>
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>166,023.</b>		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....		<b>758,315.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....		<b>18,829,589.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	<b>5,184,581.</b>	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16) .....	<b>219,913,135.</b>
	<b>21</b> Total liabilities (Part X, line 26) .....	<b>64,715,574.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	<b>155,197,561.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>Roberta Herman-Dietrich, Executive Director</b> Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>Barbara Murphy</b>	Preparer's signature Date
	Firm's name ▶ <b>Blazek &amp; Vetterling</b> Firm's address ▶ <b>2900 Wesleyan, Suite 200 Houston, TX 77027</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P01386215</b> Firm's EIN ▶ <b>76-0269860</b> Phone no. <b>713-439-5739</b>

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: The Houston Jewish Community Foundation is a donor-centered community foundation which seeks to perpetuate Jewish values and institutions through the acquisition, professional management, and distribution of charitable resources.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 20,617,755. including grants of \$ 20,559,013.) (Revenue \$ 370,655.) See Schedule O

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

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

4e Total program service expenses 20,617,755.

**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** (continued)

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

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 30		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	1b 30		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
<b>12c</b>			
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **None**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **Paul Weaver - 346-699-4523**  
**5603 South Braeswood, Houston, TX 77096**

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Roberta Herman-Dietrich Executive Director	38.00 3.00			X				0.	132,426.	7,283.
(2) Paul Weaver CFO	40.00 0.00			X				0.	94,968.	8,658.
(3) Jay Kaplan Chair	5.00 2.00	X		X				0.	0.	0.
(4) Thomas Fish Vice Chair	3.00 0.00	X		X				0.	0.	0.
(5) Edward Schreiber Secretary	5.00 0.00	X		X				0.	0.	0.
(6) Dan Gordon Treasurer	5.00 0.00	X		X				0.	0.	0.
(7) David Aaronson Trustee	1.00 0.00	X						0.	0.	0.
(8) Susan Bass Trustee	1.00 0.00	X						0.	0.	0.
(9) David Breslauer Trustee	1.00 0.00	X						0.	0.	0.
(10) Mark Brookner Trustee	1.00 0.00	X						0.	0.	0.
(11) Vikki Evans Trustee	1.00 1.00	X						0.	0.	0.
(12) Audrey Fersten Trustee	1.00 0.00	X						0.	0.	0.
(13) Steven J. Finkelman Trustee	1.00 1.00	X						0.	0.	0.
(14) Adam Finn Trustee	1.00 0.00	X						0.	0.	0.
(15) Donald Freedman Trustee	1.00 1.00	X						0.	0.	0.
(16) Jeffrey Gilbert Trustee	1.00 0.00	X						0.	0.	0.
(17) Robert Goodfriend Trustee	1.00 0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) Donald M. Graubart Trustee	1.00 0.00	X						0.	0.	0.
(19) Rosanne Kaufman Trustee	1.00 0.00	X						0.	0.	0.
(20) Gerald Merfish Trustee	1.00 0.00	X						0.	0.	0.
(21) Elise Newman Trustee	1.00 0.00	X						0.	0.	0.
(22) Jack Polatsek Trustee	1.00 0.00	X						0.	0.	0.
(23) Esther Polland Trustee	1.00 2.00	X						0.	0.	0.
(24) Ann Baker Ronn Trustee	1.00 0.00	X						0.	0.	0.
(25) Benjamin D. Rosenberg Trustee	1.00 4.00	X						0.	0.	0.
(26) Michael Rubenstein Trustee	1.00 3.00	X						0.	0.	0.
<b>1b Subtotal</b>								0.	227,394.	15,941.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								0.	227,394.	15,941.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
Fiducient Advisors 500 W Madison St #1700, Chicago, IL 60661	Investment management	102,920.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1**

See Part VII, Section A Continuation sheets



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) Rob Shoss Trustee	1.00 2.00	X						0.	0.	0.
(28) Rick Stein Trustee	1.00 1.00	X						0.	0.	0.
(29) Sam Stolbun Trustee	1.00 0.00	X						0.	0.	0.
(30) Haya Varon Trustee	1.00 1.00	X						0.	0.	0.
(31) Benjamin Warren Trustee	1.00 2.00	X						0.	0.	0.
(32) Joe L. Williams Trustee	1.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>	3,879,220.				
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	23,515,993.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 10,660,318.				
	<b>h Total.</b> Add lines 1a-1f .....			27,395,213.			
Program Service Revenue	<b>2 a</b> Administrative fees .....	<b>Business Code</b>					
		561000	370,655.	370,655.			
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....			370,655.				
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		2,832,415.			2832415.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....		34,473.			34,473.	
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	13,784,178.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	12,510,926.				
	<b>c</b> Gain or (loss) .....	<b>7c</b>	1,273,252.				
<b>d</b> Net gain or (loss) .....			1,273,252.		1273252.		
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
	<b>b</b> Less: direct expenses .....	<b>8b</b>					
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
	<b>b</b> Less: direct expenses .....	<b>9b</b>					
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
		<b>b</b> Less: cost of goods sold .....	<b>10b</b>				
		<b>c</b> Net income or (loss) from sales of inventory .....					
Miscellaneous Revenue	<b>11 a</b> Partnership distributions .....	<b>Business Code</b>	900099	614,339.	618,933.	-4,594.	
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			614,339.			
<b>12 Total revenue.</b> See instructions .....			32,520,347.	370,655.	618,933.	4135546.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	20,559,013.	20,559,013.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	139,709.	17,388.	18,176.	104,145.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	477,369.	16,976.	441,072.	19,321.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....	18,729.	1,152.	13,498.	4,079.
<b>9</b> Other employee benefits .....	65,471.	20,005.	34,448.	11,018.
<b>10</b> Payroll taxes .....	52,329.	3,221.	37,712.	11,396.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	3,920.		3,920.	
<b>c</b> Accounting .....	25,362.		25,362.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	122,818.		122,818.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	43,161.		43,161.	
<b>12</b> Advertising and promotion .....	19,953.		19,953.	
<b>13</b> Office expenses .....	150,421.		150,421.	
<b>14</b> Information technology .....	42,415.		42,415.	
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	78,419.		78,419.	
<b>17</b> Travel .....				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	952.		952.	
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....				
<b>23</b> Insurance .....	206,705.		206,705.	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>UBI taxes</b> .....	161,401.		161,401.	
<b>b</b> <b>Recruitment</b> .....	18,750.		18,750.	
<b>c</b> <b>Donor appr. events</b> .....	16,064.			16,064.
<b>d</b> <b>Dues &amp; subscriptions</b> .....	1,013.		1,013.	
<b>e</b> All other expenses .....				
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	22,203,974.	20,617,755.	1,420,196.	166,023.
<b>26</b> <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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	363,726.	<b>1</b>	321,567.
	<b>2</b> Savings and temporary cash investments .....	2,294.	<b>2</b>	1,831.
	<b>3</b> Pledges and grants receivable, net .....	143,537.	<b>3</b>	666,623.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	5,628.	<b>9</b>	12,820.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 26,749.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 26,749.	<b>10c</b> 0.	0.
	<b>11</b> Investments - publicly traded securities .....	205,659,728.	<b>11</b>	186,851,856.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	11,649,439.	<b>12</b>	12,298,940.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	2,088,783.	<b>15</b>	1,990,662.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	219,913,135.	<b>16</b>	202,144,299.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	48,139.	<b>17</b>	138,135.
	<b>18</b> Grants payable .....	241,300.	<b>18</b>	288,945.
	<b>19</b> Deferred revenue .....		<b>19</b>	4,000.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	63,870,245.	<b>21</b>	59,246,079.
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....	555,890.	<b>25</b>	418,964.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	64,715,574.	<b>26</b>	60,096,123.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	148,274,933.	<b>27</b>	136,382,765.
	<b>28</b> Net assets with donor restrictions .....	6,922,628.	<b>28</b>	5,665,411.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	155,197,561.	<b>32</b>	142,048,176.
	<b>33</b> Total liabilities and net assets/fund balances .....	219,913,135.	<b>33</b>	202,144,299.

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	32,520,347.
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,203,974.
3	Revenue less expenses. Subtract line 2 from line 1	3	10,316,373.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	155,197,561.
5	Net unrealized gains (losses) on investments	5	-23,470,588.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	4,830.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	142,048,176.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other  
 If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?  
 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?  
 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  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
 If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

**SCHEDULE A**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization Houston Jewish Community Foundation Employer identification number 76-0187329

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

f Enter the number of supported organizations \_\_\_\_\_

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	20747929.	28267056.	18038562.	19964242.	27395213.	114413002
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	20747929.	28267056.	18038562.	19964242.	27395213.	114413002
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						37694584.
<b>6 Public support.</b> Subtract line 5 from line 4.						76718418.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	20747929.	28267056.	18038562.	19964242.	27395213.	114413002
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	2039985.	2435552.	2392282.	2390995.	2866888.	12125702.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....		3141900.	19,858.	1136624.	657,113.	4955495.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....			2435331.			2435331.
<b>11 Total support.</b> Add lines 7 through 10 .....						133929530
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	1,682,525.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	57.28	%
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	54.31	%
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2020.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2021.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> 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? <i>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.</i>		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>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).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.			
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
<b>2a</b>			
<b>2b</b>			
<b>3a</b>			
<b>3b</b>			

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

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

**Part VI**

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

Lined area for supplemental information with a large diagonal watermark reading 'TO BE FILED'.

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

Houston Jewish Community Foundation

Employer identification number

76-0187329

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization  <b>Houston Jewish Community Foundation</b>	Employer identification number  <b>76-0187329</b>
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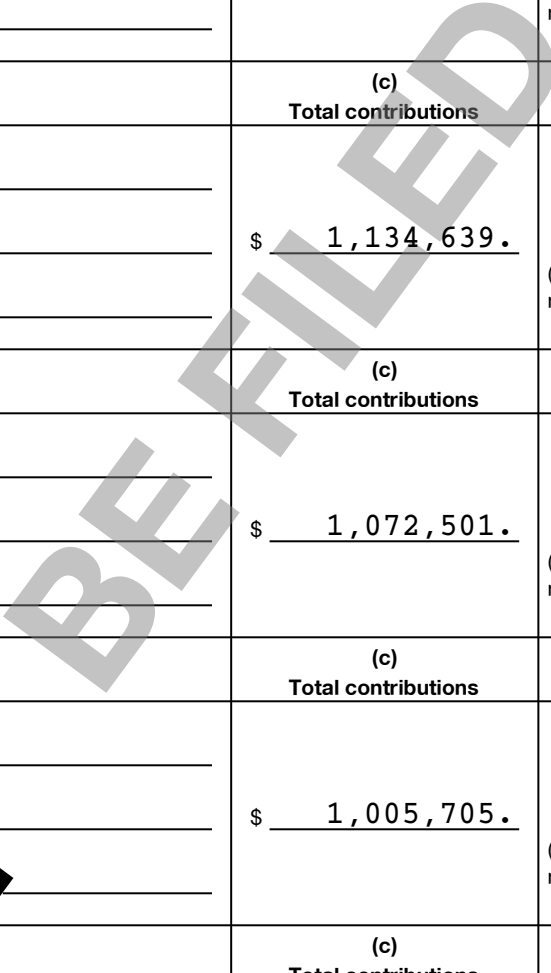
**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	████████████████████ ████████████████████ ████████████████████	\$ 3,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	████████████████████ ████████████████████ ████████████████████	\$ 2,366,806.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	████████████████████ ████████████████████ ████████████████████	\$ 1,400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	████████████████████ ████████████████████ ████████████████████	\$ 550,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	████████████████████ ████████████████████ ████████████████████	\$ 1,020,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	████████████████████ ████████████████████ ████████████████████	\$ 720,505.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>Houston Jewish Community Foundation</b>	Employer identification number <b>76-0187329</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	████████████████████ ████████████████████ ████████████████████	\$ 2,578,346.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	████████████████████ ████████████████████ ████████████████████	\$ 1,134,639.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	████████████████████ ████████████████████ ████████████████████	\$ 1,072,501.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
10	████████████████████ ████████████████████ ████████████████████	\$ 1,005,705.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
11	████████████████████ ████████████████████ ████████████████████	\$ 1,000,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
12	████████████████████ ████████████████████ ████████████████████	\$ 1,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)





Name of organization  <b>Houston Jewish Community Foundation</b>	Employer identification number  <b>76-0187329</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 80%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60%; height: 15px;"></div>	\$ <u>2,859,220.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>Houston Jewish Community Foundation</b>	Employer identification number <b>76-0187329</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	Securities - Publicly traded	\$ 1,654,510.	12/27/21
6	Securities - Publicly traded	\$ 648,008.	12/08/21
7	Securities - Publicly traded	\$ 2,578,346.	12/27/21
8	Securities - Publicly traded	\$ 1,134,639.	10/25/21
9	Securities - Publicly traded	\$ 1,072,221.	12/29/21
10	LLC interest	\$ 1,005,705.	12/28/21

Name of organization  <b>Houston Jewish Community Foundation</b>	Employer identification number  <b>76-0187329</b>
--	---

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
11	LLC interest _____ _____ _____	\$ 1,000,000.	12/29/21
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization <b>Houston Jewish Community Foundation</b>	Employer identification number <b>76-0187329</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization Houston Jewish Community Foundation Employer identification number 76-0187329

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions regarding donor property and grant fund usage.

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

Form for Part II Conservation Easements. Includes checkboxes for types of easements, a table for 2a-2d (Total number, acreage, certified historic structures, and National Register listings), and questions 3-9 regarding modifications, monitoring, and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions 1a-1b regarding reporting of art collections and question 2 regarding financial gain reporting.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	177,955,413.	154,407,065.	134,430,111.	118,562,849.	106,205,954.
b Contributions	27,820,537.	20,367,009.	25,631,580.	28,638,550.	23,680,925.
c Net investment earnings, gains, and losses	-18,276,646.	23,073,940.	14,059,351.	4,639,081.	6,735,770.
d Grants or scholarships	21,615,513.	18,460,018.	18,505,838.	15,607,116.	16,798,645.
e Other expenditures for facilities and programs	58,742.	36,060.	36,793.	35,809.	35,013.
f Administrative expenses	1,480,334.	1,396,523.	1,171,346.	1,767,444.	1,226,142.
g End of year balance	164,344,715.	177,955,413.	154,407,065.	134,430,111.	118,562,849.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  96.5500 %
  - b Permanent endowment  2.6100 %
  - c Term endowment  .8400 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes                                 | No                                  |
|--|-------------------------------------|-------------------------------------|
| (i) Unrelated organizations  |                                     | <input checked="" type="checkbox"/> |
| (ii) Related organizations   | <input checked="" type="checkbox"/> |                                     |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input checked="" type="checkbox"/> |                                     |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		26,749.	26,749.	0.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				0.

**Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) Partnership interests	12,298,940.	End-of-Year Market Value
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<b>12,298,940.</b>	

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Due to affiliates	418,964.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>418,964.</b>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>

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

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

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>

**Part XIII Supplemental Information.**

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

**Part IV, line 2b:**

Funds held for others include amounts held on behalf of other charitable organizations which are combined with the Foundation's investments to create a pool of investments for the purpose of administrative and investing convenience.

**Part V, line 4:**

The Houston Jewish Community Foundation holds endowment funds to support the practice of tzedakah (righteousness, charity) and the pursuit of tikkun olam (repairing the world) by serving as a central resource and advocate for charitable giving.



**Part XIII** Supplemental Information *(continued)*

TO BE FILED

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization <b>Houston Jewish Community Foundation</b>	Employer identification number <b>76-0187329</b>
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**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  Yes  No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
Middle East/ North Africa	0	0	Investment		1,201,478.
<b>3 a</b> Subtotal .....	0	0			1,201,478.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			1,201,478.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

TO BE FILLED

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

3 Enter total number of other organizations or entities ..... ▶ \_\_\_\_\_

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

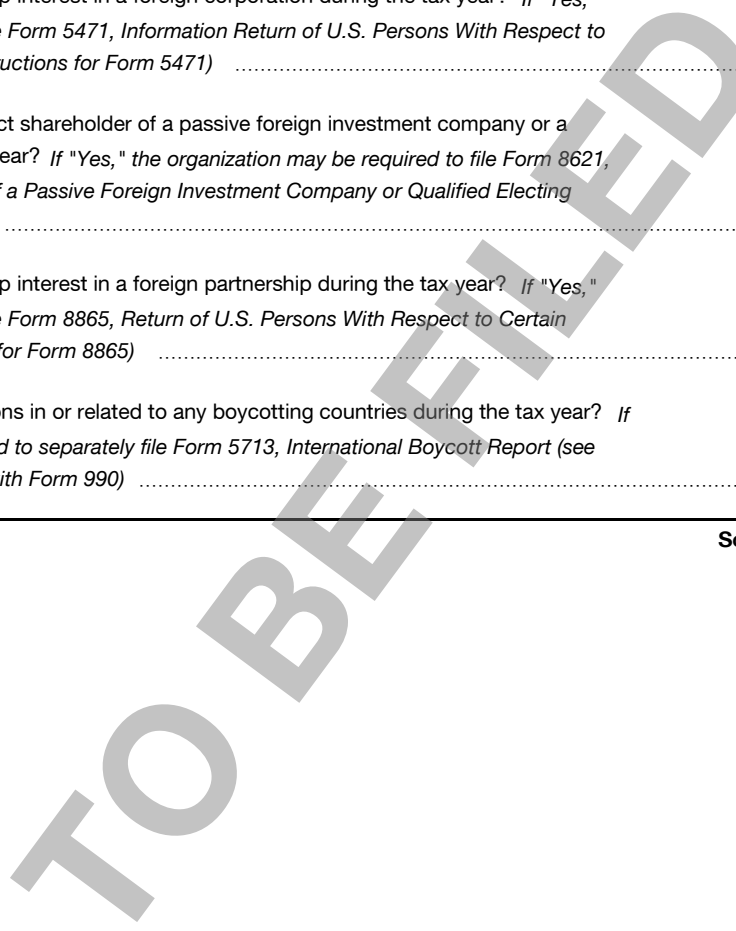
Part III can be duplicated if additional space is needed.

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

TO BE FILED

**Part IV Foreign Forms**

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



**Part V Supplemental Information**

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

**Part I, Line 3f - Investments & Expenditures Per Region**

The amounts reported in Part I, column (f) reflect the fair value of foreign investments held as of the end of the fiscal year.

TO BE FILED

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **Houston Jewish Community Foundation** Employer identification number **76-0187329**

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
19th News 3267 Bee Caves Rd, Ste 107-353 Austin, TX 78746	84-2627202	501(c)(3)	14,000.	0.			General Support
ACLU Foundation 125 Broad Street 18th Fl New York, NY 10004	13-6213516	501(c)(3)	6,500.	0.			General Support
ADL - Anti-Defamation League 4635 Southwest Freeway, Ste 400 Houston, TX 77027	13-1818723	501(c)(3)	57,550.	0.			General Support
Advance Democracy 1360 Beverly Rd, Ste 300 McLean, VA 22101	82-4277642	501(c)(3)	10,000.	0.			General Support
Aid to Victims of Domestic Abuse - AVDA - 1001 Texas Ave, Ste 600 - Houston, TX 77002	74-2141981	501(c)(3)	25,300.	0.			General Support
Aishel House Inc. 1955 University Blvd Houston, TX 77030	20-1225881	501(c)(3)	15,180.	0.			General Support

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **207.**

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

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

Schedule I (Form 990) 2021

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AJC - American Jewish Committee 374 Greenbriar Dr Houston, TX 77098	13-5563393	501(c)(3)	121,100.	0.			General Support
All Stars Project Inc. 543 West 42nd St New York, NY 10036	13-3148295	501(c)(3)	10,000.	0.			General Support
Alley Theatre 615 Texas Ave Houston, TX 77002	74-1143076	501(c)(3)	10,050.	0.			General Support
Alpha Epsilon Pi Foundation, Inc. 8815 Wesleyan Rd Indianapolis, IN 46268	13-6141078	501(c)(3)	7,500.	0.			General Support
American Friends of Leket Israel PO Box 2090 Teaneck, NJ 07666	20-8202424	501(c)(3)	7,000.	0.			General Support
American Friends of Tel Aviv University - 8 West 40th St, 8th Fl - New York, NY 10018	13-1996126	501(c)(3)	19,800.	0.			General Support
American Hand Therapy Foundation PO Box 701484 Houston, TX 77270	35-1796130	501(c)(3)	7,750.	0.			General Support
American Indian College Fund 8333 Greenwood Blvd Denver, CO 80221	52-1573446	501(c)(3)	10,000.	0.			General Support
American Israel Education Foundation - 251 H Street NW - Washington, DC 20001	52-1623781	501(c)(3)	275,000.	0.			General Support

Schedule I (Form 990)



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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Jewish Joint Distribution Committee - 220 East 42nd St, Ste 400 - New York, NY 10017	13-1656634	501(c)(3)	278,100.	0.			General Support
American Red Cross - Greater Houston Chapter - 27 Southwest Freeway - Houston, TX 77098	53-0196605	501(c)(3)	25,700.	0.			General Support
American Society for Technion 55 East 59th St New York, NY 10022	13-0434195	501(c)(3)	1,160,000.	0.			General Support
American Society for Yad Vashem, Inc. - 500 Fifth Ave, 42nd Fl - New York, NY 10110-4299	13-3106768	501(c)(3)	5,650.	0.			General Support
Americans for Ben-Gurion University - PO Box 7410310 - Chicago, IL 60674-0310	23-7270753	501(c)(3)	70,068.	0.			General Support
Amigos de las Americas 1800 W Loop S #1325 Houston, TX 77027	74-1547146	501(c)(3)	10,000.	0.			General Support
AMIT Children, Inc. 49 W 37th St, 5th Fl New York, NY 10018	13-5631502	501(c)(3)	6,700.	0.			General Support
Ann Richards School Foundation PO Box 41072 Austin, TX 78704	26-4231160	501(c)(3)	18,000.	0.			General Support
Aspen Jewish Congregation 77 Meadowood Dr Aspen, CO 81611	84-0723135	501(c)(3)	13,638.	0.			General Support

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Auschwitz Institute for Prevention of Genocide & Mass Atrocities - 2 West 45th St, Ste 1602 - New York, NY 10036	20-4714242	501(c)(3)	53,750.	0.			General Support
Avotaynu Foundation Inc. PO Box 30 Englewood, NJ 07631	31-1538873	501(c)(3)	25,000.	0.			General Support
Baylor College of Medicine PO Box 4976 MSC #8 Houston, TX 77210	74-1613878	501(c)(3)	25,550.	0.			General Support
BBYO - Lonestar Region 800 8th St NW Washington, DC 20001	61-1683404	501(c)(3)	8,966.	0.			General Support
BBYO, Inc. 529 14th St NW, Ste 705 Washington, DC 20045	31-1794932	501(c)(3)	6,000.	0.			General Support
Beth Yeshurun Day School 4525 Beechnut Houston, TX 77096	80-0165161	501(c)(3)	129,658.	0.			General Support
Bellaire Jewish Center 12 Bellaire Triangle Arc Bellaire, TX 77401	27-3461984	501(c)(3)	13,009.	0.			General Support
Boca Jewish Center 21065 Powerline Rd Boca Raton, FL 33433	27-4850965	501(c)(3)	25,000.	0.			General Support
Boulder Jewish Community Center 67 Oreg Ave Boulder, CO 80303	84-1322996	501(c)(3)	5,100.	0.			General Support

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Brandeis University PO Box 54911 Waltham, MA 02454	04-2103552	501(c)(3)	7,500.	0.			General Support
Brighter Bites PO Box 25456 Houston, TX 77265	47-4070026	501(c)(3)	20,000.	0.			General Support
Camp Ramah - Wisconsin 67 East Madison St, Ste 1905 Chicago, IL 60603	36-6009250	501(c)(3)	100,000.	0.			General Support
Camp Young Judaea Inc. 5410 Bellaire Blvd, Ste 207 Bellaire, TX 77401	74-6063430	501(c)(3)	69,429.	0.			General Support
Case Western Reserve University 10900 Euclid Ave Cleveland, OH 44106	34-1018992	501(c)(3)	6,000.	0.			General Support
Center for Reproductive Rights 199 Water St, 22nd Fl New York, NY 10038	13-3669731	501(c)(3)	61,100.	0.			General Support
Chabad of West Houston 12645 Whittington Dr Houston, TX 77077	23-7278350	501(c)(3)	18,372.	0.			General Support
Chabad Sugar Land 451 Cartwright Rd, Ste 77 Missouri City, TX 77459	76-0625646	501(c)(3)	9,579.	0.			General Support
Children at Risk Inc. 2900 Wesleyan #400 Houston, TX 77027	76-0360533	501(c)(3)	7,500.	0.			General Support

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Cincinnati Children's Hospital Medical Center - 3333 Burnet Ave Ml 4900 - Cincinnati, OH 45229	31-0833936	501(c)(3)	10,000.	0.			General Support
City of Hope 1500 E Duarte Rd Duarte, CA 91010	95-3435919	501(c)(3)	10,000.	0.			General Support
Congregation Agudas Achim 7300 Hart Lane Austin, TX 78731	74-6052767	501(c)(3)	9,474.	0.			General Support
Congregation Beth Israel 5600 N Braeswood Blvd Houston, TX 77096	74-1143080	501(c)(3)	476,985.	0.			General Support
Congregation Beth Israel 3901 Shoal Creek Blvd Austin, TX 78756	74-2827868	501(c)(3)	14,944.	0.			General Support
Congregation Beth Rambam 11333 Braesridge Houston, TX 77071	76-0021736	501(c)(3)	32,360.	0.			General Support
Congregation Beth Shalom of the Woodlands - 5125 Shadowbend Place - The Woodlands, TX 77381	76-0030790	501(c)(3)	6,600.	0.			General Support
Congregation Beth Yeshurun 4525 Beechnut Blvd Houston, TX 77096	74-1222268	501(c)(3)	383,257.	0.			General Support
Congregation Emanu El 1500 Sunset Blvd Houston, TX 77005	74-1109756	501(c)(3)	345,016.	0.			General Support

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Congregation Jewish Learning Experience - 69-13 172nd St - Flushing, NY 12365	22-2407101	501(c)(3)	22,800.	0.			General Support
Congregation Or Ami 3443 Wilcrest Dr Houston, TX 77042	74-1742050	501(c)(3)	23,150.	0.			General Support
Contemporary Arts Museum Houston 5216 Montrose Blvd Houston, TX 77006	74-1093771	501(c)(3)	25,000.	0.			General Support
Crested Butte Land Trust PO Box 2224 Crested Butte, CO 81224	84-1190830	501(c)(3)	15,135.	0.			General Support
Crime Stoppers of Houston PO Box 541654 Houston, TX 77254	74-2137744	501(c)(3)	17,900.	0.			General Support
Crisis Intervention of Houston, Inc. - 5322 West Bellfort, Ste 203 - Houston, TX 77035	74-2076682	501(c)(3)	7,872.	0.			General Support
DAAR Charitable Foundation 123 N Post Oak Ln, Ste 410 Houston, TX 77024	85-0487069	501(c)(3)	19,141.	0.			General Support
Doctors Without Borders PO Box 5030 Hagerstown, MD 21741	13-3433452	501(c)(3)	8,980.	0.			General Support
Emery Weiner Center for Jewish Education - 9825 Stella Link - Houston, TX 77025	74-1990541	501(c)(3)	191,608.	0.			General Support

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Evelyn Rubenstein Jewish Community Center - 5601 S Braeswood Blvd - Houston, TX 77096	74-1198298	501(c)(3)	2,217,683.	0.			General Support
Everytown for Gun Safety Support Fund - PO Box 4184 - New York, NY 10163	26-1598353	501(c)(3)	5,600.	0.			General Support
Fiver Children's Foundation 519 Eighth Ave, 24th Fl New York, NY 10018	13-3993633	501(c)(3)	35,000.	0.			General Support
Foundation for Education and Research in Vision - 4401 Martin Luther King Blvd - Houston, TX 77204	76-0216422	501(c)(3)	10,000.	0.			General Support
Friends of IDF Texas Chapter PO Box 22245 Houston, TX 77227	13-3156445	501(c)(3)	149,680.	0.			General Support
Friends of the Children - Austin 1023 Springdale Road, Ste 13C Austin, TX 78721	82-2604098	501(c)(3)	8,000.	0.			General Support
Friends of United Hatzalah 208 East 51st St, Ste 303 New York, NY 10022	11-3533002	501(c)(3)	15,500.	0.			General Support
Giffords Law Center to Prevent Gun Violence - 268 Bush St, Ste 555 - San Francisco, CA 94104	46-4638549	501(c)(3)	7,000.	0.			General Support
Greater Houston Community Foundation - 515 Post Oak Blvd, Ste 1000 - Houston, TX 77027	23-7160400	501(c)(3)	6,550.	0.			General Support

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Hadassah - Womens Zionist Org. of America - 455 S Robertson Blvd - Beverly Hills, CA 90211	13-1656651	501(c)(3)	36,160.	0.			General Support
Hand in Hand Center for Jewish-Arab Edu in Israel - PO Box 812 - Portland, OR 97280	93-1269590	501(c)(3)	202,360.	0.			General Support
Harold Grinspoon Foundation 67 Hunt St, Ste 100 Agawam, MA 01001	04-6685725	501(c)(3)	75,871.	0.			General Support
Hebrew Free Loan Association of Houston - 4131 S Braeswood - Houston, TX 77025	76-0069644	501(c)(3)	6,380.	0.			General Support
Hebrew Order of David Int'l. 106 Datonia Bellaire, TX 77401	27-3027238	501(c)(3)	10,100.	0.			General Support
HIAS PO Box 97077 Washington, DC 20090	13-5633307	501(c)(3)	12,100.	0.			General Support
Highland Park Education Foundation 4201 Grassmere Lane Dallas, TX 75205	75-1999200	501(c)(3)	20,000.	0.			General Support
Holocaust Museum Houston 5401 Caroline St Houston, TX 77004	76-0331398	501(c)(3)	364,076.	0.			General Support
Houston Baptist University 7502 Fondren Rd Houston, TX 77074	74-1400699	501(c)(3)	10,000.	0.			General Support

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Houston Botanic Garden 8205 N Bayou Dr Houston, TX 77017	04-3695294	501(c)(3)	25,000.	0.			General Support
Houston Congregation for Reform Judaism - PO Box 418 - Montvale, NJ 07645	74-1457948	501(c)(3)	34,394.	0.			General Support
Houston Food Bank 535 Portwall St Houston, TX 77029	74-2181456	501(c)(3)	36,302.	0.			General Support
Houston Friendship Circle Inc. 12645 Whittington Dr Houston, TX 77077	46-4596952	501(c)(3)	12,500.	0.			General Support
Houston Hillel 1700 Bissonnet St Houston, TX 77005	76-0684042	501(c)(3)	38,580.	0.			General Support
Houston Jewish Family Foundation 4131 South Braeswood Blvd Houston, TX 77025	76-0240622	501(c)(3)	431,032.	0.			Charitable purposes - see Schedule O
Houston Methodist Hospital Foundation - PO Box 4384 - Houston, TX 77210	76-0094743	501(c)(3)	115,484.	0.			General Support
Houston Museum of Natural Science 5555 Hermann Park Dr Houston, TX 77030	74-1036131	501(c)(3)	27,740.	0.			General Support
Houston Police Foundation PO Box 346 Houston, TX 77001	20-1209272	501(c)(3)	12,000.	0.			General Support

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Houston Symphony Society 615 Louisiana, Ste 102 Houston, TX 77002	74-1157373	501(c)(3)	7,600.	0.			General Support
Houston Zoo, Inc. 1513 Cambridge St Houston, TX 77030	74-1590271	501(c)(3)	27,500.	0.			General Support
IGNITE 510 16th St Oakland, CA 94612	38-3819049	501(c)(3)	6,500.	0.			General Support
IKAR 1737 S La Cienega Blvd Los Angeles, CA 90035	20-1210098	501(c)(3)	7,550.	0.			General Support
Impact Austin PO Box 28148 Austin, TX 78755	56-2367666	501(c)(3)	6,500.	0.			General Support
ImpactIsrael 200 Highland Ave, Ste 31 Needham, MA 02492	22-3090463	501(c)(3)	35,500.	0.			General Support
Institute of Southern Jewish Life PO Box 16528 Jackson, MS 39236	64-0762027	501(c)(3)	50,000.	0.			General Support
Interfaith Ministries for Greater Houston - 3303 Main St - Houston, TX 77002	74-1488102	501(c)(3)	55,030.	0.			General Support
Int'l Association of Jewish Genealogical Societies - 1800 Ben Franklin Dr #A1002 - Sarasota, FL 34236	22-2997643	501(c)(3)	18,000.	0.			General Support

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International Rescue Committee PO Box 6068 Albert Lea, MN 56007	13-5660870	501(c)(3)	15,500.	0.			General Support
Irvin M. Shlenker School of Cong. Beth Israel - 5600 N Braeswood Blvd - Houston, TX 77096	76-0686559	501(c)(3)	48,827.	0.			General Support
Israeli American Council 5900 Canoga Ave, Ste 390 Woodland Hills, CA 91367	22-3951652	501(c)(3)	8,600.	0.			General Support
J Street Education Fund PO Box 6673 Washington, DC 20035	20-2777557	501(c)(3)	22,500.	0.			General Support
Jewish Agency for Israel 633 3rd Ave, 21st Fl New York, NY 10017	23-0053483	501(c)(3)	44,000.	0.			General Support
Jewish Childrens Regional Service PO Box 7368 Metairie, LA 70010	72-0408936	501(c)(3)	19,150.	0.			General Support
Jewish Colorado 300 South Dahlia St, Ste 300 Denver, CO 80246	01-0831698	501(c)(3)	8,900.	0.			General Support
Jewish Community Action 2324 University Ave W, Ste 105 St. Paul, MN 55114	41-1830619	501(c)(3)	10,000.	0.			General Support
Jewish Council for Public Affairs 25 Broadway, Ste 1700 New York, NY 10004	13-1624104	501(c)(3)	5,200.	0.			General Support

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Jewish Federation of Greater Houston - 5603 S Braeswood Blvd - Houston, TX 77096	74-1109654	501(c)(3)	2,362,542.	0.			General Support
Jewish Federation of Nashville & Middle TN - 801 Percy Warner Blvd, Ste 102 - Nashville, TN 37205	62-6077703	501(c)(3)	5,150.	0.			General Support
Jewish Federation of Omaha Foundation - 333 S 132nd St - Omaha, NH 68154	20-1123519	501(c)(3)	75,000.	0.			General Support
Jewish Federations of North America - 25 Broadway, Ste 1700 - New York, NY 10004	13-1624240	501(c)(3)	456,500.	0.			General Support
JewishGen Inc. 36 Battery Place New York, NY 10280	76-0493072	501(c)(3)	25,450.	0.			General Support
Jews for Judaism International PO Box 351235 Los Angeles, CA 90035	95-4040781	501(c)(3)	7,500.	0.			General Support
Jewish Family Service 4131 S Braeswood Houston, TX 77025	74-1152607	501(c)(3)	1,459,876.	0.			General Support
Judaism & Democracy Action Alliance of NA - 6 Copper Beech Circle - White Plains, NY 10605	13-4072492	501(c)(3)	35,000.	0.			General Support
Julie Rogers Gift of Life 239 Dowlen Rd Beaumont, TX 77706	76-0550450	501(c)(3)	10,500.	0.			General Support

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Juvenile Diabetes Research Foundation - 1776 Yorktown, Ste 560 - Houston, TX 77056	23-1907729	501(c)(3)	6,100.	0.			General Support
Kinkaid School 201 Kinkaid School Dr Houston, TX 77024	76-0295523	501(c)(3)	18,192.	0.			General Support
KIPP Texas Fundraising Houston PO Box 4785 MSC #3 Houston, TX 77210	13-3875888	501(c)(3)	16,000.	0.			General Support
KnowAutism Foundation 6430 Richmond Ave, Ste 410 Houston, TX 77057	46-2573522	501(c)(3)	7,500.	0.			General Support
KUHF-Houston Public Media Foundation - PO Box 4399 - Houston, TX 77210	74-1670740	501(c)(3)	5,925.	0.			General Support
L'Chaim Center PO Box 3321 Bellaire, TX 77402	27-1126214	501(c)(3)	10,000.	0.			General Support
Leukemia & Lymphoma Society PO Box 772395 Detroit, MI 48277	13-5644916	501(c)(3)	6,800.	0.			General Support
Maccabi USA (Sports for Israel) 1511 Walnut St, Ste 401 Philadelphia, PA 19102	13-1810938	501(c)(3)	12,000.	0.			General Support
Massachusetts General Hospital 125 Nashua St, Ste 54 Boston, MA 02114	04-1564655	501(c)(3)	572,930.	0.			General Support

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Media Cares Foundation 603 W 115th St #371 New York, NY 10025	13-4095364	501(c)(3)	7,000.	0.			General Support
Memorial Park Conservancy 7575 N Picnic Ln Houston, TX 77007	76-0655841	501(c)(3)	12,500.	0.			General Support
Mental Health America of Greater Houston - 2211 Norfolk, Ste 810 - Houston, TX 77098	74-1272394	501(c)(3)	7,872.	0.			General Support
Mercy Corps PO Box 378 Boone, IA 50037	91-1148123	501(c)(3)	6,000.	0.			General Support
Methodist Retirement Communities Foundation - 1440 Lake Front Circle, Ste 140 - The Woodlands, TX 77380	74-1403088	501(c)(3)	8,000.	0.			General Support
Michael M. Boone Elementary PTO 8385 Durham St Dallas, TX 75225	84-2302708	501(c)(3)	19,000.	0.			General Support
Mobile Loaves & Fishes PO Box 224451 Dallas, TX 75222	74-2956081	501(c)(3)	7,500.	0.			General Support
Moishe House 582 Monroe Rd Charlotte, NC 28212	26-2599786	501(c)(3)	54,200.	0.			General Support
Mosdot Botoshan 1148 49th St Brooklyn, NY 11219	11-2668795	501(c)(3)	8,000.	0.			General Support

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Museum of Fine Arts, Houston PO Box 6826 Houston, TX 77265	74-1109655	501(c)(3)	38,615.	0.			General Support
NARAL Pro-Choice America Foundation - 1725 Eye St NW, Ste 900 - Washington, DC 20006	52-1100361	501(c)(3)	7,500.	0.			General Support
National Multiple Sclerosis Society - 1050 North Post Oak Rd, Ste 240 - Houston, TX 77055	74-1266225	501(c)(3)	12,340.	0.			General Support
New Israel Fund PO Box 70358 Philadelphia, PA 19176	94-2607722	501(c)(3)	5,200.	0.			General Support
New Leaders Council 1050 Connecticut Ave NW #66004 Washington, DC 20035	56-2581640	501(c)(3)	70,000.	0.			General Support
Noah's House 176 Fellows Rd Houston, TX 77047	76-0590599	501(c)(3)	10,000.	0.			General Support
Organization for Resolution of Agunot - 551 West 181st St #123 - New York, NY 10033	81-0582070	501(c)(3)	7,500.	0.			General Support
P.E.F. Israel Endowment Funds, Inc. - 630 Third Ave, 15th Fl, Ste 15 - New York, NY 10017	13-6104086	501(c)(3)	81,765.	0.			General Support
Pancreatic Cancer Action Network 1500 Rosecrans Ave #200 Manhattan Beach, CA 90266	33-0841281	501(c)(3)	5,100.	0.			General Support

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Parkland Foundation 1341 W Mockingbird Ln, Ste 1100E Dallas, TX 75247	75-2089180	501(c)(3)	25,000.	0.			General Support
Planned Parenthood Federation of America - PO Box 97166 - Washington, DC 20090	13-1644147	501(c)(3)	5,500.	0.			General Support
Planned Parenthood Great Plains 4401 W 109th St, Ste 200 Overland Park, KS 66211	44-0565390	501(c)(3)	32,800.	0.			General Support
Planned Parenthood Gulf Coast, Inc. - 4600 Gulf Freeway - Houston, TX 77023	74-1100163	501(c)(3)	102,800.	0.			General Support
Planned Parenthood of Greater Texas - 7424 Greenville Ave, Ste 206 - Dallas, TX 75231	52-1243220	501(c)(3)	9,000.	0.			General Support
Planned Parenthood of the Rocky Mountains - PO Box 732055 - Dallas, TX 75373	84-0404253	501(c)(3)	32,800.	0.			General Support
Pro Vision, Inc. 2656 South Loop W, Ste 650 Houston, TX 77054	76-0336711	501(c)(3)	15,000.	0.			General Support
Project Inspire 915 Clifton Ave, Ste 7 Clifton, NJ 07013	47-1117817	501(c)(3)	10,000.	0.			General Support
Protect Democracy Project 2020 Pennsylvania Ave NW #163 Washington, DC 20006	81-4777062	501(c)(3)	20,000.	0.			General Support

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Raices 1305 N Flores St San Antonio, TX 78212	74-2436920	501(c)(3)	20,000.	0.			General Support
Resource Impact 1341 G Street NW, 5th Fl Washington, DC 20005	81-2266962	501(c)(3)	25,000.	0.			General Support
RespectAbility 43 Town and Country Dr #119-181 Fredericksburg, VA 22405	46-2840232	501(c)(3)	187,500.	0.			General Support
Robert M. Beren Academy 11333 Cliffwood Dr Houston, TX 77035	74-1652136	501(c)(3)	72,218.	0.			General Support
Roger Clemens Foundation 8572 Katy Freeway, Ste 106 Houston, TX 77024	76-0378319	501(c)(3)	10,000.	0.			General Support
Rowan University Foundation 201 Mullica Hill Rd Glassboro, NJ 08028	22-2482802	501(c)(3)	10,000.	0.			General Support
Rutherford B. H. Yates Museum PO Box 130726 Houston, TX 77219	76-0536349	501(c)(3)	10,000.	0.			General Support
Salvation Army PO Box 2687 Houston, TX 77252	22-2406433	501(c)(3)	8,950.	0.			General Support
SEARCH Homeless Services 2015 Congress Ave Houston, TX 77002	76-0260403	501(c)(3)	7,650.	0.			General Support



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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Second Servings of Houston 8825 Knight Rd Houston, TX 77054	47-1173622	501(c)(3)	42,130.	0.			General Support
Sephardic Gan Torat Emet Inc. 11330 Braesridge Dr Houston, TX 77071	20-1354171	501(c)(3)	11,350.	0.			General Support
Seven Acres Jewish Senior Care Services - 6200 N Braeswood Blvd - Houston, TX 77074	74-1143086	501(c)(3)	198,529.	0.			General Support
Shalom Austin 7300 Hart Lane Austin, TX 78731	74-1469465	501(c)(3)	192,600.	0.			General Support
Shul of Bellaire - Chabad Lubavitch - 5307 Bissonnet St - Bellaire, TX 77401	26-3624670	501(c)(3)	11,320.	0.			General Support
Society for Welfare of Israeli Underprivileged Gifted Children - 181 Post Oak Blvd, Ste 1 - Houston, TX 77056	76-0015201	501(c)(3)	11,000.	0.			General Support
St. Bernard Project 2645 Toulouse St New Orleans, LA 70119	26-2189665	501(c)(3)	6,000.	0.			General Support
St. John's School 2401 Claremont Ln Houston, TX 77019	74-1185668	501(c)(3)	17,700.	0.			General Support
St. Jude Children's Research Hospital - 501 St. Jude Place - Memphis, TN 38105	62-0646012	501(c)(3)	6,900.	0.			General Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Stages Inc. 800 Rosine St Houston, TX 77019	74-2090278	501(c)(3)	6,550.	0.			General Support
SWAN - Southwest Angel Network for Social Impact - 610 Cottonwood Creek Rd - Dripping Springs, TX 78620	47-5637425	501(c)(3)	10,000.	0.			General Support
Target Hunger 1260 Shotwell St Houston, TX 77020	31-1548849	501(c)(3)	5,100.	0.			General Support
Temple Beth Am 1039 S La Cienega Blvd Los Angeles, CA 90035	95-1656370	501(c)(3)	5,500.	0.			General Support
Temple Beth Shalom 1901 Kresson Rd Cherry Hill, NJ 08003	21-0693430	501(c)(3)	8,295.	0.			General Support
Temple Sinai 13875 Brimhurst Dr Houston, TX 77077	74-2130257	501(c)(3)	8,915.	0.			General Support
Temple Solel 3575 Manchester Ave Cardiff-by-the-Sea, CA 92007	95-3319995	501(c)(3)	6,911.	0.			General Support
Texas Appleseed 1609 Shoal Creek Blvd, Ste 201 Austin, TX 78701	74-2804268	501(c)(3)	11,000.	0.			General Support
Texas Children's Hospital 1919 S Braeswood, 5th Fl MC44483 Houston, TX 77030	74-1100555	501(c)(3)	57,784.	0.			General Support

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Texas Hillel Foundation 2105 San Antonio St Austin, TX 78705	52-1758802	501(c)(3)	105,180.	0.			General Support
Texas Law Review Association 727 E Dean Keaton St Austin, TX 78705	74-1310182	501(c)(3)	5,500.	0.			General Support
The Cure Starts Now Foundation 10280 Chester Rd Cincinnati, OH 45215	26-0269131	501(c)(3)	10,000.	0.			General Support
TIKVA Children's Home 8 Henderson Dr West Caldwell, NJ 07006	22-3779212	501(c)(3)	15,000.	0.			General Support
Torah Girls Academy of Texas 7811 Ludington Dr Houston, TX 77071	20-8706360	501(c)(3)	10,000.	0.			General Support
TORCH 9427 Glenfield Ct Houston, TX 77096	74-2887729	501(c)(3)	31,507.	0.			General Support
TSU Institute for Entrepreneurship & Economic Revitalization - 6725 Vanderbilt St - Houston, TX 77005	61-1900657	501(c)(3)	60,000.	0.			General Support
U.S. Fund for UNICEF 125 Maiden Lane New York, NY 10038	13-1760110	501(c)(3)	6,650.	0.			General Support
Union for Reform Judaism 633 Third Ave, 7th Fl New York, NY 10017	13-1663143	501(c)(3)	50,500.	0.			General Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United Jewish Appeal - Federation of New York - 130 East 59th St, Ste 83 - New York, NY 10022	51-0172429	501(c)(3)	12,000.	0.			General Support
United Orthodox Synagogues 9001 Greenwillow Houston, TX 77096	45-0519502	501(c)(3)	175,624.	0.			General Support
United Way of Houston 50 Waugh Dr Houston, TX 77007	74-1167964	501(c)(3)	62,750.	0.			General Support
Unity Center 2041 Old Fanning Bridge Rd Mills River, NC 28759	56-6024201	501(c)(3)	10,000.	0.			General Support
University of Florida Foundation Box 14425 Gainesville, FL 32604	59-0974739	501(c)(3)	10,000.	0.			General Support
University of Houston 400 E Cullen Building Houston, TX 77204	74-6001399	501(c)(3)	32,256.	0.			General Support
University of Houston Law Foundation - 4604 Calhoun Rd - Houston, TX 77204	74-1732551	501(c)(3)	7,100.	0.			General Support
University of Illinois Foundation PO Box 734500 Chicago, IL 60673	37-6006007	501(c)(3)	12,500.	0.			General Support
University of Texas at Austin PO Box 7458 Austin, TX 78713	74-6000203	501(c)(3)	19,000.	0.			General Support

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Texas Law School Foundation - 727 E Dean Keeton St - Austin, TX 78705	74-6056794	501(c)(3)	22,000.	0.			General Support
U.T. Chabad House 2101 Nueces St Austin, TX 78705	45-2530523	501(c)(3)	7,500.	0.			General Support
U.T. Health 7000 Fannin St, Ste 172 Houston, TX 77030	74-1761309	501(c)(3)	39,800.	0.			General Support
UT M.D. Anderson Cancer Center PO Box 4486 Houston, TX 77210	74-6001118	501(c)(3)	46,050.	0.			General Support
Victoria ISD Education Foundation PO Box 1759 Victoria, TX 77902	74-2597286	501(c)(3)	7,500.	0.			General Support
Whole Woman's Health Alliance 1001 East Market St #200 Charlottesville, VA 22902	46-5318393	501(c)(3)	32,800.	0.			General Support
William Marsh Rice University PO Box 1892 Houston, TX 77251	74-1109620	501(c)(3)	119,486.	0.			General Support
Women Donors Network 101 A Clay St #182 San Francisco, CA 94111	05-0542397	501(c)(3)	29,500.	0.			General Support
World Central Kitchen 200 Mass Ave NW, 7th Fl Washington, DC 20001	27-3521132	501(c)(3)	15,700.	0.			General Support

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
World Savvy 2429 Nicollet Ave Minneapolis, MN 55404	45-0473508	501(c)(3)	40,000.	0.			General Support
Wounded Warrior Project PO Box 758516 Topeka, KS 66675	20-2370934	501(c)(3)	17,600.	0.			General Support
Yale University PO Box 2038 New Haven, CT 06521	06-0646973	501(c)(3)	6,000.	0.			General Support

TO BE FILED

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

Part I, Line 2:

The Houston Jewish Community Foundation monitors the use of grant funds by: researching grantees before distribution, determining eligible grantees are recognized as public charitable organizations as described in Section 501(c)(3) of the Internal Revenue Code; Granting does not provide impermissible benefits, monitoring, and written reporting requirement vary by grant size and fund. Staff communicates regularly with organizations that are frequent recipients of donor-advised grants and with organizations that are not well-known to keep current on their programs and services.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

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](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **Houston Jewish Community Foundation** Employer identification number **76-0187329**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	146	8,654,613	NYSE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests	X	2	2,005,705	FMV
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( )				
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** **2**

- 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 exempt purposes for the entire holding period? **X**
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2021





**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

Houston Jewish Community Foundation

Employer identification number

76-0187329

Form 990, Part I, Line 1, Description of Organization Mission:

The Houston Jewish Community Foundation is a donor-centered community foundation which seeks to perpetuate Jewish values and institutions through the acquisition, professional management, and distribution of charitable resources.

Form 990, Part III, Line 4a, Program Service Accomplishments:

The Houston Jewish Community Foundation (the Foundation) was established in 1985 and has helped individuals and families alike achieve their philanthropic dreams by enabling them to ensure that the community's needs are met now, and for generations to come in lasting and meaningful ways. More than thirty years later, the Foundation manages over \$262 million in assets and has matured into a true community foundation, administering funds donated by individuals and organizations for the benefit of the Greater Houston and national communities.

The Foundation has a long-term approach to charitable giving which facilitates the charitable intentions of donors during and beyond their lifetimes. By working with professional advisors, the Foundation is able to develop innovative philanthropic strategies with optimal tax benefits that help donors create their own personal legacy.

The Foundation is structured to advise on and receive gifts of cash, stock, bonds, life insurance, real estate, and other property, and facilitates the creation and administration of Donor Advised Funds,

Name of the organization

Houston Jewish Community Foundation

Employer identification number

76-0187329

supporting organizations, and endowments. The funds are professionally managed to ensure that donors receive the greatest benefit from their charitable contributions and to ensure philanthropic dollars are used to the fullest extent. The Investment Committee of the Foundation monitors and evaluates the outside investment consulting firm.

Form 990, Part VI, Section A, line 1a:

The Foundation has an Executive Committee consisting of the Elected Officers and the immediate past Chair of the Foundation as ex-officio voting members, plus additional members appointed by the Chair. The Board Chair is the Chair of the Executive Committee. The Executive Committee assists and facilitates reviewing issues facing the Foundation and provides oversight and direction to the Chair and Foundation Director. The Executive Committee also helps guide the work of the Board of Trustees and meets on an as-needed basis. The Committee is responsible for approving weekly grants prepared by the Foundation staff for distribution, and the Committee accepts or rejects the recommendations from the Special Gifts and Real Estate Committee. It is also authorized to exercise the full power of the Board to act between Board meetings upon matters which require action prior to the next Board meeting.

Form 990, Part VI, Section A, line 2:

Tom Fish and Jay Kaplan have a business relationship.

Form 990, Part VI, Section A, line 7a:

The Board Development Committee of the Foundation makes recommendations to the Foundation board for Foundation trustee election. The Jewish Federation of Greater Houston (the Federation) approves two-thirds of the Foundation's

Name of the organization

Houston Jewish Community Foundation

Employer identification number

76-0187329

elected trustees.

Form 990, Part VI, Section B, line 11b:

The Form 990 is initially reviewed by the Chief Financial Officer. The Form is then reviewed by the Executive Director. A copy is then provided to all Board members prior to filing.

Form 990, Part VI, Section B, Line 12c:

A Conflict of Interest Statement is distributed to Board members every year and several follow-ups are made. If there are conflicts of interest, they are addressed with the Foundation's Executive Director and the Chair of the Foundation Board. If appropriate, the conflict is brought before the Board.

Form 990, Part VI, Section B, Line 15a:

The Personnel Sub-Committee is responsible for determining the compensation of the organization's Executive Director. Her compensation is determined after a review of comparable data of non-profit community foundations of similar size.

Form 990, Part VI, Section C, Line 19:

Upon request.

Form 990, Part VII - Compensation Explanation

Roberta Herman-Dietrich and Paul Weaver are full-time employees of the Houston Jewish Community Foundation, whose payroll is administered by the Jewish Federation of Greater Houston. The Foundation reimburses the Federation for all salaries and related expenses.

Name of the organization Houston Jewish Community Foundation	Employer identification number 76-0187329
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## Form 990, Part XI, line 9, Changes in Net Assets:

Increase in value of CSV insurance 4,830.

## Schedule I - Expenditure Responsibility Statements

Grantee Name: Houston Jewish Family Foundation

Address: 4131 South Braeswood Blvd.

Address: Houston, TX 77025

Grant Date: 2/26/2021, 4/2/2021, 6/14/2021

Grant Amount: \$1,125,000, \$125,000, \$75,000

Grant Expended: \$1,125,000, \$125,000, \$75,000

Grant Purpose: Good for Life Campaign

Any Diversion by Grantee: No

Dates of Reports by Grantee: 12/31/2021

Date of Verification: 12/31/2021

Results of Verification: The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

## Schedule I - Expenditure Responsibility Statements

Grantee Name: Houston Jewish Family Foundation

Address: 4131 South Braeswood Blvd.

Address: Houston, TX 77025

Grant Date: 2/8/2021

Grant Amount: \$100,000

Grant Expended: \$100,000

Grant Purpose: Shabbat boxes

Name of the organization Houston Jewish Community Foundation	Employer identification number 76-0187329
---	--

Any Diversion by Grantee: No

Dates of Reports by Grantee: 12/31/2021

Date of Verification: 12/31/2021

Results of Verification: The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

Schedule I - Expenditure Responsibility Statements

Grantee Name: Houston Jewish Family Foundation

Address: 4131 South Braeswood Blvd.

Address: Houston, TX 77025

Grant Date: 10/26/2020

Grant Amount: \$200,000

Grant Expended: \$200,000

Grant Purpose: Chaplaincy Program

Any Diversion by Grantee: No

Dates of Reports by Grantee: 12/31/2020

Date of Verification: 12/31/2020

Results of Verification: The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

Schedule I - Expenditure Responsibility Statements

Grantee Name: Houston Jewish Family Foundation

Address: 4131 South Braeswood Blvd.

Address: Houston, TX 77025

Name of the organization Houston Jewish Community Foundation	Employer identification number 76-0187329
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Grant Date: 2/8/2021

Grant Amount: \$200,000

Grant Expended: \$200,000

Grant Purpose: Chaplaincy Program

Any Diversion by Grantee: No

Dates of Reports by Grantee: 12/31/2021

Date of Verification: 12/31/2021

Results of Verification: The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

## Schedule I - Expenditure Responsibility Statements

Grantee Name: Houston Jewish Family Foundation

Address: 4131 South Braeswood Blvd.

Address: Houston, TX 77025

Grant Date: 4/26/2022

Grant Amount: \$100,000

Grant Expended: \$100,000

Grant Purpose: Shabbat boxes

Any Diversion by Grantee: No

Dates of Reports by Grantee: 8/31/2022

Date of Verification: 8/31/2022

Results of Verification: The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

Name of the organization Houston Jewish Community Foundation	Employer identification number 76-0187329
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## Schedule I - Expenditure Responsibility Statements

Grantee Name: Houston Jewish Family Foundation

Address: 4131 South Braeswood Blvd.

Address: Houston, TX 77025

Grant Date: 4/26/2022

Grant Amount: \$200,000

Grant Expended: \$200,000

Grant Purpose: Chaplaincy Program

Any Diversion by Grantee: No

Dates of Reports by Grantee: 8/31/2022

Date of Verification: 8/31/2022

Results of Verification: The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

## Schedule I - Expenditure Responsibility Statements

Grantee Name: Houston Jewish Family Foundation

Address: 4131 South Braeswood Blvd.

Address: Houston, TX 77025

Grant Date: 12/31/2021

Grant Amount: \$100,000

Grant Expended: \$100,000

Grant Purpose: Burger Discretionary Fund

Any Diversion by Grantee: No

Dates of Reports by Grantee: 12/31/2021

Date of Verification: 12/31/2021

Results of Verification: The grantor has no reason to doubt the



Name of the organization Houston Jewish Community Foundation	Employer identification number 76-0187329
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accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.

Schedule I - Expenditure Responsibility Statements

Grantee Name: Houston Jewish Family Foundation

Address: 4131 South Braeswood Blvd.

Address: Houston, TX 77025

Grant Date: 7/7/2022

Grant Amount: \$31,032

Grant Expended: \$31,032

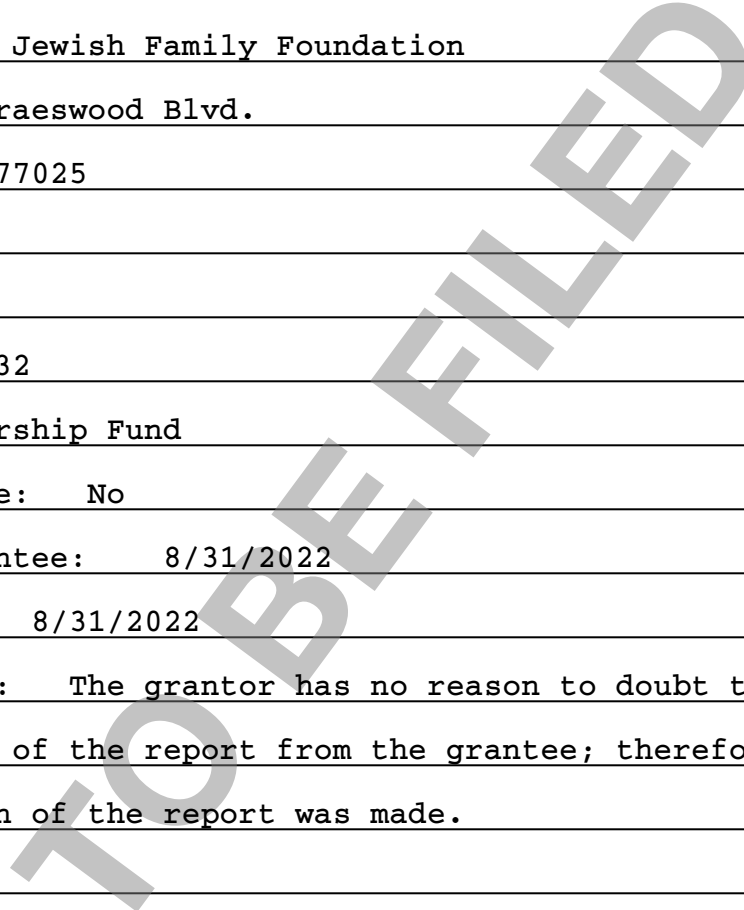
Grant Purpose: Scholarship Fund

Any Diversion by Grantee: No

Dates of Reports by Grantee: 8/31/2022

Date of Verification: 8/31/2022

Results of Verification: The grantor has no reason to doubt the accuracy or reliability of the report from the grantee; therefore, no independent verification of the report was made.



**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization **Houston Jewish Community Foundation** Employer identification number **76-0187329**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
██████████ 5603 S Braeswood Blvd Houston, TX 77096	Investment	Texas	0.	539.	Houston Jewish Community Foundation
██████████ 5603 S Braeswood Blvd Houston, TX 77096	Investment	Texas	0.	539.	Houston Jewish Community Foundation
██████████ 5603 S Braeswood Blvd Houston, TX 77096	Investment	Texas	4,931.	1,611,188.	Houston Jewish Community Foundation
HJCF Holdings, LLC - 81-4860969 5603 S Braeswood Blvd Houston, TX 77096	Investment	Texas	0.	31,311.	Houston Jewish Community Foundation

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
Jewish Federation of Greater Houston - 74-1109654, 5603 S Braeswood Blvd, Houston, TX 77096	Preserve and enrich Jewish communal life	Texas	501(c)(3)	7	N/A		X
Donald & Martha Kaplan Freedman Foundation - 45-5449056, 5603 S Braeswood Blvd, Houston, TX 77096	Support Houston Jewish Community Foundation	Texas	501(c)(3)	Line 12a, I	Houston Jewish Community Foundation	X	
The Becker Family Foundation - 76-0560995 5603 S Braeswood Blvd Houston, TX 77096	Support Jewish Federation of Greater Houston	Texas	501(c)(3)	Line 12a, I	Jewish Federation of Greater Houston		X
Alan F. & Diane R. Levin Family Foundation - 76-0613294, 5603 S Braeswood Blvd, Houston, TX 77096	Support Jewish Federation & Hstn Jewish Comm Fdn	Texas	501(c)(3)	Line 12a, I	Jewish Federation & Houston Jewish Comm Fdn	X	

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

Schedule R (Form 990) 2021

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
Mary L. and William J. Osher Foundation - 20-5094518, 5603 S Braeswood Blvd, Houston, TX 77096	Support Jewish Federation of Greater Houston	Texas	501(c)(3)	Line 12a, I	Jewish Federation of Greater Houston		X
The Rauch Foundation - 76-0300344 5603 S Braeswood Blvd Houston, TX 77096	Support Jewish Federation of Greater Houston	Texas	501(c)(3)	Line 12a, I	Jewish Federation of Greater Houston		X

TO BE FILED

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
Extremis Corporation - 76-0492189 5603 S Braeswood Blvd Houston, TX 77096	Dormant	TX	HJCF	C CORP	0.	0.	100%	X	
M. & J. Robinson CRAT - 76-6103916 5603 S Braeswood Blvd Houston, TX 77096	Remainder trust	TX	HJCF	TRUST	0.	0.			X

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

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

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	X	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	X	
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

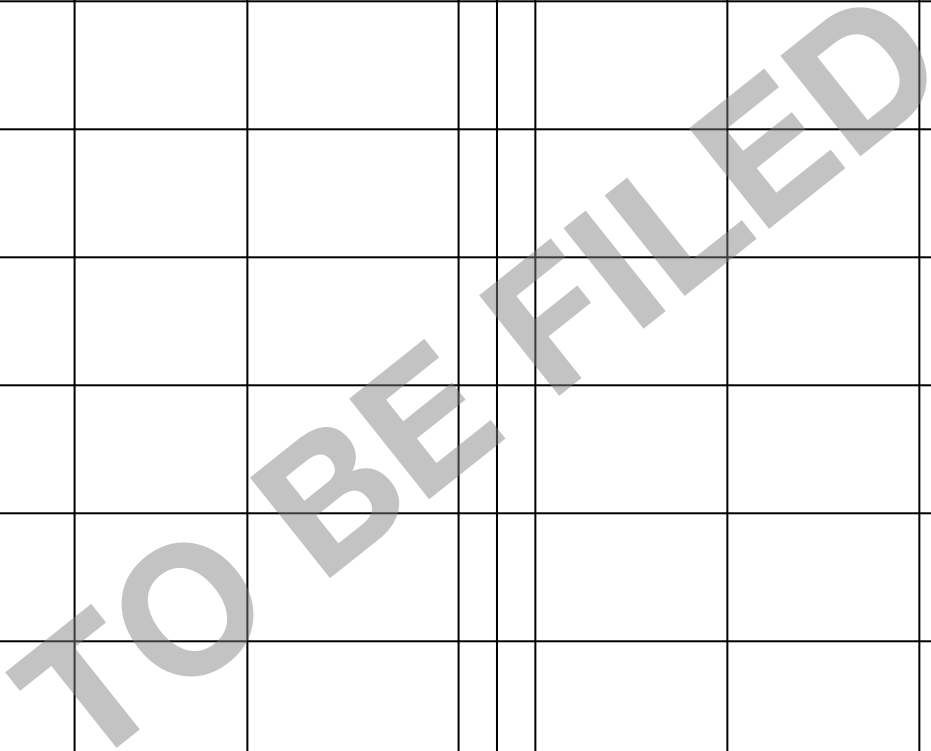
**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ██████████ Foundation	C	1,020,000.	Cash
(2) Jewish Federation of Greater Houston	C	2,859,220.	Cash
(3)			
(4)			
(5)			
(6)			

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

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

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



**Part VII** Supplemental Information

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

Lined area for providing supplemental information.

TO BE FILED