Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning 10-01-2020 , and ending 09-30-2021

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc
% MITCHEL ROSENZWEIG

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 42 East 69th Street
Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: New York, NY 10021

D Employer identification number: 13-1659627

E Telephone number: (212) 879-9300

G Gross receipts $ 318,986,131

F Name and address of principal officer:
Russell Robinson
42 East 69th Street
New York, NY 10021

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.JNF.org

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1926

M State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
Jewish National Fund gives all generations of Jews a unique voice in building a prosperous future for the land of Israel and its people.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	36
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	36
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	**5**	266
6	Total number of volunteers (estimate if necessary)	**6**	1,000
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	-18,556
b	Net unrelated business taxable income from Form 990-T, line 39	**7b**	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	85,126,908	110,036,803
9	Program service revenue (Part VIII, line 2g)	430,830	67,253
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	21,907,508	30,660,785
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	284,391	90,579
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	107,749,637	140,855,420
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	37,857,135	42,699,621
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	24,671,912	24,976,971
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶7,362,336		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	19,524,943	16,916,271
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	82,053,990	84,592,863
19	Revenue less expenses. Subtract line 18 from line 12	25,695,647	56,262,557

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	470,295,230	532,275,365
21	Total liabilities (Part X, line 26)	56,152,513	56,306,968
22	Net assets or fund balances. Subtract line 21 from line 20	414,142,717	475,968,397

Part II Signature Block

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

Sign Here

Signature of officer — Date: 2022-05-26

MITCHEL ROSENZWEIG cfo
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
				P01384178

Firm's name ▶ BDO USA LLP — Firm's EIN ▶

Firm's address ▶ 100 PARK AVENUE NEW YORK, NY 100175001 — Phone no. (212) 885-8000

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 . . . . . ☑

1 Briefly describe the organization's mission:

JEWISH NATIONAL FUND GIVES ALL GENERATIONS OF JEWS A UNIQUE VOICE IN BUILDING A PROSPEROUS FUTURE FOR THE LAND OF ISRAEL AND ITS PEOPLE.

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

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

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

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

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

4a (Code:) (Expenses $ 68,773,723 including grants of $ 42,699,621) (Revenue $ 67,253)

A NONPROFIT ORGANIZATION AND UNITED NATIONS NGO (NON-GOVERNMENTAL ORGANIZATION), JEWISH NATIONAL FUND (JNF) GIVES ALL GENERATIONS OF JEWS A UNIQUE VOICE IN BUILDING A PROSPEROUS FUTURE FOR THE LAND AND PEOPLE OF ISRAEL. JNF BEGAN IN 1901 AS A DREAM AND VISION TO REESTABLISH A HOMELAND IN ISRAEL FOR JEWISH PEOPLE EVERYWHERE. JEWS THE WORLD OVER COLLECTED COINS IN ICONIC JNF BLUE BOXES, PURCHASING LAND AND PLANTING TREES UNTIL ULTIMATELY, THEIR DREAM OF A JEWISH HOMELAND WAS A REALITY. JNF STRIVES TO BRING AN ENHANCED QUALITY OF LIFE TO ALL OF ISRAEL'S RESIDENTS AND TRANSLATE THESE ADVANCEMENTS TO THE WORLD BEYOND. JNF IS "GREENING" THE DESERT WITH MILLIONS OF TREES, BUILDING THOUSANDS OF PARKS ACROSS ISRAEL, FOSTERING COMMUNITY GROWTH FOR NEW GENERATIONS OF ISRAELIS TO CALL HOME, BOLSTERING ISRAEL'S WATER SUPPLY, HELPING DEVELOP INNOVATIVE ARID AGRICULTURE TECHNIQUES AND EDUCATING BOTH YOUNG AND OLD ABOUT THE FOUNDING AND IMPORTANCE OF ISRAEL AND ZIONISM. IN 2021 JNF ENTERED ITS 120TH YEAR AS ONE OF THE WORLD'S OLDEST JEWISH NON-PROFITS AND MAINTAINS A SPECIAL AND HISTORIC CONNECTION TO ISRAEL, IN THAT ITS EARLY WORK HELPED CREATE THE LAND AND EMPOWER ITS PEOPLE TO LATER BECOME A NATION. JNF IS SYNONYMOUS WITH THE BLUE BOX AND PLANTING TREES IN ISRAEL, AND HAS EVOLVED INTO SEVEN MAJOR PROGRAM AREAS, EACH WITH ITS OWN MAJOR GOALS AND PARTNERSHIPS WITHIN ISRAEL TO HELP PUT INTO PLACE THE PROJECTS THAT ARE MAINLY DONOR-DESIGNATED. CONTINUING ON WORK BEGUN IN 2013, JNF'S ONE BILLION DOLLAR ROADMAP FOR THE NEXT DECADE CAMPAIGN, HAS CREATED GROUND-BREAKING NEW VENTURES FOCUSING ON CONNECTING THE NEXT GENERATION TO ISRAEL, BUILDING COMMUNITIES IN ISRAEL'S FRONTIER REGIONS OF THE NEGEV AND GALILEE, AND CREATING INFRASTRUCTURE FOR ECOLOGY, SPECIAL NEEDS, AND HERITAGE PRESERVATION. JNF ENHANCES QUALITY OF LIFE BY BUILDING NEW COMMUNITIES AND BOLSTERING EXISTING ONES. JNF'S BLUEPRINT NEGEV CAMPAIGN IS HELPING TO BRING HUNDREDS OF THOUSANDS OF NEW RESIDENTS TO THE NEGEV DESERT WHILE ITS GO NORTH CAMPAIGN FOCUSES ON THE COMMUNITIES OF NORTHERN ISRAEL. JNF'S WORK IN COMMUNITY BUILDING INCLUDES, THE BE'ER SHEVA RIVER PARK, SDEROT INDOOR RECREATION CENTER, CENTRAL ARAVA MEDICAL CENTER, ESHKOL RESILIENCE CENTER, PROJECT WADI ATTIR, HALUTZA, THE GALILEE CULINARY INSTITUTE BY JNF, A FOOD TECH HUB, AND SO MUCH MORE. JNF IS THE SINGLE LARGEST PROVIDER OF ZIONIST ENGAGEMENT PROGRAMS IN THE U.S. AND OFFERS MYRIAD WAYS TO CONNECT YOUNG AMERICANS TO ISRAEL. ITS ISRAEL EDUCATION AND ADVOCACY PROGRAMS TAKE PEOPLE FROM BIRTH TO BOARDROOM ON THEIR JEWISH AND ZIONIST JOURNEY. THEY START IN KINDERGARTEN AND CONTINUE THROUGH COLLEGE LIFE, ENGAGING, EDUCATING, AND HELPING STUDENTS FOSTER A GREATER CONNECTION AND COMMITMENT TO THE LAND AND PEOPLE OF ISRAEL. JNF'S ISRAEL CONTINUUM PROGRAMMING INCLUDES, THE CAMPUS FELLOWSHIP, CARAVAN FOR DEMOCRACY, ALTERNATIVE BREAK, BIRTHRIGHT ISRAEL, FACULTY FELLOWSHIP PROGRAM IN ISRAEL, ALEXANDER MUSS HIGH SCHOOL IN ISRAEL, B'NAI MITZVAH PROJECTS, PLANT YOUR WAY TO ISRAEL AND GREEN HORIZONS. WITH THE MANAGEMENT OF THE ALEXANDER MUSS HIGH SCHOOL IN ISRAEL (AMHSI-JNF), WHICH, SINCE 1972, HAS BEEN PIONEERING THE ACADEMIC AND EXPERIENTIAL STUDY OF ISRAEL AND JEWISH HISTORY AT THE HIGH SCHOOL LEVEL, JNF SETS THE GOAL OF FURTHER GROWING AND ENHANCING JEWISH CONTINUITY AND ISRAEL CONNECTIVITY AMONGST YOUTH BY OFFERING SEMESTER ABROAD PROGRAMS TO BETTER ENRICH STUDENT KNOWLEDGE BASE AND TO BETTER PREPARE THEM FOR COLLEGE STUDY. TO DATE, OVER 30,000 STUDENTS HAVE BENEFITED FROM AN EDUCATION AT AMHSI-JNF AND MANY STUDENTS HAVE RECEIVED A FELLOWSHIP OR GRANT TOWARDS THEIR TUITION. IN 2022, THE SCHOOL WILL CELEBRATE ITS 50TH ANNIVERSARY. JNF AND ITS PARTNERS SUPPORT MANY AFFILIATES IN ISRAEL SUCH AS GREEN HORIZONS, THE GUSH ETZION VISITOR CENTER MUSEUM, HALUTZA COMMUNITIES, HASHOMER HACHADASH, THE ARAVA INSTITUTE FOR ENVIRONMENTAL STUDIES, THE ARAVA INTERNATIONAL CENTER FOR AGRICULTURE TRAINING, SPECIAL IN UNIFORM, LOTEM, MAKOM, NEFESH B'NEFESH, THE LAUDER EMPLOYMENT CENTER, AND WESTERN GALILEE NOW. JNF'S FUNDRAISING EFFORTS HAVE ALSO SUPPORTED ISRAEL'S FIREFIGHTERS THROUGH THE PROVISION OF FIRETRUCKS AND FIREFIGHTING APERATUS, LIFE-SAVING EQUIPMENT, AND THE BUILDING OF NEW FIRE STATIONS. COMMUNITY BUILDING LAUDER EMPLOYMENT CENTER THE LAUDER EMPLOYMENT CENTER (LEC) WAS ESTABLISHED IN BE'ER SHEVA IN 2015 TO BRIDGE THE GAPS BETWEEN JOB SEEKERS, NEGEV COMPANIES, AND ACADEMIC INSTITUTIONS. BASED ON THIS SUCCESS AND WORK MODEL, THE LEC DUPLICATED ITSELF IN THE GALILEE. BOTH CENTERS HAVE THE SAME GOAL-BOOSTING ECONOMIC DEVELOPMENT IN ISRAEL'S FRONTIER. THE LAUDER CENTER OF THE NEGEV FINISHED ITS 2021 INTERNSHIP PROGRAM WITH OVER 95% OF INTERNS STAYING IN THE NEGEV AFTER THEIR STUDIES AND 90% WORKING IN THEIR FIELD OF STUDY. THEY ALSO LAUNCHED THE TECH EMPLOYMENT FORUM WITH 10 NEGEV HI-TECH FIRMS MEETING WITH HEADS OF COMPUTER SCIENCE DEPARTMENTS IN THE AREA TO BRIDGE EMPLOYMENT GAPS AND BETTER PREPARE TECH STUDENTS FOR THE JOB MARKET. THE LAUDER CENTER OF THE GALILEE IS SUPPORTING RELOCATION OF PROFESSIONALS AND COMPANIES FROM ISRAEL'S CENTER TO THE GALILEE BY OFFERING A COMPREHENSIVE RELOCATION PACKAGE THAT CONSIDERS ALL THE THINGS A PERSON NEEDS WHEN MOVING TO A NEW LOCATION: FINDING THE RIGHT COMMUNITY AND HOUSING, SECURING JOBS FOR BOTH PARTNERS, FINDING SCHOOLING AND EXTRACURRICULARS FOR THE KIDS, AND SO MUCH MORE. THEIR RELOCATION COORDINATOR HELPS FACILITATE THIS IMPORTANT WORK AND BUILDS REGION-WIDE PARTNERSHIPS. 2021 BROUGHT WITH IT THE ESTABLISHMENT OF THE JNF SMALL BUSINESS ASSOCIATION OF THE NEGEV AND THE GALIL. IN ITS FIRST SIX MONTHS, 120 SMALL BUSINESSES JOINED OUR SBA TO RECEIVE FINANCIAL ASSISTANCE AND GUIDANCE IN BUILDING AND MAINTAINING WEBSITES, MARKETING/PROMOTION, AND SHIPPING. SDEROT OVER THE PAST YEAR, SDEROT EXPANDED AND DEVELOPED NEW NEIGHBORHOODS AND PARKS AND SAW A 10% GROWTH IN POPULATION. THE NEW JEWISH NATIONAL FUND SDEROT ANIMAL ASSISTED THERAPY CENTER WAS FINISHED AND HAS 500 PATIENTS EVERY WEEK, THANKS TO A SIGNIFICANT GIFT FROM FAITH BIBLE CHAPEL, AND HELPS THE REGION'S KIDS AND YOUTH COPE WITH MENTAL HEALTH ISSUES AND PROVIDES PHYSICAL THERAPY. CONSTRUCTION ON THE NEW 11,500 SQ. FT. SDEROT RESILIENCE CENTER WAS COMPLETED AND PROVIDES CRITICALLY NEEDED SOCIAL SERVICES TO THOUSANDS OF RESIDENTS. ADJACENT TO THE NEW MUSIC NEIGHBORHOOD, ARE THE NEW MUSIC PARK AND PLAYGROUND. ESHKOL REGION AS ONE OF THE FASTEST GROWING REGIONS IN ISRAEL PER CAPITA, THE HALUTZA COMMUNITIES ARE MAKING STRIDES IN THEIR SOCIAL, RESIDENTIAL, AND ECONOMIC INFRASTRUCTURE, WELCOMING OVER 110 NEW RESIDENTS THIS PAST YEAR. THE HELMSLEY CHARITABLE TRUST HALUTZA MEDICAL CENTER PROVIDED NEARLY 27,000 MEDICAL VISITS-IN ADDITION TO THE NEW DENTAL CLINIC THAT OPENED LAST YEAR. OTHER HIGHLIGHTS - 45 NEW HOMES WERE CONSTRUCTED, AND 96 NEW HOUSING SITES ARE UNDER CONSTRUCTION IN SHLOMIT WITH 54 NEARING COMPLETION. - THE NEW HALUTZA COMMUNITY POOL IN BNEI NETZARIM IS COMPLETED. - THE SPORTS COMPLEX BROKE GROUND, AND INCLUDES A BASKETBALL GYM, NINJA TRAINING COURSE, TENNIS COURTS AND A LARGE SPORTS FIELD. - DUE TO COVID-19, MANY RESIDENTS PIVOTED THEIR CAREERS TO AGRICULTURE, OPENING THREE NEW GREENHOUSES AND EMPLOYING OVER A DOZEN NEW FARMERS. - TWO HALUTZA HIGH SCHOOLS WERE NAMED AMONG THE TOP 50 BEST SCHOOLS IN ISRAEL BASED ON ACADEMIC EXCELLENCE AND MATRICULATION RATE. - IN THE GAZA ENVELOPE, THE GROOVE TECH PROVIDES A SAFE PLACE FOR OVER 3,000 KIDS TO PLAY AND LEARN. - THE EXPANSION OF THE JEWISH NATIONAL FUND PSYCHOLOGICAL CENTER IN SHA'AR HANEGEV IS COMPLETE AND PROVIDES HIGH-QUALITY CARE AND ASSISTANCE TO THE REGION'S RESIDENTS, MANY OF WHOM SUFFER FROM PTSD. IN THE ARAVA VALLEY - THE STATE-OF-THE-ART SAPIR AQUATIC SPORTS CENTER, WHICH INCLUDES AN OLYMPIC-SIZED SWIMMING POOL OPENED IN AUGUST OFFERING A WONDERFUL RECREATIONAL AND HEALTHY OPTION TO THE COMMUNITY ALL YEAR LONG. THE FACILITY HAS ALSO HOSTED DOZENS OF ATHLETES WHO TRAINED IN THE AQUATIC CENTER JUST BEFORE THE 2021 OLYMPICS. - THE NEW CAMPUS AT THE ARAVA INTERNATIONAL CENTER FOR AGRICULTURAL TRAINING (AICAT) EXPANDED AICAT'S CAPACITY TO 2,500 STUDENTS. THIS YEAR THE ISRAELI GOVERNMENT APPROVED 250 MORE STUDENTS TO THE PROGRAM, INCREASING AICAT'S IMPACT IN DEVELOPING COUNTRIES. - THE ARAVA EMERGENCY RESPONSE CENTER IS OPERATING AT FULL CAPACITY, PROVIDING THE COMMUNITY WITH IMMEDIATE RESPONSES TO ANY AND ALL URGENT EVENTS AND ENABLING SAFER RECREATION AND PEACE OF MIND TO RESIDENTS AND VISITORS IN THE AREA. - THANKS TO THE SUPPORT OF THE HOUSING DEVELOPMENT, 330 HOUSING LOTS HAVE BEEN ESTABLISHED IN IDAN, EIN YAHAV, HATZEVA, AND ZUQIM. 65 FAMILY LOTS WILL SOON BE COMPLETED IN FARAN, AND 52 LOTS IN ZOFAR WILL START INFRASTRUCTURE WORK AT THE END OF THE YEAR. - THE COMMUNITY CENTER IN ZUQIM OFFERS RESIDENTS A COMFORTABLE AND INDOOR PLACE FOR PUBLIC GATHERINGS, MEETINGS, AND COMMUNITY EVENTS. - CONSTRUCTION OF THE NEW 12,000-SQ.-FT. JEWISH NATIONAL FUND SAPIR INDOOR SPORTS FACILITY WAS C

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

4c	(Code:	) (Expenses $	including grants of $	) (Revenue $)
4d	Other program services (Describe in Schedule O.)			
	(Expenses $	including grants of $	) (Revenue $)	
4e	**Total program service expenses** ▶	68,773,723		

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	84		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c Yes	

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

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 266				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	**2b**	Yes		
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**	Yes		
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*	**3b**	Yes		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**	Yes		
b	If "Yes," enter the name of the foreign country: ▶IS See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	**5c**			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	**6a**			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**	Yes		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**	Yes		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**			No
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**			No
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**			No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**			No
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**				
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders **11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. **12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.	**13a**			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**				
c	Enter the amount of reserves on hand **13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**			No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	**14b**			
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?	**15**			No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	**16**			No

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	**1a**	36		
b	Enter the number of voting members included in line 1a, above, who are independent	**1b**	36		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		**9**		No

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ AL, AR, CA, CO, FL, GA, IL, KS, KY, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OR, PA, RI, SC, TN, VA, WV, WI

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (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 in Schedule O)

19 Describe in 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: ▶ MITCHEL ROSENZWEIG 78 RANDALL AVENUE Rockville Centre, NY 11570 (516) 678-6805

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or 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 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 dotted 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)	(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			
(1) RUSSELL ROBINSON CEO	40.0 0.0			X				762,462	0	63,426
(2) MITCHEL ROSENZWEIG CFO	40.0 0.0			X				335,827	0	40,869
(3) MATTHEW BERNSTEIN CHIEF PLANNED GIVING OFFICER	40.0 0.0				X			322,349	0	43,071
(4) RICHARD KROSNICK CHIEF DEVELOPMENT OFFICER	40.0 0.0				X			271,182	0	35,507
(5) STEPHEN BACH CHIEF ADMINISTRATIVE OFFICER	40.0 0.0				X			269,555	0	36,899
(6) DIANE SCAR NATIONAL CAMPAIGN DIRECTOR	40.0 0.0					X		242,339	0	36,288
(7) SHARON FREEDMAN NATIONAL CAMPAIGN DIRECTOR	40.0 0.0					X		236,409	0	27,052
(8) YAEL KANE CHIEF ISRAEL ADVOCACY AND LEAD	40.0 0.0					X		221,190	0	33,112
(9) MICHAEL FEINMAN EXECUTIVE DIRECTOR	40.0 0.0					X		198,544	0	32,911
(10) Debbie Freedman CHIEF HUMAN RESOURCES OFFICER	40.0 0.0					X		199,130	0	22,110
(11) RONALD S LAUDER CHAIRPERSON EMERITUS	3.0 1.0	X		X				0	0	0
(12) DR SOL LIZERBRAM PRESIDENT	5.0 0.0	X		X				0	0	0
(13) JEFFREY E LEVINE CHAIRPERSON OF THE BOARD	3.0 0.0	X		X				0	0	0
(14) MICHAEL BLANK TREASURER	3.0 0.0	X		X				0	0	0
(15) MYRA CHACK-FLEISCHER SECRETARY	3.0 0.0	X		X				0	0	0
(16) DR ROBERT BENEDON BOARD MEMBER	3.0 0.0	X						0	0	0
(17) ISAAC BLACHOR BOARD MEMBER	3.0 0.0	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 dotted 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)	(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			
(18) EDWARD BLANK BOARD MEMBER	3.00	X						0	0	0
(19) BARBARA BURRY BOARD MEMBER	3.00	X						0	0	0
(20) STEVEN CRYSTAL BOARD MEMBER	3.00	X						0	0	0
(21) TONI DUSIK BOARD MEMBER	3.00	X						0	0	0
(22) CHARLES S FAX BOARD MEMBER	3.00	X						0	0	0
(23) BARUCH FELLNER ESQ BOARD MEMBER	3.00	X						0	0	0
(24) DAVID FRANK THRU 121 BOARD MEMBER	3.00	X						0	0	0
(25) SCOTT H GENDELL BOARD MEMBER	3.00	X						0	0	0
(26) BRUCE K GOULD BOARD MEMBER	3.00	X						0	0	0
(27) DAVID GREENBAUM board member	3.00	X						0	0	0
(28) VIVIAN GROSSMAN BOARD MEMBER	3.00	X						0	0	0
(29) BENJAMIN GUTMANN BOARD MEMBER	3.00	X						0	0	0
(30) MICHAEL H JACOBSON BOARD MEMBER	3.00	X						0	0	0
(31) HAROLD L KAPLAN BOARD MEMBER	3.00	X						0	0	0
(32) MICHAEL KESSLER BOARD MEMBER	3.00	X						0	0	0
(33) JOSEPH KORN BOARD MEMBER	3.00	X						0	0	0
(34) MICHAEL LEDERMAN BOARD MEMBER	3.00	X						0	0	0
(35) ROBERT B LEVINE BOARD MEMBER	3.00	X						0	0	0
(36) NINA PAUL BOARD MEMBER	3.00	X						0	0	0
(37) PENNY ROSEN BOARD MEMBER	3.00	X						0	0	0
(38) SCOTT N SCHREIBER ESQ BOARD MEMBER	3.00	X						0	0	0
(39) KENNETH SEGEL BOARD MEMBER	3.00	X						0	0	0
(40) RHODA SMOLOW BOARD MEMBER	3.00	X						0	0	0
(41) DR JOEL SPALTER BOARD MEMBER	3.00	X						0	0	0
(42) MYRON D STAYMAN BOARD MEMBER	3.00	X						0	0	0
(43) RON WERNER BOARD MEMBER	3.00	X						0	0	0
(44) ROBERT M WIGODA ESQ BOARD MEMBER	3.00	X						0	0	0
(45) JOSEPH WOLFSON BOARD MEMBER	3.00	X						0	0	0
(46) ALAN WOLK BOARD MEMBER	3.00	X						0	0	0
(47) JASON ZENNER BOARD MEMBER	3.00	X						0	0	0
1b Sub-Total . . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . . ▶								3,058,987	0	371,245

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 ▶ 55

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

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
DIRECT DIMENSIONS INC, 303 FIFTH AVENUE ROOM 206 NEW YORK, NY 10016	Printing	1,314,139
TELERX MARKETING INC, PO BOX 8500-53888 PHILADELPHIA, PA 191783888	FEES FOR CALL CENTER	808,140
ADDAPPTATION, 21 HEMLOCK COURT NEWFIELDS, NH 03856	CONSULTING	624,868
Richard Wexler, 502 RAVINE DRIVE HIGHLAND PARK, IL 60035	Consulting	237,500
JEFFREY PRESS, 9700 OLD COURT ROAD WINDSOR MILL, MD 21244	PRINTING FOR MAILING	237,188

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 ▶ 7

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	5,863,562			
	d Related organizations	1d				
	e Government grants (contributions)	1e	3,330,267			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	100,842,974			
	g Noncash contributions included in lines 1a - 1f: $	1g	8,662,000			
	h **Total.** Add lines 1a-1f		110,036,803			
Program Service Revenue		Business Code				
	2a MISSION INCOME (TOURS)	900099	67,253	67,253		
	b					
	c					
	d					
	e					
	f All other program service revenue.					
	g **Total.** Add lines 2a–2f		67,253			
	3 Investment income (including dividends, interest, and other similar amounts)		10,062,292		-18,556	10,080,848
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		0			

		(i) Real	(ii) Personal				
	6a Gross rents	6a 478,106					
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c 478,106	0				
	d Net rental income or (loss)			478,106			478,106
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory	7a 196,462,605	1,303,327				
	b Less: cost or other basis and sales expenses	7b 175,869,730	1,297,709				
	c Gain or (loss)	7c 20,592,875	5,618				
	d Net gain or (loss)			20,598,493			20,598,493
Other Revenue	8a Gross income from fundraising events (not including $ 5,863,562 of contributions reported on line 1c). See Part IV, line 18	8a 507,186					
	b Less: direct expenses	8b 963,272					
	c Net income or (loss) from fundraising events			-456,086			-456,086
	9a Gross income from gaming activities. See Part IV, line 19	9a 0					
	b Less: direct expenses	9b 0					
	c Net income or (loss) from gaming activities			0			
	10a Gross sales of inventory, less						

returns and allowances . .	10a	0				
b Less: cost of goods sold . .	10b	0				
c Net income or (loss) from sales of inventory . . ▶			0			
Miscellaneous Revenue		Business Code				
11a MISCELLANEOUS INCOME		900099	68,559			68,559
b						
c						
d All other revenue						
e **Total.** Add lines 11a–11d . . . . . ▶			68,559			
12 **Total revenue.** See instructions . . . . . ▶			140,855,420	67,253	-18,556	30,769,920

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	10,452,621	10,452,621		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	6,500	6,500		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	32,240,500	32,240,500		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	2,274,309	1,416,619	384,327	473,363
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	17,279,347	10,802,017	2,877,281	3,600,049
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,415,032	909,418	223,857	281,757
9 Other employee benefits	2,591,228	1,676,134	413,582	501,512
10 Payroll taxes	1,417,055	911,966	224,484	280,605
11 Fees for services (non-employees):				
a Management	0			
b Legal	72,550		72,550	
c Accounting	168,721	22,107	146,614	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	3,018,414		3,018,414	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,255,036	1,995,699		259,337
12 Advertising and promotion	965,969	669,569	87,137	209,263
13 Office expenses	3,176,483	2,094,916	309,648	771,919
14 Information technology	0			
15 Royalties	0			
16 Occupancy	2,851,238	2,039,700	332,212	479,326
17 Travel	297,300	213,934	37,062	46,304
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	546,951	462,126	57,752	27,073
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	718,707	495,908	71,871	150,928
23 Insurance	381,230	322,948	40,865	17,417
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a TAXES & LICENSES	725,027	614,529	41,556	68,942
b MISSIONS	671,800	645,084	25,828	888
c SPEAK/HONORARIUM FEES & PROM	504,084	366,555	26,477	111,052
d EQUIPMENT AND LEASES	344,714	242,651	45,305	56,758
e All other expenses	218,047	172,222	19,982	25,843
25 **Total functional expenses.** Add lines 1 through 24e	84,592,863	68,773,723	8,456,804	7,362,336
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ 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 IX . . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		1,396,803	1	4,834,444
	2	Savings and temporary cash investments		98,138,545	2	69,396,344
	3	Pledges and grants receivable, net		38,572,170	3	50,032,819
	4	Accounts receivable, net		0	4	0
	5	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		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		0	6	0
	7	Notes and loans receivable, net		184,493	7	150,375
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		777,650	9	1,063,510
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 31,272,781			
	b	Less: accumulated depreciation	10b 13,662,405	18,165,191	10c	17,610,376
	11	Investments—publicly traded securities		213,446,511	11	276,963,342
	12	Investments—other securities. See Part IV, line 11		3,740,341	12	3,100,677
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		95,873,526	15	109,123,478
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		470,295,230	16	532,275,365
Liabilities	17	Accounts payable and accrued expenses		2,544,696	17	3,766,741
	18	Grants payable		7,570,616	18	4,959,343
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		4,578,650	23	4,784,689
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		41,458,551	25	42,796,195
	26	**Total liabilities.** Add lines 17 through 25		56,152,513	26	56,306,968
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		338,687,388	27	382,311,986
	28	Net assets with donor restrictions		75,455,329	28	93,656,411
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		414,142,717	32	475,968,397
	33	Total liabilities and net assets/fund balances		470,295,230	33	532,275,365

Part XI Reconcilliation 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	140,855,420
2	Total expenses (must equal Part IX, column (A), line 25)	2	84,592,863
3	Revenue less expenses. Subtract line 2 from line 1	3	56,262,557
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	414,142,717
5	Net unrealized gains (losses) on investments	5	5,663,965
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-100,842
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	475,968,397

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in 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?	3a		No
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 in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

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 **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

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? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	79,753,909	72,035,087	81,230,434	85,126,908	110,036,803	428,183,141
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge. .						0
4 **Total.** Add lines 1 through 3	79,753,909	72,035,087	81,230,434	85,126,908	110,036,803	428,183,141
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). .						78,778,368
6 **Public support.** Subtract line 5 from line 4.						349,404,773

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4. .	79,753,909	72,035,087	81,230,434	85,126,908	110,036,803	428,183,141
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	8,814,305	10,574,000	11,321,972	10,627,818	10,540,398	51,878,493
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .				5,534		5,534
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .	9,871	3,500	57,323	58,628	68,559	197,881
11 **Total support.** Add lines 7 through 10						480,265,049

12 Gross receipts from related activities, etc. (see instructions) 12 1,620,717

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 72.752 %

15 Public support percentage for 2019 Schedule A, Part II, line 14 . . . . . 15 70.229 %

16a **33 1/3% support test—2020.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2019.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 **Total support.** (Add lines 9, 10c, 11, and 12.). .						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2020** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2019** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2020.** 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—2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

- **a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- **b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- **c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		

3 Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No" provide details in* ***Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI.*** *the role played by the organization in this regard.*	**3b**		

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

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

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

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

Section C - Distributable Amount

			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	**1**	
2	Enter 85% of line 1	**2**	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	**3**	
4	Enter greater of line 2 or line 3	**4**	
5	Income tax imposed in prior year	**5**	
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	**6**	

7 ☐ Check here if the current year is the organization's first as a non-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 **Total annual distributions.** 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 2020 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-2020**	**(iii) Distributable Amount for 2020**
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- *explain in* ***Part VI***). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015.			
b From 2016.			
c From 2017.			
d From 2018.			
e From 2019.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
7 **Excess distributions carryover to 2021.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016.			
b Excess from 2017.			
c Excess from 2018.			
d Excess from 2019.			
e Excess from 2020.			

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).

Facts And Circumstances Test

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047 2020

Name of the organization	Employer identification number
Jewish National Fund (Keren Kayemeth Leisrael) Inc	13-1659627

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)( ) (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 other 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 or 990-EZ), 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, 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, 990-EZ, or 990-PF), 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		$ RESTRICTED	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

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
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

Name of organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.)** ▶ **$** _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(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

Additional Data

Return to Form

Software ID:

Software Version:

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

2020

Open to Public Inspection

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	95	
2	Aggregate value of contributions to (during year)	10,481,477	
3	Aggregate value of grants from (during year)	6,918,723	
4	Aggregate value at end of year	22,117,402	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☑ Yes ☐ No

Part II Conservation Easements.

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

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

☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X ▶ $ _____

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 are a 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 programs
- **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 in Part XIII . . . . ☐

Part V Endowment Funds.

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	8,169,106	7,776,207	6,995,899	6,370,222	5,803,074
b	Contributions . . .	430,000	400,000	700,000	500,000	400,000
c	Net investment earnings, gains, and losses	938,579	187,962	286,808	301,177	441,157
d	Grants or scholarships . . .					
e	Other expenditures for facilities and programs . . .	202,300	195,063	206,500	175,500	274,009
f	Administrative expenses					
g	End of year balance	9,335,385	8,169,106	7,776,207	6,995,899	6,370,222

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

- **a** Board designated or quasi-endowment ▶ .....
- **b** Permanent endowment ▶ 88.220 %
- **c** Term endowment ▶ 11.780 %

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	**3a(i)**		No
(ii) Related organizations	**3a(ii)**		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

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		1,147,500		1,147,500
b Buildings		20,718,344	4,705,243	16,013,101
c Leasehold improvements		111,211	107,500	3,711
d Equipment		4,849,206	4,574,026	275,180
e Other		4,446,520	4,275,636	170,884
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				17,610,376

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		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (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)INV. HELD UNDER SPLIT-INT.	106,108,256
(2)INVESTMENT IN REAL ESTATE	1,677,165
(3)PROPERTY HELD FOR SALE	44,000
(4)BENEFICIAL INTEREST IN TRUST	706,505
(5)CASH SURRENDER VALUE OF INSUR.	346,596
(6)PRECIOUS COINS AND MEDALS	193,510
(7)SECURITY DEPOSITS	65,150
(8)OTHER ASSETS	-22,401
(9)DEPOSIT RECEIVABLE	4,697
(10)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* ▶	109,123,478

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	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	42,796,195

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 FIN 48 (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.

1	Total revenue, gains, and other support per audited financial statements			1	143,400,129
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	5,663,965		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-100,842		
e	Add lines **2a** through **2d**			2e	5,563,123
3	Subtract line **2e** from line **1**			3	137,837,006
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,018,414		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	3,018,414
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	140,855,420

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

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

1	Total expenses and losses per audited financial statements			1	81,574,449
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	81,574,449
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,018,414		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	3,018,414
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	84,592,863

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.

Return Reference	Explanation
Schedule D, Part V, Line 4:	The primary objective of the endowment in the near term is to preserve the normal market value of its assets in order to limit realized and unrealized investment losses. The secondary objective of the endowment is to grow the value of its assets at a modest rate to allow for continued support of JNF's operations.
Schedule D, Part X, Line 2:	JEWISH NATIONAL FUND ADOPTED THE PROVISIONS OF ASC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. UNDER ASC 740, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL NOT BE SUSTAINED. THE IMPLEMENTATION OF ASC 740 HAD NO IMPACT ON THE ORGANIZATION'S FINANCIAL STATEMENTS. THE ORGANIZATION DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT WILL RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. THE ORGANIZATION HAS FILED FOR AND RECEIVED INCOME TAX EXEMPTIONS IN THE JURISDICTIONS WHERE IT IS REQUIRED TO DO SO. ADDITIONALLY, THE ORGANIZATION HAS FILED IRS FORM 990 TAX RETURNS, AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHEN IT IS REQUIRED. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING AUTHORITIES.
SCHEDULE D, PART XI, LINE 2D:	CHANGES IN VALUE OF SPLIT INTEREST AGREEMENTS ....$(100,842)

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number

13-1659627

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 Activites 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 region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
(1) Middle East and North Africa	1	7	Grantmaking		34,115,500
(2) Middle East and North Africa			Investments		900,000
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	1	7			35,015,500
b Total from continuation sheets to Part I . . .					
c Totals (add lines 3a and 3b)	1	7			35,015,500

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)
(1)			Middle East and North Africa	GENERAL SUPPORT	2,836,130	wire			
(2)			Middle East and North Africa	GENERAL SUPPORT	2,683,016	wire			
(3)			Middle East and North Africa	GENERAL SUPPORT	2,475,000	wire			
(4)			Middle East and North Africa	GENERAL SUPPORT	2,380,000	wire			
(5)			Middle East and North Africa	GENERAL SUPPORT	2,105,118	wire			
(6)			Middle East and North Africa	GENERAL SUPPORT	1,930,000	wire			
(7)			Middle East and North Africa	GENERAL SUPPORT	1,875,000	wire			
(8)			Middle East and North Africa	GENERAL SUPPORT	1,848,000	wire			
(9)			Middle East and North Africa	GENERAL SUPPORT	1,481,318	wire			
(10)			Middle East and North Africa	GENERAL SUPPORT	1,031,429	wire			
(11)			Middle East and North Africa	GENERAL SUPPORT	993,000	wire			
(12)			Middle East and North Africa	GENERAL SUPPORT	960,325	wire			
(13)			Middle East and North Africa	GENERAL SUPPORT	950,000	wire			
(14)			Middle East and North Africa	GENERAL SUPPORT	759,441	wire			
(15)			Middle East and North Africa	GENERAL SUPPORT	750,000	wire			
(16)			Middle East and North Africa	GENERAL SUPPORT	750,000	wire			
(17)			Middle East and North Africa	GENERAL SUPPORT	700,000	wire			
(18)			Middle East and North Africa	GENERAL SUPPORT	681,455	wire			
(19)			Middle East and North Africa	GENERAL SUPPORT	569,500	wire			
(20)			Middle East and North Africa	GENERAL SUPPORT	563,828	wire			
(21)			Middle East and North Africa	GENERAL SUPPORT	502,000	wire			
(22)			Middle East and North Africa	GENERAL SUPPORT	467,950	wire			
(23)			Middle East and North Africa	GENERAL SUPPORT	437,113	wire			
(24)			Middle East and North Africa	GENERAL SUPPORT	408,750	wire			
(25)			Middle East and North Africa	GENERAL SUPPORT	371,269	wire			
(26)			Middle East and North Africa	GENERAL SUPPORT	369,300	wire			
(27)			Middle East and North Africa	GENERAL SUPPORT	300,000	wire			
(28)			Middle East and North Africa	GENERAL SUPPORT	257,208	wire			
(29)			Middle East and North Africa	GENERAL SUPPORT	248,062	wire			
(30)			Middle East and North Africa	GENERAL SUPPORT	248,000	wire			
(31)			Middle East and North Africa	GENERAL SUPPORT	247,037	wire			
(32)			Middle East and North Africa	GENERAL SUPPORT	245,000	wire			
(33)			Middle East and North Africa	GENERAL SUPPORT	200,000	wire			
(34)			Middle East and North Africa	GENERAL SUPPORT	120,000	wire			
(35)			Middle East and North Africa	GENERAL SUPPORT	105,500	wire			
(36)			Middle East and North Africa	GENERAL SUPPORT	100,000	wire			
(37)			Middle East and North Africa	GENERAL SUPPORT	100,000	wire			
(38)			Middle East and North Africa		100,000	wire			
(39)			Middle East and North Africa		91,500	wire			
(40)			Middle East and North Africa		88,554	wire			
(41)			Middle East and North Africa		87,500	wire			
(42)			Middle East and North Africa		86,950	wire			
(43)			Middle East and North Africa		85,000	wire			
(44)			Middle East and North Africa		75,000	wire			
(45)			Middle East and North Africa		72,790	wire			
(46)			Middle East and North Africa		67,500	wire			
(47)			Middle East and North Africa		45,000	wire			
(48)			Middle East and North Africa		43,000	wire			
(49)			Middle East and North Africa		39,100	wire			
(50)			Middle East and North Africa		25,000	wire			
(51)			Middle East and North Africa		25,000	wire			
(52)			Middle East and North Africa		25,000	wire			
(53)			Middle East and North Africa		21,000	wire			
(54)			Middle East and North Africa		20,000	wire			
(55)			Middle East and North Africa		16,166	wire			
(56)			Middle East and North Africa		10,000	wire			
(57)			Middle East and North Africa		10,000	wire			
(58)			Middle East and North Africa		6,691	wire			
(59)			North America		25,000	wire			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 59

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)
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

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.

ReturnReference	Explanation
Schedule F, Part I, Line 2:	THE JEWISH NATIONAL FUND ("JNF") IS DEVOTED TO PROMOTING AND FURTHERING THE CULTURAL, PHYSICAL, SOCIAL, MEDICAL, AGRICULTURAL AND GENERAL WELFARE OF THE PEOPLE OF ISRAEL. ONE OF THE PRINCIPAL WAYS JNF ACCOMPLISHES THIS MISSION IS BY GRANTING FUNDS TO SUPPORT PROJECTS AND ORGANIZATIONS IN ISRAEL. ALL FUNDS GRANTED (AND REPORTED ON SCHEDULE F) ARE MADE TO ORGANIZATIONS LOCATED IN ISRAEL FOR THE PURPOSES OF BETTERING THE ISRAELI SOCIETY. JNF TAKES ITS RESPONSIBILITY OF MONITORING THESE PROJECTS VERY SERIOUSLY AND UNDERTAKES RIGOROUS PROCESSES TO ENSURE THAT THE FUNDS GRANTED ARE USED FOR THE PURPOSES INTENDED. JNF ESTABLISHED THE ISRAEL RELATIONS COMMITTEE WHICH TRAVELS ANNUALLY TO ISRAEL TO STUDY IN-DEPTH THE NEEDS, REVIEW ONGOING PROJECTS, AND EVALUATE FUTURE PLANS. ISRAEL PROJECTS ARE CARRIED OUT BY JNF BOARD- APPROVED SELECT ISRAEL NOT-FOR-PROFIT ORGANIZATIONS. JNF STAFF IN ISRAEL MONITOR THE PROGRESS OF PROJECTS TO ENSURE THAT THEY ARE BEING IMPLEMENTED PROPERLY. REPRESENTATIVES IN ISRAEL SEND MONTHLY REPORTS BACK TO JNF ON THE STATUS OF ALL FUNDED PROJECTS IN ISRAEL.
Schedule F, Part II:	JEWISH NATIONAL FUND MADE GRANTS TO THE FOLLOWING ORGANIZATIONS: Adam V'Adama High School $369,300 IN COOPERATION WITH JNF, HASHOMER HACHADASH RECENTLY OPENED ADAM V'ADAMA LEADERS OF THE LAND HIGH SCHOOL AT HATZEVA TO TEACH STATE-OF-THE-ART ENVIRONMENTAL SCIENCE AND AGRICULTURAL SECURITY. ALEH NEGEV (ADI NEGEV) $2,105,118 A STATE-OF-THE-ART REHABILITATIVE VILLAGE IN THE NEGEV, ALEH NEGEV OFFERS UNPARALLELED CARE FOR PEOPLE WITH SEVERE DISABILITIES, EMPOWERING RESIDENTS AND OUTPATIENTS TO HELP THEM REACH THEIR POTENTIAL FOR COMMUNICATION AND DEVELOPMENT. AMMUNITION HILL $86,950 AMMUNITION HILL VIVIDLY PORTRAYS THE SIEGE OF JERUSALEM IN THE '67 WAR AND SERVES AS AN EDUCATIONAL CENTER OF THE CRUCIAL BATTLE WAGED THERE FOR THE REUNIFICATION OF JERUSALEM. AMUTAT DERECH ERETZ $43,000 OPERATION OF AN EDUCATIONAL PROGRAM FOR YOUTH, SIX MONTHS PRIOR TO THEIR INDUCTION INTO THE MILITARY, TO CREATE A SUBSTANTIAL CHANGE IN THEIR LIVES WHICH WILL BE EXPRESSED IN MORE SIGNIFICANT MILITARY SERVICE, PURSUIT OF ACADEMIC EDUCATION AND INTEGRATION INTO FOCI OF INFLUENCE AND LEADERSHIP IN ISRAELI SOCIETY. ARAD MUNICIPALITY $245,000 Arad is a city in the Southern District of Israel. It is located on the border of the Negev and the Judean Deserts. JNF continues to fund the Yehoshafat Park, Arad Music Conservatory and Cam Tech Programs. ARAVA INSTITUTE FOR ENVIRONMENTAL STUDIES $1,481,318 THE ARAVA INSTITUTE FOR ENVIRONMENTAL STUDIES IS A WORLD-CLASS TEACHING AND RESEARCH CENTER IN SOUTHERN ISRAEL THAT PREPARES MUSLIM, CHRISTIAN, AND JEWISH STUDENTS TO COOPERATIVELY ADDRESS THE SHARED ENVIRONMENTAL CHALLENGES OF THE MIDDLE EAST. ARAVA REGIONAL COUNCIL- CENTRAL ARAVA $91,500 AS PART OF ITS BLUEPRINT NEGEV CAMPAIGN TO MAKE THE NEGEV HABITABLE TO THE NEXT GENERATION OF ISRAEL'S RESIDENTS, JNF IS INVESTING IN THE ARAVA IN AN EFFORT TO DOUBLE THE POPULATION OF THE REGION OVER THE NEXT DECADE. These projects include an aquatics center and sports center. ASSOCIATION FOR EMPLOYMENT DEVELOPMENT FOR THE NEGEV $1,031,429 THE LAUDER EMPLOYMENT CENTER OFFERS COMPREHENSIVE CAREER SERVICES AND PROVIDES GUIDANCE AND RESOURCES TO STUDENTS AND ALUMNI FOCUSED ON STAYING IN THE NEGEV WORKING WITH BEN GURION UNIVERSITY. ASSOCIATION FOR ISRAEL BASEBALL $569,500 PROJECT BASEBALL GIVES THE CHILDREN OF ISRAEL AN OPPORTUNITY TO LEARN LIFE LESSONS WHILE BUILDING LASTING FRIENDSHIPS. JNF is currently constructing a field for baseball and other sports in Beit Shemesh. ASSOCIATION FOR THE CULINARY INSTITUTE $750,000 BASED IN THE HEART OF ISRAEL'S GALILEE THE GALILEE CULINARY INSTITUTE Being constructed by JNF IS A ONE-OF-A-KIND CULINARY INSTITUTION THAT COMBINES CULINARY AND RESTAURANT EXPERTISE, TOURISM AND ENTREPRENEURSHIP. Beer Sheva Municipality - Lakes Projects $750,000 MANY YEARS AGO, JNF RECOGNIZED THE DEVELOPMENT AND EXPANSION OF BE'ER SHEVA AS THE KEY TO MAKING THE NEGEV AN ATTRACTIVE PLACE FOR A NEW GENERATION OF ISRAELIS TO CALL HOME. JNF'S EFFORTS IN BE'ER SHEVA, HAVE CHANGED THE FACE OF THE CITY, AND, IN THE PAST INCLUDED THE RIVERPARK AND AMPHITHEATER. Beit Shemesh Baseball $467,950 Since 1994 Beit Shemesh has been an active city for the Israel Association of Baseball. The majority of the players are made up of new citizens (ie olim) that immigrated from America & Canada. JNF is constructing a baseball field in Beit Shemesh. BEYACHAD FUND $2,475,000 SUPPORT AND DEVELOP AREAS IN NEGEV AND GALILEE. To date JNF and its housing development fund have developed over 1300 housing sites providing the necessary funds to communities for ground infrastructure costs. CHABAD OF DEAD SEA - BE INSCRIBED PROJECT $87,500 Participation in the sacred act of writing a scroll on top of Masada. COOPERATIVE ASSOCIATION HALUTZA DAIRY $1,875,000 A dairy farm in the Halutza communities which will be 100% green with the most advanced technology and, of course, will help supply millions of liters of milk all across Israel. DEAD SEA AND ARAVA SCIENCE CENTER $72,790 The University of Arizona (UA), Jewish National Fund, and Israel's premier agriculture region (the Arava) signed a trilateral Memorandum of Understanding (MoU) to establish The JNF Joint Institute for Global Food, Water, and Energy Security. Dead Sea Drainage Authority - ARAD PARK $563,828 RESPONSIBLE FOR THE CONSTRUCTION, OPERATION AND MAINTENANCE OF INFRASTRUCTURES AND OTHER FACILITIES ASSOCIATED WITH DRAINAGE IN THE DEAD SEA REGION, INCLUDING THE CITY OF ARAD AND IS ACTING WITH FULL PARTNERSHIP WITH THE MUNICIPALITY OF ARAD in the CONSTRUCTION OF THE YEHOSHAFAT PARK and the promenade. Eilot Region- Joint Institute for Global Food, Water and Energy Security $100,000 The Joint Institute will introduce innovative technology and build capacity for food, water, and energy security in vulnerable communities in Africa and around the world. ECONET ISRAEL $10,000 ENVIRONMENTAL FOUNDATION ADVOCATING A SUSTAINABLE ISRAEL. Ein Prat, Academy for Leadership $25,000 Ein Prat, the Academy for Leadership, has acted as an incubator for civilian leadership in Israeli society since 2001. Ein Prat has a variety of programs that teach history, promote teamwork, develop physical strength, and build character for youths from age sixteen through army service and university. Our goal is to actualize a vision of the state of Israel that is resilient, principled, and strong. ERETZ-IR - LAUDER EMPLOYMENT CENTER $437,113 ERETZ-IR WORKS CLOSELY WITH THE LAUDER EMPLOYMENT CENTER IN PROVIDING EMPLOYMENT OPPORTUNITIES THROUGHOUT THE

	NEGEV AND GALIL. IT AIMS TO IMPROVE THE COMMUNAL FABRIC OF THE NEGEV THROUGH BUILDING NEW COMMUNITIES AND STRENGTHENING EXISTING ONES, PROMOTING A SUSTAINABLE LOCAL ECONOMY AND DEVELOPING CRUCIAL INFRASTRUCTURE AND SERVICES WHICH ARE LACKING IN ISRAEL'S PERIPHERY. FUND FOR DEVELOPING SDEROT - INDOOR RECREATION CENTER & OUTDOOR PARK FOR CHILDREN $960,325 JNF renovated a 21,000 square foot secure indoor playground and community center. In addition, JNF is currently constructing a resilience center in Sderot to help the community deal with stress and anxiety from terror attacks. HA'AMUTA LEKIDUM TOSHVEI HEVEL ESHKOL $2,836,130 THE ESHKOL REGIONAL COUNCIL IS A REGIONAL COUNCIL IN THE NORTH-WESTERN NEGEV, IN ISRAEL'S SOUTHERN DISTRICT. THE REGION HAS BEEN A FREQUENT TARGET OF ROCKET ATTACKS AND INCENDIARY DEVICES FROM THE NEARBY GAZA STRIP, CAUSING FREQUENT DAMAGE TO FARMS AND SOME STRUCTURES WITHIN THE REGION. JNF'S PROJECTS INCLUDE THERAPY RESILIENCE CENTERS SECURITY AND FIREFIGHTING EQUIPMENT AND AN AFTER SCHOOL INDOOR RECREATION AND SCIENCE CENTER. HALUTZIT $502,000 HALUTZA IS COMPRISED OF THREE COMMUNITIES: NAVEH, BNEI NETZARIM, AND SHLOMIT. PROJECTS HAVE INCLUDED THE HALUTZA MEDICAL CENTER, THE HALUTZA STUDENT PROGRAM, THE NAVEH SYNAGOGUE PROJECT, AND THE YOUNG FARMER'S INCUBATOR PROJECT. HUGAY SAYARUT $700,000 GREEN HORIZONS, KNOWN IN ISRAEL AS HUGEY SAYARUT, OFFERS OUTDOOR EDUCATIONAL ACTIVITIES TO ISRAELI YOUTH IN GRADES 5-12. THE TRANSFORMATIVE PROGRAM TAKES PARTICIPANTS ON HIKING AND CAMPING TRIPS THROUGHOUT THE COUNTRY TO BUILD INTERPERSONAL AND LEADERSHIP SKILLS AND FOSTER A STRONG CONNECTION TO THE LAND OF ISRAEL. International Village for Israel Education $100,000 Located in the desert city of Be'er Sheva, Israel, this 20 acre village will serve as an ecosystem of Zionist engagement including Jewish National Fund's high school abroad, a program for post-college graduates to pursue yearlong internships at leading high tech companies, and an Adult Education Center to convene adults, congregations, teachers, all to revolutionize Zionist and Jewish educational engagement for the decades ahead. ISRAEL AIRFORCE ASSOCIATION $67,500 RECREATION PROJECTS DESIGNATED FOR THE ISRAEL AIR FORCE WITHIN VARIOUS AIR FORCE BASEs WHERE JNF PREVIOUSLY CONSTRUCTED AN OUTDOOR WETLANDS AND AMPHITHEATER. ISRAEL NATURE AND HERITAGE FOUNDATION $85,000 A NONPROFIT ORGANIZATION THAT SUPPORTS THE ISRAEL NATURE AND PARKS AUTHORITY'S GOALS OF PROTECTING ISRAEL'S NATURE, LANDSCAPE, AND HERITAGE. Israel Softball Association $105,500 THE ISRAEL SOFTBALL ASSOCIATION (ISA) IS A REGISTERED ASSOCIATION AND IS THE BODY RECOGNIZED BY THE STATE OF ISRAEL FOR THE PURPOSE OF CONDUCTING AND MANAGING THE COUNTRY'S ATHLETICS ACTIVITIES, AND IS THE SOLE ISRAELI BODY REPRESENTING THE STATE TOWARDS THE INTERNATIONAL BODIES SUCH AS THE EUROPEAN SOFTBALL FEDERATION (ESF), AND THE WORLD BASEBALL AND SOFTBALL CONFEDERATION (WBSC) AND OTHER PUBLIC BODIES AROUND THE WORLD. ISRAEL-ASIA CENTER $39,100 ACTIVITIES DEDICATED TO BUILDING A SHARED FUTURE BETWEEN ISRAEL AND ASIA. WORKING IN JOINT COOPERATION WITH THE ISRAEL ASIA CENTER. JAFFA INSTITUTE $247,037 The Jaffa Institute is a private, non-profit, multi-service social agency to assist the city of Jaffa's severely disadvantaged children and their families. Their mission is to provide educational, nutritional, therapeutic, and social enrichment programs that assist children in developing positive attitudes and skills to break the cy
Form 990, Schedule F, Part IV:	THE JEWISH NATIONAL FUND INVESTS IN VARIOUS ALTERNATIVE INVESTMENTS, BOTH DOMESTICALLY AND INTERNATIONALLY. WHILE THE FUND MAY OWN THESE INVESTMENT VEHICLES, ITS OWNERSHIP IN (OR TRANSFERS TO) THESE INVESTMENTS MAY NOT RISE TO THE THRESHOLDS REQUIRED FOR FILING FORMS 926 OR 5471. TO THE EXTENT THAT THE FUND IS REQUIRED TO FILE EITHER FORM, THEY ARE SUBMITTED ALONG WITH ITS FORM 990-T, BUSINESS INCOME TAX RETURN.

Additional Data

Software ID:

Software Version:

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
			Yes	**No**			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total . . . . . ▶							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1 ny dinner (event type)	(b) Event #2 chicago dinner (event type)	(c) Other events 227 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	684,216	546,405	5,140,127	6,370,748
	2 Less: Contributions	683,390	545,299	4,634,873	5,863,562
	3 Gross income (line 1 minus line 2)	826	1,106	505,254	507,186
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	1,800	2,509	958,963	963,272
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				963,272
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-456,086

Part III **Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ ----------

Address ▶ ----------

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____.

c If "Yes," enter name and address of the third party:

Name ▶ ----------

Address ▶ ----------

16 Gaming manager information:

Name ▶ ----------

Gaming manager compensation ▶ $ ----------

Description of services provided ▶ ----------

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
Form 990, Schedule G, Part II - Event Activities:	The Jewish National Fund operates throughout the United States in pursuit of its charitable mission. The organization conducts hundreds of special event and fundraising activities in multiple jurisdictions and so capturing the precise information for the Schedule G is quite difficult. The organization attributes approximately 15% of all special event fundraising income as being derived from the goods and services component of the ticket price and thus the Column C breakout of revenue (for the 227 events) has been calculated using this allocation methodology. Expenses attributable to these events have not been classified as the sheer volume of events makes this very difficult to capture accurately.

Additional Data

Return to Form

Software ID:

Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number
13-1659627

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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) 18 Corp PO Box 354 Short Hills,NJ 07078	22-3764133	501(C)(3)	7,800				GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT

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 noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

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

Return Reference	Explanation
Schedule I, Part I, Line 2:	The Jewish National Fund principally only makes grants to not-for-profit organizations outside the United States (in Israel). However, occasionally, JNF will send funds that are intended to support an Israeli organization to its U.S. based "Friends of" organization. In addition, JNF will support U.S. organizations that adopt a similar tax-exempt mission as JNF so long as the organization demonstrates a project that satisfies JNF's programmatic standards. JNF ensures that all grant recipients are Section 501(c)(3) organizations and will require periodic reports from the grantee informing JNF of the status on funded projects.
Schedule I, Part III:	JNF provides certain scholarships to students or educators as it relates to JNF's mission. One type of scholarship given by JNF is based on the recommendations of the individual's school, which is reviewed and approved by JNF. Another type of scholarship is for the JNF faculty fellowship program whereby JNF reviews applications and approves on a case by case basis and then works with those educators upon their return from Israel.

Additional Data

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☑ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☑ Compensation survey or study		
	☑ Form 990 of other organizations	☑ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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

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

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

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
1MATTHEW BERNSTEIN CHIEF PLANNED GIVING OFFICER	(i)	322,349	0	0	33,847	9,224	365,420	0
	(ii)	0	0	0	0	0	0	0
2STEPHEN BACH CHIEF ADMINISTRATIVE OFFICER	(i)	267,517	0	2,038	28,875	8,024	306,454	0
	(ii)	0	0	0	0	0	0	0
3YAEL KANE CHIEF ISRAEL ADVOCACY AND LEAD	(i)	221,190	0	0	23,730	9,382	254,302	0
	(ii)	0	0	0	0	0	0	0
4MICHAEL FEINMAN EXECUTIVE DIRECTOR	(i)	198,544	0	0	21,906	11,005	231,455	0
	(ii)	0	0	0	0	0	0	0
5SHARON FREEDMAN NATIONAL CAMPAIGN DIRECTOR	(i)	235,276	0	1,133	24,780	2,272	263,461	0
	(ii)	0	0	0	0	0	0	0
6DIANE SCAR NATIONAL CAMPAIGN DIRECTOR	(i)	242,339	0	0	26,250	10,038	278,627	0
	(ii)	0	0	0	0	0	0	0
7Debbie Freedman CHIEF HUMAN RESOURCES OFFICER	(i)	199,130	0	0	21,000	1,110	221,240	0
	(ii)	0	0	0	0	0	0	0
8RUSSELL ROBINSON CEO	(i)	760,667	0	1,795	56,717	6,709	825,888	0
	(ii)	0	0	0	0	0	0	0
9MITCHEL ROSENZWEIG CFO	(i)	334,269	0	1,558	35,262	5,607	376,696	0
	(ii)	0	0	0	0	0	0	0
10RICHARD KROSNICK CHIEF DEVELOPMENT OFFICER	(i)	269,916	0	1,266	28,875	6,632	306,689	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation

Additional Data

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Software ID:

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

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				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (PROPERTY)	X	2	8,662,000	FMV
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

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

		Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		No
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?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
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.		

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

Return Reference	Explanation

Additional Data

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SCHEDULE O (Form 990 or 990-EZ)

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 990-EZ.**
▶ **Go to *www.irs.gov/Form990* for the latest information.**

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2020

Open to Public Inspection

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

Return Reference	Explanation
FORM 990 PART VI, SECTION A, LINE 6:	The members of the organization are the directors of JNF-USA, a 501(c)(3) related organization. FORM 990 PART VI, SECTION A, LINE 7A: The members of the Corporation have the right to elect the directors of the corporation and amend the organization's by-laws.
FORM 990, PART VI, SECTION B, LINE 11:	THE FORM 990 WAS PREPARED BY A NATIONALLY RECOGNIZED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. BEFORE FILING, THE FORM 990 IS REVIEWED BY MANAGEMENT AND DISTRIBUTED TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENT. IF ANY ISSUES SHOULD ARISE, IT IS DISCUSSED WITH THE CFO. IF THERE ARE CHANGES, IT IS RECIRCULATED TO THE BOARD OF DIRECTORS FOR APPROVAL.
FORM 990, PART VI, SECTION B, LINE 12C:	THE JEWISH NATIONAL FUND'S ("JNF") CONFLICT OF INTEREST POLICY EXISTS TO PROTECT JNF AND ASSIST THE STAFF, VOLUNTEERS, AND MEMBERS OF ITS GOVERNING ENTITIES IN MAKING ETHICAL DECISIONS THAT BENEFIT JNF AS A WHOLE, NOT JUST A PARTICULAR INDIVIDUAL OR PARTIES ASSOCIATED WITH JNF. THIS POLICY IS INTENDED TO SUPPLEMENT, BUT NOT REPLACE ANY APPLICABLE STATE LAWS THAT GOVERN CONFLICTS OF INTEREST. AS A PUBLICLY FUNDED ORGANIZATION, THE ETHICAL CONDUCT MUST BE OF THE HIGHEST STANDARDS. NOT ONLY SHOULD ACTUAL CONFLICT OF INTEREST BE AVOIDED BUT ALSO THE APPEARANCE OF, PERCEPTION OF, OR POTENTIAL FOR A CONFLICT OF INTEREST AS A PERSON ASSOCIATED WITH JNF, THERE IS DUTY TO DISCLOSE, ON AN ANNUAL BASIS OR WHEN A SITUATION ARISES, OTHER OBLIGATIONS THAT MIGHT PREVENT ONE FROM ACTING IN THE BEST INTEREST OF JNF AND THEN REMOVE ONESELF FROM DISCUSSIONS, ACTIONS, VOTES OR OTHER ACTIVITIES IN RELATION TO THE CONFLICT SHOULD AN ISSUE ARISE THAT COULD BE POTENTIAL CONFLICT OF INTEREST, THERE IS A DUTY TO JNF TO NOTIFY A SUPERIOR, OR A GOVERNING ENTITY CHAIR, OF THE SITUATION. THE APPROPRIATE PARTIES WOULD INVESTIGATE AND MAKE A DETERMINATION DEPENDING UPON THEIR DETERMINATION, THE PARTY MAY BE ASKED TO REMOVE HIS/HERSELF FROM PARTICIPATION IN DISCUSSIONS OR VOTES RELATED TO THE CONFLICT OR POTENTIAL CONFLICT. THE POTENTIAL CONFLICT OF INTEREST WILL BE INVESTIGATED BY THE APPROPRIATE PARTIES IF IT RELATES TO A MEMBER OF THE GOVERNING ENTITY, OR THE SENIOR STAFF, THEN IT WILL BE TURNED OVER TO THE ADMINISTRATION COMMITTEE THAT IS NOT INVOLVED IN THE CONFLICT IF IT INVOLVES A MEMBER OF THE STAFF OR A VOLUNTEER, A COMMITTEE AND OTHER APPROPRIATE SENIOR STAFF WILL MAKE THE DETERMINATION. ONCE THE COMMITTEE HAS MADE ITS DETERMINATION AND PRESENTS ALTERNATIVES, THE PARTIES INVOLVED MAY BE ASKED TO- ABSTAIN FROM VOTING ON THE ACTION - REMOVE YOURSELVES FROM ANY DISCUSSION RELATING TO THE CONFLICT - REFRAIN FROM DISCUSSING THE ISSUE WITH OTHER COWORKERS, VOLUNTEERS OR GOVERNING ENTITY SO AS NOT TO INFLUENCE THEIR ACTIONS - CONSIDER OTHER ACTIONS, DEPENDING ON THE SITUATION CONFLICT OF INTEREST STATEMENTS ARE COMPLETED YEARLY BY ALL PERSONNEL AND ARE REVIEW BY MANAGEMENT TO MONITOR POSSIBLE CONFLICTS.
FORM 990, PART VI, SECTION B, LINE 15:	JNF HAS ADOPTED PROCEDURES TO ENSURE THAT THE COMPENSATION IT PAYS TO ITS TOP EXECUTIVE (RUSSELL ROBINSON) AND THE REST OF ITS MANAGEMENT TEAM AND STAFF IS COMMENSURATE WITH THE INDUSTRY IN WHICH IT SERVES. THE CEO'S COMPENSATION IS DETERMINED BY JNF'S COMPENSATION COMMITTEE AFTER REVIEWING VARIOUS PERFORMANCE BASED METRICS AND THE COMPENSATION OF SIMILARLY SITUATED EXECUTIVES AT PEER INSTITUTIONS. JNF LAST CONDUCTED A COMPENSATION STUDY FOR MR. ROBINSON IN 2019 AND UTILIZED THOSE RECOMMENDATIONS TO DETERMINE HIS COMPENSATION. ALL COMPENSATION DECISIONS ARE MEMORIALIZED IN THE COMPENSATION COMMITTEE MEETING MINUTES. FOR ALL OTHER INDIVIDUALS REPORTED ON THE FORM 990, COMPENSATION IS DETERMINED BY THE CEO. JNF'S BUDGET & FINANCE COMMITTEE DETERMINES THE ANNUAL SALARY BUDGET WHICH MUST THEN BE APPROVED BY THE FULL BOARD OF DIRECTORS. THE CEO UTILIZES THE ANNUAL BUDGET COMPENSATION POOL TO DETERMINE SALARY INCREASES FOR ALL JNF EMPLOYEES (INCLUSIVE OF THE EXECUTIVES).
FORM 990, PART VI, SECTION C, LINE 19:	UPON REQUEST, THE ORGANIZATION WILL MAKE AVAILABLE ONLY THOSE DOCUMENTS REQUIRED TO BE DISCLOSED UNDER THE PUBLIC INSPECTION LAWS.
FORM 990, PART X, LINE 32, NET ASSETS:	Amounts unavailable for general expenditures within one year, due to: Restricted by donors with purpose restrictions $22,799,507 Restricted by donors with time restrictions 59,737,317 Restricted by donors in perpetuity 11,119,587 ---------- Tot Amts Unavailable for General Expenditures W/in 1 Year $93,656,411 Amounts unavailable to management without Board's approval: Board Designated for Boruchin Israel Advocacy Center 131,835,409 Board Designated for JNF Initiatives Fund 69,283,049 Board Designated for Buildings Fund 3,569,936 ---------- Tot Amts Unavailable to Management W/out Board's Approval $204,688,394 ---------- Total FIN. ASSETS AVAILABLE TO MGMT. FOR GENERAL EXPENDITURE $86,548,565 ---------- NET ASSETS $475,968,397 Liquidity Management The Organization maintains a policy of structuring its financial assets to be available as its general expenditures, liabilities, and other obligations come due. Additionally, the Organization has Board Designated net assets without donor restrictions that, while the Organization does not intend to spend these for purposes other than those identified, the amounts could be made available for current operations, if necessary.
FORM 990, PART XI, LINE 9:	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS .....$(100,842)

Additional Data

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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* for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
Jewish National Fund
(Keren Kayemeth Leisrael) Inc

Employer identification number
13-1659627

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
(1) Beyachad Fund 206 JAFFA STREET Jerusalem 91079 IS IS	PROJECT MGMT.	IS			JNF-USA		No
(2) Alexander Muss Institute for Israel Edu 78 Randall Avenue Rockville Center, NY 11570 59-0173782	Education	NY	501(c)(3)	line 10	JNF-USA		No
(3) JEWISH NATIONAL FUND-USA INC 42 EAST 69TH STREET NEW YORK, NY 10021 83-2880252	FUNDRAISING	DE	501(C)(3)	LINE 7	NA		No

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) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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	(i) No

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

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

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No

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

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 section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate 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).

Return Reference	Explanation

Additional Data

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Software ID:

Software Version: