Form **990**

Department of the Treasury Internal Revenue Service

EXTENSION ATTACHED

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

Open to Public Inspection

Α	For the	2017 calen	dar year, or tax	year beginn	ning		, 20	017, an	ıd endin	g		,		
В	Check if ap	plicable:	С								D Employ	er identi	fication numbe	r
	Addre	ss change	Tanenbaum	Center	for						13-	36954	175	
	Name	change	Interrelia	gious Ur	ndersta	nding					E Telepho			
	Initial	return	55 Broad S			loor					(21	2) 96	57-7707	
	Final re	turn/terminated	New York,	NY 1000)4						(22	., .,		
		ded return									G Gross	eceints 5	5 5 31	55,975.
		ation pending	F Name and addre	ess of principal	officer: T	Dl-	1			H(a) Is this	a group retur			Yes X No
	Пуфрис	ation pending	Same As C	About	107	yce Dube	ensky				subordinates attach a list.			Yes No
1	Tay ayar	mpt status	X 501(c)(3)	501(c) (14 /	insert no.)	4947(a)(1	I) or T	527	If 'No,'	attach a list.	(see inst	ructions)	
J	Websi			Serverage, 1991)- (msert no.)	4547(a)(1	1) 01	321					
	3400000000000	1000	w.tanenbau		2			1			exemption no			377.7
K		organization:	X Corporation	Trust	Association	Other ►		L Year	r of formati	ion: 199	2 IN S	state of le	egal domicile:	NY
Pa	art I	Summar	y h	lauta milait.		-iifiut	ti. : ti r	71	•	W			The street of the street	
	1 Br	letiy descri	be the organizat	ion's missio	on or most	significant	activities:	<u>l'aner</u>	nbaum	<u>promo</u>	tes mu	<u>tual</u>	respec	t_and
çe			nding with											
Activities & Governance			e, hatred		Tence 1	in_areas	or ar	mea_	conil	ict, s	SCHOOTS	5,_ WC	гкртасе	s and
ler!		earth c	are settin	organization			otions or a				DE 0/ of its			
9	1 STEEL COLUMN		oting members o									1 3	SC(5.	17
∘ধ			dependent votin									4		16
ies			of individuals e									5		26
₹			of volunteers (e									6		63
Act	7a To	tal unrelate	ed business reve	enue from P	art VIII, co	lumn (C), li	ne 12					7a		0.
. 13	b Ne	et unrelated	l business taxab	le income f	rom Form	990-T, line	34					7b		0.
										P	Prior Year		Curren	t Year
4	8 Co	ontributions	and grants (Par	rt VIII, line	1h)						964,3	75.	4,1	97,737.
Revenue	9 Pr	ogram serv	rice revenue (Pa	rt VIII, line	2g)						376,3			57,748.
e Ve	10 Inv	vestment ir	ncome (Part VIII,	, column (A), lines 3,	4, and 7d).					65,4	72.	1	07,429.
ď	THE PARTY STATES OF		e (Part VIII, colι	And the state of the state of the state of			The state of the s			the state of the s				
			e – add lines 8 t								1,406,1	.97.	4,8	62,914.
			imilar amounts p	(1757) 17일 : [1일] : [1745] [1745] [1745]										
	14 Be	enefits paid	to or for member	ers (Part IX	, column (A), line 4)								
"	15 Sa	laries, othe	er compensation	, employee	benefits (f	Part IX, coli	umn (A), li	ines 5-	10)	80	998,857.			60,345.
ses	16a Pr	ofessional	fundraising fees	(Part IX, co	olumn (A),	line 11e)				0	50,000.			50,000.
Expenses	b To	tal fundrais	sing expenses (F	art IX. colu	ımn (D). lir	ne 25) ►		316	,078.					
M	17 Ot		ses (Part IX, colu								042 5	172	7	07,357.
	25375		es. Add lines 13								943,7			
	116550 11090		es. Add illies 15 expenses. Sub					William Street Street			1,992,6			17,702.
2 8		venue less	expenses. Sub	Tact line 10	s iroin line	12					-586,4			45,212. f Year
ts o	20 To	tal accete	(Part X, line 16).								ng of Currer			
Net Assets o	21 To		s (Part X, line 2								2,934,4 187,4			58,662. 04,107.
le t	20 N													
			fund balances.	Subtract lin	ne 21 from	line 2u		******		2	2,746,9	57.	5,5	54,555.
_		Signatur	AND COMPANY OF THE PARKET											
Und	er penalties plete. Declai	of perjury, I de ration of prepa	eclare that I have example example (other than officer	nined this retur) is based on a	n, including a	ccompanying so of which prepar	thedules and ser has any kn	statemen lowledge.	its, and to	the best of n	ny knowledge	and belie	ef, it is true, co	rrect, and
+		_	3.5					7						
c:		Signatu	re of officer				-			Da	ate			
Sig	gri			12										
110	10		ce Dubensky print name and title	<u>Y</u>						CEO				
+		965.55	reparer's name		Preparer's sig	nature	AND A SHEETS	l n	ate		In . I	T. 1	PTIN	
_						2001	47	0.	11/11	dis	Check			0.4
Pa			el Schall			Schall	L		11/19	1.0	self-employ	ed .	P020241	84
Lic	eparer e Only	Firm's name		& ASHE										
US	Cilly	Firm's addre	-	h Ave,									-4036703	
				RK, NY							Phone no.		268-2	
Ma	y the IRS	discuss th	is return with th	e preparer s	shown abo	ve? (see in	structions)						X Yes	No

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automati	ic 6-Month Extension of Time. Only sub-	mit origina	al (no copies needed).			
	ions required to file an income tax return other th 004 to request an extension of time to file income			fying number, s	ee instructions	
	Name of exempt organization or other filer, see instructions.		<u> </u>	Employer identifica	tion number (EIN) or	
Type or print	Tanenbaum Center for Interreligious Understanding			13-3695475		
File by the	Number, street, and room or suite number. If a P.O. box, see in	istructions.		Social security num		
due date for	55 Broad Street 17th Floor					
filing your return. See	55 Broad Street, 17th Floor Only, town or post office, state, and ZIP code. For a foreign edd	•				
instructions.	New York, NY 10004					
Enter the R	leturn Code for the return that this application is for	or (file a se	parate application for each return)		01	
Application Is For		Return Code	Application Is For		Return Code	
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)		07	
Form 990-B	BL .	02	Form 1041-A		08	
Form 4720 (individual)	03	Form 4720 (other than individual)		09	
Form 990-P	PF	04	Form 5227		10	
	(section 401(a) or 408(a) trust)	05	Form 6069		. 11	
Form 990-T	(trust other than above)	06	Form 8870		12	
 If the or If this is check the 	ne No. • (212) 967-7707 ganization does not have an office or place of but for a Group Return, enter the organization's four his box •	digit Group	e United States, check this box Exemption Number (GEN) . If	f this is for the w		
1 I reque for the		organization _, and endir	ng, 20	zation return nal return		
	application is for Forms 990-BL, 990-PF, 990-T, 4 fundable credits. See instructions			3a\$	0.	
	application is for Forms 990-PF, 990-T, 4720, or syments made. Include any prior year overpayment			36\$	0.	
¢ Balan EFTP:	ce due. Subtract line 3b from line 3a. Include you S (Electronic Federal Tax Payment System). See	r payment v instructions	with this form, if required, by using	3c\$	0.	
Caution: If payment in:	you are going to make an electronic funds withdrastructions.	awal (direct	debit) with this Form 8868, see Form 84	453-EO and Form	n 8879-EO for	
BAA For Pri	ivacy Act and Paperwork Reduction Act Notice, see	instructions		Form 886	B (Rev. 1-2017)	

	<u></u>		
			—′
40	c (Code:) (Expenses \$ including grants of \$) (Revenue \$	<u> </u>
			
		· 	-
			- - -
4 b	b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
			-
		·	
1			
	See Schedule O		—′
.4.	a (Code:) (Expenses \$ 1,116,848, including grants of \$) (Revenue S	<u> </u>
	and revenue, if any, for each program service reported.		-a,
4	Describe the organization's program service accomplishments for each of its three largest program Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants a	program services, as measured by expens	es.
. 3	If 'Yes,' describe these changes on Schedule O.	Program services:, 185 X	NV
.3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any	program services? Yes X	No
	Form 990 or 990-EZ?	Yes X	No
2	Did the organization undertake any significant program services during the year which were not lis		
		·	
	workplace, health care, education, and by working with reconflicts abroad. See Schedule 0.	. 	nea_
i	Tanenbaum combats religious prejudice and hatred in every		
.1	Briefly describe the organization's mission:		
	Check if Schedule O contains a response or note to any line in this Part III		X
Par	rt III Statement of Program Service Accomplishments	13-3695475 Pa	<u> </u>
	m 990 (2017) Tanenbaum Center for		age 2

Form 990 (2017) Tanenbaum Center for 13-3695475 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete X Schedule A. 1 X 2 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)?..... 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. X 3 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. X 4 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...... X 5 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, X 6 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........ X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III..... X 8 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. X 9 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............ X 10 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 X 11 a 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. X 11 b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X 11 c 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. X 11 d e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X..... X 11 e 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.... X 11 f 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII..... X 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and X if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12b 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.......... X 13 X 14a 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.

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 X 16 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 X

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. X 18 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 19

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

X

X

X

14b

15

Form 990 (2017) Tanenbaum Center for Part IV: Checklist of Required Schedules (continued)

			Yes	No
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule i, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
÷	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		
25	a 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 1	25a		X
	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
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, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		х
	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	.1	Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a 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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
RΔ.		Earn	aan /	ついしてい

Form 990 (2017) Tanenbaum Center for

Part V | Statements Regarding Other IRS Filings and Tax Compliance

٠.	Check if Schedule O contains a response or note to any line in this Part V					. 🗆
	original restrictions of contains a respective of factors and mine and are all the restrictions and the restrictions and the restrictions and the restrictions are all the restrictions and the restrictions are all the restrictions and the restrictions are all the restrictions are all the restrictions and the restrictions are all the restrictions			T	Yes	No
1 :	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	10			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming				
	(gambling) winnings to prize winners?			1 c	X	- 04-00 m250
2 8	a 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	2 a	26			
1	b If at least one is reported on line 2a, did the organization file all required federal employment	nt tax returns?		2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins	structions)				
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year	ar?		3 a		X
ı	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O			3 b		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial account to the foreign country:	er authority over, a inancial account)?		4 a		Х
٠.	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts (FBAR)				
5:	a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	: 10.0 thm : - 10.0 thm : 10.0 th	100	5 a	CANADOMINI	Х
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt	Furgit were not a market of the reserved	50.000 (10.000 (10.000 (10.000 (10.000 (10.000 (10.000 (10.000 (10.000 (10.000 (10.000 (10.000 (10.000 (10.000	5 b		Х
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			5 c		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	and did the organiza	tion	6 a		х
ı	b If 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?	ions or gifts were		6 b		
7	Organizations that may receive deductible contributions under section 170(c).					
1	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly services provided to the payor?	partly for goods and		7a	Х	
1	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		-	7 b	Х	
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v					
	Form 8282?			7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year					
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		-	7 e		X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben			7 f		Х
(g If the organization received a contribution of qualified intellectual property, did the organization file f as required?	Form 8899		7 g		
1	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	e organization file a		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		9			
	organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.			488		
	a Did the sponsoring organization make any taxable distributions under section 4966?		-	9 a		
1	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related per	rson?		9 b		
	Section 501(c)(7) organizations. Enter:					
	a Initiation fees and capital contributions included on Part VIII, line 12	10 a				
1	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b				
11	Section 501(c)(12) organizations. Enter:	1 1				
	a Gross income from members or shareholders	11 a				
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b				
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu or	of Form 1041?		12 a		
1	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.		i i			
1	a Is the organization licensed to issue qualified health plans in more than one state?			13 a		2000000
	Note. See the instructions for additional information the organization must report on Schedu	le O.				
	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	13 c				THE P
	a Did the organization receive any payments for indoor tanning services during the tax year?			14 a		X
1	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O		14b		

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI...... Section A. Governing Body and Management No Yes 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. **b** Enter the number of voting members included in line 1a, above, who are independent.... 16 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? See Schedule 0 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person?..... 4 Did the organization make any significant changes to its governing documents. since the prior Form 990 was filed?..... 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets?... 5 6 6 Did the organization have members or stockholders?..... 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body?.... 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... 8a Х X b Each committee with authority to act on behalf of the governing body?..... 86 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 Q...... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Νo 10a Did the organization have local chapters, branches, or affiliates?...... 10 a χ b if 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... Х 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х to conflicts?... 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х X 13 Did the organization have a written whistleblower policy?...... 13 14 Did the organization have a written document retention and destruction policy? X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official...See ..Schedule..O....... 15 a X **15**6 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?...... 16 a 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?.... 16 b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > NY Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website Upon request Other (explain in Schedule O) Describe in Schedule 0 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. See Schedule 0 State the name, address, and telephone number of the person who possesses the organization's books and records:

Joyce Dubensky 254 West 31st Street,

New York NY 10001 (212) 967-7707

13-3695475 Part VIII 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, and highest compensated employees who received more than \$100,000. of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

employees; and former such persons. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. C Position (do not check more than one box, unless person is both an officer and a (F) (A) Name and Title **(B)** Estimated amount of other Reportable compensation from Reportable compensation from Average director/trustee) hours per week (list any hours for related compensation from the organization the organization (W-2/1099-MISC) related organization (W-2/1099-MISC) individual Inusiee Institutional Key employee lighest compensated and related organizations organiza tions il trusice Georgette Bennett 1 Õ 0 ٥. President & CEO X 0 1 (2) Jeffrey Becker 0. Secretary 0 X X 0 0. Judith Thompson 1 X 0. 0 X 0 0 Treasurer (4) Justin Foa 3 X 0. Chair of Board 0 X 0 0. (5) Joyce Dubensky 60 X X 135,000 0. 114. CEO 0 (6) Tarazeta Huntley 1 0 Х 0 0. 0. Director Rev. Andrew Dietsche 1 left 2017 X 0 0. 0 0. 1 (8) Lester Crystal 0 X 0 0 ٥. Director (9) Robert Heller 1 0 X 0 0 0. Director (10) Nada Hindiyeh .1 ō Х 0 0 0. Director (11) Patrick Grace 1 0 0 0. 0 Director (12) John Hart 1 X 0 0. Dir left 2017 0 0 (13) Monika Machon 1 X 0 Dir joined 2017 0 0 0. Ronald Ries 1 0 0. 0. Director

	(B)			(0	•							nued)
(A) Name and title	Average hours per week	box	, unic cer ar	theck tss pend a c	directi directi	than is bott or/trus	n an lee)	(D) Reportable compensation from	(E) Reportable compensation from	amor	(F) stimated int of oth pensation	her
	(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Ihe organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fr org an	pensaud om the anization d related anization	n đ
(15) Linda Marcelli Director	-1-	 						h	0.		<u>-</u> .	
(16) Holly Weiss Director	- <u>1</u> -	X						0.	0.	1		0. 0.
(17) Marni Selman Director	-1-0-	X				 !		0.	0			0.
(18) Rebecca Baker Director	$-\frac{1}{0}$	X						0.	0	1		0.
(79) Christina Hioureas Director	- 1 -	x						0.	0			0.
(20) Mark Fowler Deputy CEO	- <u>60</u> -	<u> </u>		x		-		120,000.	0		3,7	714.
(21)		-									•	
(22)												
(23)												
(24)									·-			
(25)									•			
1 b Sub-total					• • • •		>	255,000 <u>.</u>	0		3,8	328
c Total from continuation sheets to Part VII, Section of Total (add lines 1b and 1c)				,			► •	255,000.	0 0 0 of reportable com		3,8	0. 328.
from the organization 2										-pariouso	Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	ctor, or tru ch individu	stee,	key	y en	ıplo;	yee,	or h	nighest compensa	ted employee	3		
4 For any individual listed on line 1a, is the sum of the organization and related organizations great	er than \$1	le co 50,0	mpe 00?	ensa If "Y	ition Yes,	and con	oth ople	er compensation te Schedule J for	from			
Such individual. Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Ye.	ie compen	satio	n fr	om	any	unre	late	ed organization or	individual	4 5		X
Section B. Independent Contractors 1 Complete this table for your five highest comper				_	_				· · ·		Į,	
compensation from the organization. Report comper	nsation for	the c	alen	dar	year	endi	ng v	vith or within the or (B)	ganization's tax yea		C)	
Name and business add	iress			_				Description 6	of services	Compè	ensatio)n
			_		_							
									J.			

	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
nts nts	1 a Federated campaigns 1 a				
Gur	b Membership dues				
Am Am	c Fundraising events 1c 592,199.				
Giff	d Related organizations 1 d				
ns,	e Government grants (contributions) 1 e				
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above				
no;	h Total. Add lines 1a-1f.	4,197,737.			
	Business Code	4,137,737.			
Program Service Revenue	2a Program Fees 900099	557,748.	557,748.		
Res	b	33.77.131	33.7.1.2.1		
Se	c				
e Z	d				
E	e				
gra	f All other program service revenue				
P	g Total. Add lines 2a-2f.	557,748.			
	3 Investment income (including dividends, interest and other similar amounts).				
		109,628.			109,628
	4 Income from investment of tax-exempt bond proceeds>				
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross rents				
	b Less: rental expenses c Rental income or (loss)				
	d Net rental income or (loss).				
	/ a Gross amount from sales of				
	101/0001				
	b Less: cost or other basis and sales expenses 403,199.				
	c Gain or (loss)2,199.				
	d Net gain or (loss).	-2,199.	WILL SHIP SHIP SHIP SHIP SHIP SHIP SHIP SHIP		-2,199
	8 a Gross income from fundraising events	2,133.			2,133
ž	(not including \$ 592.199.				
Se .	(not including \$ 592,199. of contributions reported on line 1c).				
Other Revenu	See Part IV, line 18 a 89, 862.				
Je I	b Less: direct expenses b 89,862.				
ō	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns				
	and allowances a				
	b Less: cost of goods sold b c Net income or (loss) from sales of inventory				principal de la
	Miscellaneous Revenue Business Code			NOTE OF THE PARTY OF THE PARTY.	
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d.				
	12 Total revenue. See instructions	4,862,914.	557,748.	0.	107,429

Form 990 (2017) Tanenbaum Center for 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 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
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		emetro (confid		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and	16			
4 Benefits paid to or for members				
5 Compensation of current officers, directors trustees, and key employees	258,828.	203,198.	11,724.	43,906.
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.	0.	0.	0.
7 Other salaries and wages		422,517.	23,552.	68,270.
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).		422,317.	23,332.	00,270.
9 Other employee benefits	23,440.	18,970.	1,070.	3,400.
10 Payroll taxes		51,582.	2,908.	9,248.
11 Fees for services (non-employees):				
a Management		*		
b Legal				
c Accounting			77,202.	
d Lobbying	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11/2021	
e Professional fundraising services. See Part IV, line 17.				50,000.
f Investment management fees	00/001			30,000.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.5.Cl Advertising and promotion.	nn 200,589.	94,372.	10,635.	95,582.
13 Office expenses				
14 Information technology	5000			
15 Royalties				
16 Occupancy		155,941.	20,021.	14,895.
17 Travel		80,356.	4,756.	3,280.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials		00,000.	2,700.	5,255
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization.	5,311.		5,311.	
23 Insurance	8,081.	6,293.	558.	1,230.
Other expenses. Itemize expenses not covered above (List miscellaneous expense in line 24e. If line 24e amount exceeds 10 of line 25, column (A) amount, list line 24e expenses on Schedule O.).	%			
a Other	31,603.	17,263.	13,976.	364.
b Printing and Publications	22,856.	5,396.	983.	16,477.
c Telephone	20,562.	16,558.	1,769.	2,235.
d Dues and Subscriptions	14,074.	10,340.	3,679.	55.
e All other expenses		34,062.	6,632.	7,136.
25 Total functional expenses. Add lines 1 through 24e.	1,617,702.	1,116,848.	184,776.	316,078.
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	,	5		÷
SOP 98-2 (ASC 958-720)BAA				Form 990 (2017)

Form 990 (2017) Tanenbaum Center for 13-3695475 Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year Cash - non-interest-bearing..... 185,923. 136,940. 1 97,993 2 2 Savings and temporary cash investments..... 231,600. 3 Pledges and grants receivable, net..... 708,901 3 995,663. 4 Accounts receivable, net..... 36,342 4 87,030. Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.... 6 Notes and loans receivable, net..... 7 Inventories for sale or use 8 9 67,607. 68,253 10a Land, buildings, and equipment: cost or other basis.
Complete Part VI of Schedule D..... 10 a 290,031. 282.084. 7,256 10 c 7,947. 11 Investments – publicly traded securities..... 11 4,160,892. 1,788,361 Investments – other securities. See Part IV, line 11..... 12 13 Investments - program-related. See Part IV, line 11..... 13 14 Intangible assets..... Other assets. See Part IV, line 11..... 22,000. 15 90,388. 15 16 Total assets. Add lines 1 through 15 (must equal line 34)...... 2,934,434. 16 5,758,662. Accounts payable and accrued expenses 17 44,501. 17 31,563. Grants payable..... 18 18 19 154,167 19 Deferred revenue. 139,167 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Liabilities Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons.

Complete Part II of Schedule L. 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 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. 3,809 25 18,377. Total liabilities. Add lines 17 through 25..... 26 204, 107. 187,477. Organizations that follow SFAS 117 (ASC 958), check here > X and complete Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 1,821,049. Unrestricted net assets 1,666,766. 27 Temporarily restricted net assets..... 3,320,793. 28 668,038. Permanently restricted net assets..... 412,153. 29 412,713. Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

2,746,957

2,934,434

30

31

32

33

34

5,554,555.

5,758,662.

Form 990 (2017)

30 Capital stock or trust principal, or current funds

32 Retained earnings, endowment, accumulated income, or other funds......

Net

BAA

34

Paid-in or capital surplus, or land, building, or equipment fund......

Total liabilities and net assets/fund balances.....

July .	Tanembadan Centeel 101	000011	-	20.100	-
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,8	62,9	914.
2	2 Total expenses (must equal Part IX, column (A), line 25)	2	1,6	17,7	702.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,2	45,2	212.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,7	46,9	957.
5	Net unrealized gains (losses) on investments	5			972.
6	5 Donated services and use of facilities	6			
7	7 Investment expenses.	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O). See Schedule O	9	-4	20,6	542.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B)).	10	5,5	54,5	555.
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				П
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
	in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe	ed on a			
	separate basis, consolidated basis, or both:		1000		
	Separate basis Consolidated basis Both consolidated and separate basis		-	***************************************	
	b Were the organization's financial statements audited by an independent accountant?		2b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate	ite			
	basis, consolidated basis, or both:				
	X 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,			37	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		4.00		
3	Ba As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single		IMAX-100		145×91X00
	Audit Act and OMB Circular A-133?	• • • • • • • •	3 a		X
	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				
BA	A		Form	990	(2017)

SCHEDULE A (Form 990 or 990-EZ)

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.

0MB No. 1545-0047

Open to Rublic

Inspection

Name of the organization Employer identification number Tanenbaum Center for Interreligious Understanding 13-3695475 Parti 图 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(bX1)XAX(x) 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: 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 10 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). 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 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. Enter the number of supported organizations..... g Provide the following information about the supported organization(s). (lii) Type of organization (described on lines 1-10 above (see instructions)) (i) Name of supported organization (ii) EIN (iv) is the organization listed (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) **(B)** (C) (D) Œ) Total 品直にご 1つで**すが**や

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

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

Sec	tion A. Public Support						*	
	ndar year (or fiscal year nning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,613,838.	1,594,099.	2,528,289.	964,375.	4,197,737.	10,898,338.	
	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	1,613,838.	1,594,099.	2,528,289.	964,375.	4,197,737.	10,898,338.	
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)						4,776,004.	
6	Public support. Subtract line 5 from line 4						6,122,334.	
Sec	tion B. Total Support	Nu -					0/102/0011	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016 (e) 2017		(f) Total	
7	Amounts from line 4	1,613,838.	1,594,099.	2,528,289.	964,375.	4,197,737.	10,898,338.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	74,822.	77,307.	73,137.	66,566.	109,628.	401,460.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on			,			0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.	
11	Total support. Add lines 7 through 10						11,299,798.	
12	Gross receipts from related activ	vities, etc. (see in	structions)			12	1,522,875.	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	nird, fourth, or fifth to	ax year as a section	on 501(c)(3)		
Sec	tion C. Computation of Pu	blic Support P	ercentage					
	Public support percentage for 20						54.18 %	
	Public support percentage from						59.59%	
	33-1/3% support test—2017. If t and stop here. The organization	qualifies as a pu	blicly supported of	organization			> [X]	
D	33-1/3% support test—2016. If the and stop here. The organization	ne organization di n qualifies as a pu	blicly supported	on line 13 or 16a organization	, and line 15 is a	3-1/3% or more,	check this box ►	
17a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	est—2017. If the o meets the 'facts- s-and-circumstand	rganization did no and-circumstance ses' test. The org	ot check a box on es' test, check this anization qualifies	line 13, 16a, or 1 box and stop he as a publicly sup	6b, and line 14 is re. Explain in Par oported organizati	t VI how on	
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts- id-circumstances'	and-circumstance test. The organiz	es' test, check this ation qualifies as a	box and stop he a publicly suppor	re. Explain in Par ted organization.	t VI how the	
18	Private foundation. If the organ	ization did not che	eck a box on line	13, 16a, 16b, 17a,	or 17b, check th	nis box and see in	structions ►	

13-3695475

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

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

Sec	tion A. Public Support	<u> </u>		_			
Calend	dar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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.						
	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						
	Total. Add lines 1 through 5 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.)	##					
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
İ	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable				_		
	income (less section 511 taxes) from businesses						
	taxes) from businesses acquired after June 30, 1975						
	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is						
11	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.).						
11 12 13 14	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and	stop here	* * * * * * * * * * * * * * * * * * * *	d, third, fourth, o	r fifth lax year as	a section 501(c)(3	· · · · · · · · · · · · · · · · · · ·
11 12 13 14 Sec	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and extion C. Computation of Pu	l stop here blic Support P	'ercentage	• • • • • • • • • • • • • • • • • • • •			········· <u>► </u>
11 12 13 14 Sec 15	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and extion C. Computation of Pu	I stop here blic Support P 017 (line 8, colum	Percentage n (f) divided by lin	e 13, column (f)).			
11 12 13 14 Sec 15 16	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and this box and this composition of Pupublic support percentage for 20 Public support percentage from	I stop here blic Support P 017 (line 8, colum 2016 Schedule A,	Percentage n (f) divided by lin Part III, line 15	e 13, column (f)).			········· <u>► </u>
11 12 13 14 Sec 15 16 Sec	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from umelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and the computation of Pupulic support percentage from Public support percentage from the computation of Investigation.	blic Support F 017 (line 8, colum 2016 Schedule A, restment Incor	Percentage n (f) divided by lin Part III, line 15 ne Percentage	e 13, column (f))		15	90
11 12 13 14 Sec 15 16 Sec 17	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and action C. Computation of Pupulic support percentage from those proceedings of the computation of Invented in the support percentage from the support percentage for support percentage from the support percentage from the suppor	blic Support F 017 (line 8, column 2016 Schedule A, restment Incor for 2017 (line 10c,	Percentage n (f) divided by lin Part III, line 15 ne Percentage column (f) divide	e 13, column (f)).	nn (f))	15 16	90 90 90 90
11 12 13 14 Sec 15 16 Sec 17 18	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and action C. Computation of Pupulic support percentage for 20 Public support percentage from those percentage investment income percentage investment income percentage investment income percentage in	blic Support F 017 (line 8, column 2016 Schedule A, restment Incor for 2017 (line 10c, from 2016 Schedu	Percentage n (f) divided by lin Part III, line 15 ne Percentage column (f) divide le A, Part III, line	e 13, column (f)). d by line 13, colur	mn (f))	15 16 17 18	040 040 040 040
11 12 13 14 Sec 15 16 Sec 17 18 19a	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and the support percentage for 20 Public support percentage from those this support percentage from the support percen	blic Support F OT (line 8, column 2016 Schedule A, restment Incorr for 2017 (line 10c, from 2016 Schedul the organization of this box and sto	Percentage In (f) divided by lin Part III, line 15 IN Percentage column (f) divide Ile A, Part III, line Ild not check the top here. The organ	e 13, column (f)). If by line 13, column 17. Box on line 14, and ization qualifies a	mn (f)) d line 15 is more s a publicly supp	15 16 17 18 than 33-1/3%, and orted organization	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
11 12 13 14 Sec 15 16 Sec 17 18 19a b	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 organization, check this box and the support percentage for 20 Public support percentage from those this computation of Investment income percentage investment income percentage in 33-1/3% support tests—2017. If	blic Support P 17 (line 8, column 2016 Schedule A, restment Incor for 2017 (line 10c, from 2016 Schedul the organization of this box and sto the organization of c, check this box	Percentage In (f) divided by lin Part III, line 15 The Percentage column (f) divided the A, Part III, line the the the the the the the the the th	e 13, column (f)). d by line 13, colur 17. pox on line 14, and ization qualifies a con line 14 or line organization qualifier qualifie	mn (f))	15 16 17 18 than 33-1/3%, and orted organization 6 is more than 33-tly supported organ	8 % % % % % % % % % % % % % % % % % % %

Part IV Supporting Organizations

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

			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		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) 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		
С	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		to a
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	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		
С	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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	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		
С	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	ilianis.	
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		1020010
С	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		
0 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine	106		

Pa	N Supporting Organizations (continued)			
		(Delta pare)	Yes	No
	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 (b) and (c) below, the governing body of a supported organization?	11a	arie xv	
١	b A family member of a person described in (a) above?	116	<u> </u>	<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
_			Yes	No
1	Did the 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		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sec	tion 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).			
į.				
!				
•	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	instruc	:tions)	٨.
2	Activities Test. Answer (a) and (b) below.	Webstrase.	Yes	No
;	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		
I	Did the activities described in (a) 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 (a) and (b) 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? Provide details in Part VI.	3a		
1	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.	3 b		

1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization	ust on Nov ons must	v. 20, 1970 (explain in complete Sections A	Part VI). See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Yea (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		
ec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for shor tax year or assets held for part of year):	t		
	A Average monthly value of securities	1a		
1	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
(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 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		T
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 in (see instructions).	tegrated	Type III supporting or	ganization
BAA			Schedule A (F	orm 990 or 990-EZ)

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Su	ipporting Organiza	itions (continued)	
Sec	tion D - Distributions			- Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	
3	Administrative expenses paid to accomplish exempt purposes of su	apported organizations		
4	Amounts paid to acquire exempt-use assets	1	7)	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.	on is responsive (provide	details	
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
t	From 2013			
	From 2014			
-	From 2015			
•	From 2016			
	f Total of lines 3a through e			
c	Applied to underdistributions of prior years			
ŀ	Applied to 2017 distributable amount			
	i Carryover from 2012 not applied (see instructions)			
-	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	Distributions for 2017 from Section D, line 7:			
a	Applied to underdistributions of prior years			
Ŀ	Applied to 2017 distributable amount			
C	: Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			
	Excess from 2014			
(Excess from 2015			
C	Excess from 2016			

e Excess from 2017.....

Schedule A (Form 990 or 990-EZ) 2017

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2017

Department of the Treasury Internal Revenue Service

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

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

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

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

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

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

• 9	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III.				
Name	of organization Tanenbay	m Center for		Employor identifica	ation number	
	Interrel	igious Understanding	•	13-369547		
		rganization is exempt under section			zation.	
1	Provide a description of the (see instructions for definition	organization's direct and indirect political on of 'political campaign activities')	ampaign activities in	Part IV.		
2	Political campaign activity ex	penditures (see instructions)	*****	- \$		
3	Volunteer hours for political	campaign activities (see instructions)	- · · · · · · · · · · · · · · · · · · ·			
Pai	t I-B Complete if the o	rganization is exempt under section	on 501(c)(3).			
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	≻ \$	().
2		ise tax incurred by organization managers				٥.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes N	lo
		***************************************				lo
	If 'Yes,' describe in Part IV.					
		rganization is exempt under section	on 501(c) . excent	section 501(c)(3).		
		pended by the filing organization for section				_
2	Enter the amount of the filing of	organization's funds contributed to other organ	izations for section 527	exempt		_
3	Total exempt function expen	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,			_
4		e Form 1120-POL for this year?			Yes N	lo lo
5	Enter the names, addresses organization made payments amount of political contribution segregated fund or a political	and employer identification number (EIN) s. For each organization listed, enter the arms is received that were promptly and directly del action committee (PAC). If additional spa	of all section 527 poli mount paid from the f ivered to a separate po ace is needed, provide	tical organizations to w iling organization's fun- litical organization, such e information in Part IV	thich the filing ds. Also enter the as a separate	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enler-0	(e) Amount of political contributions received an promptly and directly delivered to a separate political organization. If none, enter -0-,	d
(1)						
(2)					,	
(3)						
(4)	 -					
(5)						
(6)			,,,			

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

Part II-A Complete if section 501(the organizatio h)).	n is exempt under sec	tion 501(c)(3) and	filed Form 5768 (el	ection under
A Check ► ☐ if the filin address,	g organization belon EIN, expenses, ar	gs to an affiliated group (and id share of excess lobbying acked box A and 'limited cor	expenditures).	ated group member's name	3,
	Limits on Lobb	ying Expenditures ans amounts paid or incurr		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendite b Total lobbying expendite c Total lobbying expendite d Other exempt purpose e Total exempt purpose e f Lobbying nontaxable and both columns	ures to influence progress to influence aures (add lines 1a expendituresxpenditures (add line)		bbying). ying). lle in amount is: over \$500,000. over \$1,000,000. ver \$1,500,000.		
Subtract line 1f from lin If there is an amount othe section 4911 tax for this	e 1c. If zero or less or than zero on eithe syear?e organizations th	r line 1h or line 1i, did the org 4-Year Averaging Period L at made a section 501(h) ele	anization file Form 4720 Inder section 501(h) ection do not have to o	reporting	Yes No
78	Lob	bying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	*				· 18
f Grassroots lobbying expenditures					
ВАА				Schedule C (Form	n 990 or 990-EZ) 2017

Rattilles Complete if the organization is exempt under section 501(cX3) and has NOT filed Form 5768 (election under section 501(h)). (a) For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. No Amount Yes During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?..... b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?...... c Media advertisements? X 317. d Mailings to members, legislators, or the public?..... X 29 Х e Publications, or published or broadcast statements?..... f Grants to other organizations for lobbying purposes?..... X 317 g Direct contact with legislators, their staffs, government officials, or a legislative body?..... X h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?..... X X 663 j Total. Add lines 1c through 1i...... 2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?........... Х bif 'Yes,' enter the amount of any tax incurred under section 4912...... c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?..... Partill-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members?..... 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?..... 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?..... RaixIII:B. Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.' Dues, assessments and similar amounts from members..... 1 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a 2b b Carryover from last year. 20 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues ... 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

expenditure next year?.....

Taxable amount of lobbying and political expenditures (see instructions)......

4

5

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 17a, 17b, 17c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Tanenbaum Center for Interreligious Understanding 13-3695475 Parti 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 Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Aggregate value at end of year..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?...... Yes 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? No Part | Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2a b Total acreage restricted by conservation easements..... 2b c Number of conservation easements on a certified historic structure included in (a) 2с d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?..... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ►\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. **b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1..... (ii) Assets included in Form 990, Part X..... ▶\$ 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 SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1. b Assets included in Form 990, Part X

Schedule D (Form 990) 2017 Taner				_	13-369			Page 2
Rart III Organizations Maintai	ning Collection	ns of Art, Histo	orical	Treasures, or	Other Similar Ass	ets (c	ontinu	<u>ea) </u>
3 Using the organization's acquisition items (check all that apply):	, accession, and oth	er records, check a	ny of tl	he following that are	e a significant use of its o	ollectio	n	•
a Public exhibition		d Loan	or exc	hange programs				
b Scholarly research		e Other						
c Preservation for future generation	ations	_						
4 Provide a description of the organiz Part XIII.	ation's collections a	nd explain how they	furthe	r the organization's	exempt purpose in			
5 During the year, did the organizato be sold to raise funds rather the						Yes		No
Rangy Escrow and Custodia	Arrangements	. Complete if t	he or	ganization ans	wered 'Yes' on Fo	rm 99), Par	t IV,
line 9, or reported an	amount on Forr	n 990, Part X,	line 2	21.				
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodian or o	ther intermediary	for co	ntributions or othe	r assets not included	Yes	٢	No
b If 'Yes,' explain the arrangement								
•	•	•				Amoun	t	
c Beginning balance			• • • • • •		. 1c			
d Additions during the year					. 1d			
e Distributions during the year					. 1e			
f Ending balance					. 1f			
2 a Did the organization include an a	mount on Form 99	0, Part X, line 21,	for es	crow or custodial	account liability?	Yes		No
b If 'Yes,' explain the arrangement	in Part XIII. Check	here if the explar	nation	has been provided	d on Part XIII		[
Ran V Endowment Funds. C	omplete if the o	organizatio <u>n a</u> r	iswer	ed 'Yes' on Fo	rm 990, Part IV <u>, lir</u>	ne 10.		
` ' '	(a) Current year	(b) Prior yea	r [(c) Two years back	(d) Three years back	(e)	Four year	s back
1 a Beginning of year balance	460,026	. 470,1	64.	447,765	1,728,341.	1	,733,	331.
b Contributions	2,420,000							_
c Net investment earnings, gains, and losses	-306	-21,5	20.	42,540	-5,219.		22,	044.
d Grants or scholarships		-				-		
e Other expenditures for facilities		·	\neg					
and programs	-11,866	. 11,3	82.	-20,141	1,275,357.		27,	034.
f Administrative expenses								
g End of year balance	2,891,586	. 460,0	26.	470,164	447,765.	1	,728,	341.
2 Provide the estimated percentage	e of the current year	ar end balance (lin	ne 1g,	column (a)) held a	as:			
 Board designated or quasi-endowment 	ent 🟲	8						
b Permanent endowment ►	14.00%							
c Temporarily restricted endowmen	nt ► 86.	8 00						
The percentages on lines 2a, 2b, ar	nd 2c should equal 1	00% .						
3 a Are there endowment funds not in the	he nossession of the	organization that a	are heli	h and administered	for the			
organization by:	ne possession or the	s organization that a	16 16	u anu auministereu	IOI GIG		Yes	No
(i) unrelated organizations		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				3a(i)		X
(ii) related organizations		,,,				3a(ii)		х
b If 'Yes' on line 3a(ii), are the rela	ted organizations l	isted as required	on Sch	nedule R?		3b		
4 Describe in Part XIII the intended								
RarteVI3 Land, Buildings, and I				,		-		
Complete if the organi		d 'Yes' on For	m 990	0, Part IV, line	11a, See Form 99	0, Par	t X. li	пе 10.
Description of property	(a) Co	ost or other basis (investment)	(b)	Cost or other pasis (other)	(c) Accumulated depreciation		Book va	
1 a Land					Topicolation			
b Buildings				-				
c Leasehold improvements				46,419.	45,244.		1	,175.
d Equipment			_	166,027.	164,655.			,372.
e Other				77,585.	72,185.			, <u>40</u> 0.
Total. Add lines 1a through 1e. (Colum		orm 990. Part X	сојит					, 400. , 947.
BAA	·· (-) ·································			,,		de D (F) 2017

	Complete if the		7 Dort IV lime 11L C	Earm 000 Dart V line 14
(a) Doca	Complete if the organization answered cription of security or category (including name of security)	(b) Book value		Form 990, Part X, line 12 st or end-of-year market value
100 May 111 St. 2000		(b) Book value	(C) Method of Valuation: Co	st or enu-or-year market value
	tial derivatives			
 Closely Other 	y-held equity interests.			
A) B)				
(C)				
(D)				
(E)				
(F)				
(G)		-		
(H)				3
(1)				
	mn (b) must equal Form 990, Part X, column (B) line 12.) •			
	Investments – Program Related.		N/A	
Part VIII	Complete if the organization answered	Yes' on Form 99	0. Part IV. line 11c. See	Form 990, Part X, line 1
	(a) Description of investment	(b) Book value		st or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(8)				
(9)				
(9) (10)	mn (b) must equal Form 990, Part X, column (B) line 13.) •			
(9) (10) Total. <i>(Colum</i>	Other Assets.	N/A		5 000 Part V Fina 1
(9) (10) Total. <i>(Colum</i>	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Colum Part IX	Other Assets. Complete if the organization answered	N/P I 'Yes' on Form 99 scription	0, Part IV, line 11d. See	Form 990, Part X, line 1
(9) (10) Total. (Colum Part IX	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Colum Part IX (1) (2)	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Colum Part IX (1) (2) (3)	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Colum Part IX (1) (2)	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Colum Part IX (1) (2) (3) (4)	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See	
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered (a) De	l 'Yes' on Form 99	0, Part IV, line 11d. See	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Assets. Complete if the organization answered (a) De Olumn (b) must equal Form 990, Part X, column (b)	l 'Yes' on Form 99	0, Part IV, line 11d. See	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered (a) De Other Liabilities.	I 'Yes' on Form 99escription B) line 15.)	0, Part IV, line 11d. See	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Assets. Complete if the organization answered (a) De Other Liabilities. Complete if the organization answered 'Yes' on F	B) line 15.)	0, Part IV, line 11d. See	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	I 'Yes' on Form 99escription B) line 15.)	0, Part IV, line 11d. See	(b) Book value
(9) (10) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column Part X	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column Part X (1) Fede (2) Def	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column Part X	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X (1) Feder (2) Deff (3) (4) (5)	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column Part X (1) Feder (2) Deff (3) (4) (5) (6)	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X (1) Feder (2) Deff (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X (1) Feder (2) Deff (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column Part X (1) Fede (2) Def (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X (1) Fedee (2) Deff (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value
(9) (10) Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X (1) Fedee (2) Deff (3) (4) (5) (6) (7) (8) (9) (10) (11)	Other Assets. Complete if the organization answered (a) De clumn (b) must equal Form 990, Part X, column (column (b) must eq	B) line 15.)	1e or 11f. See Form 990, Part	(b) Book value

Zancindam Contest xor	10 0000	****
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	5,320,123.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	N. (3)	
a Net unrealized gains (losses) on investments	972.	
b Donated services and use of facilities	181.	
c Recoveries of prior year grants	(A. 200 A. 200 A	
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	457,209.
3 Subtract line 2e from line 1	3	4,862,914.
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		
b Other (Describe in Part XIII.). 4b		
c Add lines 4a and 4b	4с	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	, 5	4,862,914.
Rart XIII Reconciliation of Expenses per Audited Financial Statements With Expense	s 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	2,091,883.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	(전통(학교)) Detroited	
a Donated services and use of facilities	181.	
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	474,181.
3 Subtract line 2e from line 1	3	1,617,702.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	影响	
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,617, <u>702.</u>

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V, Line 4 - Intended Uses Of Endowment Fund

The endowment fund is comprised of permanently restricted and temporarily restricted funds. The temporarily restricted funds are to provide income for operations on a planned, annual basis, and are structured to provide funds for the longer-term.

Part X - FIN 48 Footnote

Part XIII Supplemental Information.

The Organization does not believe its financial statements include any material, uncertain tax positions. Tax filings for periods ending December 31, 2014 and later

are subject to examination by applicable taxing authorities.

Schedule D (Form 990) 2017

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Tanenbaum Center for

<u>Interreligious Understanding</u>

Employer identification number

13-3695475

Part 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?	X 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.	•	·	s for monitoring the use of its gra		
3 Activities per Region. (The	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	e duplicated if additional space (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(I) Colombia			Danasa a abdudbi a a	Peacemaker/Confl	15,600.
(I) Colombia	1	<u></u>	Program activities	ict Resolution	15,600.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)			_		
(8)					
(9)				-	
(10)_					
(11)					
(12)					
(13)					
(14)			·		
(15)					
(16)					
(זי)					
3 a Sub-total	1	1			15,600.
b Total from continuation sheets to Part I					
C Totals (add lines 3a and 3b)	1	1			15,600.

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

Schedule F (Form 990) 2017

13-3695475

Schedule F (Form 990) 2017 Tanenbaum Center for

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, PMV, appraisal, other)
· (i)						64		
(2)							7	
(3)							>	
(4)								
(5)								
(0)								
ω.								
(8)								
(6)								
(10)								
(11)								
(12)						11		
(13)								
(14)								
(15)								
(16)								
 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. Enter total number of other organizations or entities. 	ons listed above that an section 501(c)(3) equons or entities	re recognized as cha uivalency letter	rities by the foreig	gn country, recognize	ed as tax-exempt by	by the IRS, or for which		0 0
1							Schedule F	Schedule F (Form 990) 2017

Page 3

Schedule F (Form 990) 2017 Tanenbaum Center for 13-3695475

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.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2017 (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance BAA 8 <u>(8</u> € @ € 9 9 8 9 Ē (Z) 33 9 3 9 E 8 ව

Sche	edule F (Form 990) 2017 Tanenbaum Center for	13-3695475	Page 4
Pа	HIV 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	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	_	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Foreign Corporations (see Instructions for Form 5471)	Certain Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a quelecting 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).		X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (Instructions for Form 5713; do not file with Form 990)	see _	X No

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Schedule F (Form 990) 2017

Part V Supplemental Information

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

Part I - Additional Supplemental Information

In 2017 the organization employed a consultant for our Conflict Resolution Team (Program Consultant). Through 2017 he resided in Colombia, and was the sole employee in that region. He was paid on a bi-monthly basis in accordance with our payroll schedule for an annual amount of \$15,600.

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest instructions. Name of the organization Tanenbaum Center for

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

	Interreligion	us Underst	anding			13-369547	5		
Pai	Fundraising Activities. Complete Form 990-EZ filers are not re	ete if the organiza	ition answe	ered 'Yes' o	n Form 990, Part IV, line	: 17.			
1	1 0//// 330 EE Mold are not 1				- owing activities, Check	all that apply.	 		
-	1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations E X Solicitation of non-government grants								
	b X Internet and email solicitations f Solicitation of government grants								
	X Phone solicitations			а	<u></u>	X Special fundraising events			
	IX In-person solicitations			•	<u></u>				
	Did the organization have a written of	or oral agreement	with any in	ndividual (i	ncludina afficers, director	s. trustees, or kev			
	employees listed in Form 990, Pa	rt VII) or entity i	n connéct	ion with pi	rofessional fundraising	services?	XYes No		
t	If 'Yes,' list the 10 highest paid in compensated at least \$5,000 by t	dividuals or enti	ties (fundr	raisers) pu	rsuant to agreements u	inder which the fundrai	ser is to be		
	compensated at least \$5,000 by t	ne organization.	1	. .		6.4. Sever period to			
(1)	Name and address of individual or entity (fundraiser)	(ii) Activity	have custor	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization		
;	Stetwin Consult		Yes	No	·				
1	708 3rd Ave								
:	New York NY 10017	Fundraiser		X	682,061.	50,000.	632,061.		
2						·			
<u> </u>									
3									
٦									
4									
						_			
.5									
		<u> </u>				<u> </u>			
6									
7									
8									
9							• .		
		<u> </u>	-						
10									
		<u> </u>							
l'ota	I <i></i>			,, ▶	682,061.	50,000.	632,061.		
3									
									
									
		-			·				

BAA			TEEA3702L 0		C-1-1-1-0/F	m 990 or 990-EZ) 2017
		re any of the organization's gaming license Yes,' explain:		or terminated during th		. Yes No
	a Is t	ter the state(s) in which the organization co he organization licensed to conduct gaming No,' explain:				. Yes No
	.8		-			
	7					
	6		Yes %	Yes %	Yes %	
Ĭ		Other direct expenses				
ESTE	4	Rent/facility costs				
DIRECT	3	Noncash prizes				
	2	Cash prizes				
Ŭ E	1	Gross revenue				
RESESSE		,	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Pai	t III	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered Yes	s' on Form 990, Pai	t IV, line 19, or re	ported more than
В	11	Net income summary. Subtract line 10 fro	om line 3, column (d).			,
S	10		17 See 22 7 See 2			
EXPEZSES	9		89,862.			89,862.
	8	_				
DIRECT	6	Rent/facility costs				
P	5			2.* 		
	4					
-	3	Gross income (line 1 minus line 2)	89,862.			89,862.
Ł	2	Less: Contributions	592,199.			592,199.
REVENUE	1	Gross receipts	682,061.			682,061.
			(event type)	(event type)	(total number)	through column (c))
			(a) Event #1 Special Event	(b) Event #2	(c) Other events None	(d) Total events (add column (a) through column (c))

Sche	edule G (Form 990 or 990-EZ) 2017 Tanenbaum Center for	3-369	5475	Page 3
_	Does the organization conduct gaming activities with nonmembers?		Yes	No
	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
	· ·		ш	
13	Indicate the percentage of gaming activity conducted in:			
2	The organization's facility			*
	An outside facility	13b		8
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	::		
i	Name •			_
:				
·	Address •			
t	Does the organization have a contract with a third party from whom the organization receives gaming revenue of If 'Yes,' enter the amount of gaming revenue received by the organization \$ and to of gaming revenue retained by the third party \$			No
10	: If 'Yes,' enter name and address of the third party:			
÷	Name •			
	Address ►			
16	Gaming manager information:			
	Name •			
	Garning manager compensation ► \$			
	Description of services provided *			
	□ Director/officer □ Employee □ Independent contractor			
17	Mandatory distributions:			
į a	s Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the			_
	state gaming license?		Yes	No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the		
No.	organization's own exempt activities during the tax year > \$	1	C:: \ /	
逐	Supplemental Information. Provide the explanations required by Part I, line 2b, co and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide ar information. See instructions.	iumns iy addii	(III) and (tional	(v);
BAA	TEEA3703L 09/18/17 Schedul	G (Fon	n 990 or 9 9	0-EZ) 2017

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Tanenbaum Center for Interreligious Understanding

Employer identification number 13-3695475

990 Part III - Statement of Program Services Accomplishments

The Tanenbaum Center for Interreligious Understanding builds mutual respect with practical programs that bridge religious difference and combat prejudice, hatred, and violence in areas of armed conflict, schools, workplaces, and health care settings. Tanenbaum is a not-for-profit, secular, non-sectarian organization that operates in the United States and abroad.

For over 25 years, Tanenbaum has trained educators to teach about religious differences and combat bullying, helped medical professionals develop skills to care for religiously diverse patients and prevent disparities in care, created inclusive work environments in some of the world's largest companies to counter religious harassment, and supported a network of courageous and religiously inspired Peacemakers in the world's most troubled conflict zones.

Our Other Programs:

MFA Project

In March of 2017 MFA departed our organizational umbrella to join the Tides Center. As a result the financials include MFA's activities up until that date and its subsequent departure. Included in that departure are a number of large expenses that were reported as we transitioned accrued revenue and accounts receivable that were attributable to MFA out of Tanenbaum and to the Tides Center.

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

Tanenbaum's Corporate Membership program works directly with the world's leading national and multi-national companies to address religious diversity and adopt

Name of the organization Tanenhaum Center for Interreligious Understanding

Employer identification number 13-3695475

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

policies and practices of religious inclusion. Tanenbaum does this by conducting policy reviews, leading training sessions and providing Corporate Members with practical resources. With our 34 Corporate Members (employing over 52 million people), Tanenbaum helped change working environments in nearly 100 countries. In 2017, this growing program welcomed new Corporate Members (AB, Bank of America, Boston Scientific, Cargill, Charter, DCAS, Dell, GM, GSK, IMF, Moody's, Sodexo, Target, TIAA).

Total Corporate Membership Expenses: \$228,796

Tanenbaum's Health Care Program prepares doctors and nurses to provide patient-centered care that addresses religion (or the lack thereof) and the critical role it can play in health care decisions and outcomes. Through webinars, Grand Rounds, and presentations at hospitals, schools, and conferences, the Health Care Program trained over 1,700 healthcare professionals and students in 2017. These health professionals treated hundreds of thousands of patients in the past 16 months, improving health care outcomes. In 2017, Tanenbaum also continued to work with Columbia University School of Nursing to create a curriculum for nursing students on cultural competency as it relates to religion.

Total Health Care Program Expenses: \$236,885

In 2017, Tanenbaum's Education Program developed a 3-year strategy based on an evaluation of educators that were trained by Tanenbaum and used programmatic materials; 93% of them reported that students were better able to debunk stereotypes

Name of the organization Tanenbaum Center for Interreligious Understanding

Employer Identification number 13-3695475

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

and discern that people may have different religious beliefs. Through special initiatives, Tanenbaum widely disseminated educational materials for schools and the general public. Tanenbaum received a grant to make its standards-referenced elementary school curriculum, Religions in My Neighborhood, a free-resource for administrators and educators across the country. Additionally, Tanenbaum's Combating Extremism project disseminated anti-bias fact sheets and materials for use in public and private conversations and to dispel fake news and stereotypes. Tanenbaum's Health Care Program prepares doctors and nurses to provide patient-centered care that addresses religion (or the lack thereof) and the critical role it can play in health care decisions and outcomes. Through webinars, Grand Rounds, and presentations at hospitals, schools, and conferences, the Health Care Program trained over 1,700 healthcare professionals and students in 2017. These health professionals treated hundreds of thousands of patients, improving health care outcomes. In 2017, Tanenbaum also continued to work with Columbia University School of Nursing to create a curriculum for nursing students on cultural competency as it relates to religion.

Total Education Program Expenses: \$122,559

Tanenbaum's Peacebuilding and Conflict Resolution Program works with religiously motivated Peacemakers in Action dedicated to countering violence and extremism in 23 conflict and post-conflict regions worldwide including Syria, South Sudan, Colombia, Afghanistan, Nigeria, Indonesia and the Philippines. Our Peacemakers collaborate to conduct targeted interventions in some of the world's simmering conflicts and most violent hot spots. In 2017, our Peacemakers in Action Network conducted collaborative peacebuilding interventions in South Sudan and Southeast Asia, reaching over 500

Employer identification number 13-3695475

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

peace activists and community members. In addition, the work of religious peacebuilders was promoted through presentations and panels engaging nearly 500 students, academics, policy makers and practitioners. Finally, our Peacebuilding and Conflict Resolution Program Advisory Council selected two new Peacemakers in Action, Dr. Sarah AK Ahmed from Iraq and James Lual Atak from South Sudan, out of 72 nominations for 66 unique candidates from around the world (nearly doubling the number of nominations received with a 47% increase in the number of women nominees compared with the previous cycle of nominations.)

Total Peacebuilding and Conflict Resolution Program Expenses: \$272,277

Total Other programs Expenses: \$256,331

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Georgette Bennett is a client of Emigrant Bank's New York Private Bank and Trust.

John Hart is a Vice Chairman of NYPBT, and advises Dr. Bennett and her husband Dr.

Leonard Polonsky.

Form 990, Part VI, Line 11b - Form 990 Review Process

Management reviewed a draft of the form 990 with the audit/finance committee and provided edits to the tax preparer. Thereafter, the form 990 was sent to the full Board of Directors prior to being filed with the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The organization has a board approved conflicts of interest policy. Each board member must fill out an annual declaration stating he or she had no conflicts or identifying the nature of their interested party transactions.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Periodically, the Executive Committee reviews comparable salaries based on a

Name of the organization Tanenbaum Center for Interreligious Understanding

Employer identification number 13-3695475

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management (continued) recognized study and reviews the performance of senior management to determine if the existing salary falls within these ranges. After a deliberation of this matter, a recommendation to the Board on a new proposed salary and benefit package is voted on.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Periodically, the Executive Committee reviews comparable salaries based on a

recognized study and reviews the performance of senior management to determine if

the existing salary falls within these ranges. After a deliberation of this matter,

a new proposed salary and benefit package is voted on.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Governing documents, conflict of interest statements and financial statements are made available to the public upon written request.

Form 990, Part IX, Line 11g Other Fees For Services

	(A)	(B)	(C)	(D)	
	Total	Program <u>Services</u>	Management & General	Fund- <u>raising</u>	
Total \$	200,589. 200,589.	94,372. \$ 94,372.	10,635. \$ 10,635.	95,582. \$ 95,582.	

Form 990, Part XI, Line 9
Other Changes In Net Assets Or Fund Balances