## Form **990**

## 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)

OMB No. 1545-0047 2018

Open to Public

Department of the Treasury

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

		veriue Service	Go to www.irs.gov/Form990 for instructions and the latest i				mspection	
			dar year, or tax year beginning , 2018, and endi	1g	1	,		
В	Check	if applicable:	C		D Employ	er identifi	cation number	
	L A	ddress change	Tanenbaum Center for		13-3	36954	75	
	N.	ame change	Interreligious Understanding		E Telepho	ne numbe	r	
	In	itial return	55 Broad Street, 17th Floor		(212	2) 96	7-7707	
	H	nal return/terminated	New York, NY 10004		(222	.,		
	H	mended return			<b>G</b> Gross re	ceints S	2,840,	695
	$\vdash$		F Name and address of principal officer:	H(a) Is this	a group return			X No
	ША	oplication pending	F Name and address of principal officer: Joyce Dubensky	1 ' '			103	No
			Same As C Above	If "No,"	subordinates " attach a list.	(see insti	ructions)	
		exempt status:	X  501(c)(3)   501(c) ( ) ◀ (insert no.)   4947(a)(1) or   527					
J	We	bsite: ► ww	w.tanenbaum.org		exemption nu			
K		n of organization:	X Corporation Trust Association Other ► L Year of forma	tion: 199	2 <b>M</b> s	tate of leg	al domicile: NY	
Pa	rtΙ	Summar	/					
	1	Briefly descri	be the organization's mission or most significant activities: Tanenbaum	promo	tes mut	cual	respect a	nd
a)		understa	nding with practical programs that bridge rel	igious	differ	ence	and comba	at
nce		prejudio	e, hatred and violence in areas of armed conf.	lict, s	schools	, wo	rkplaces a	and
rna		health c	are settings.					
Activities & Governance	2	Check this bo	x if the organization discontinued its operations or disposed of m	ore than 2	25% of its i	net ass	ets.	
ၓ	3	Number of vo	ting members of the governing body (Part VI, line 1a)			3		19
જ	4		dependent voting members of the governing body (Part VI, line 1b)		· · · · · · · · · · · · · · · · · · ·	4		18
tie	5		of individuals employed in calendar year 2018 (Part V, line 2a)			5		25
ξi	6		of volunteers (estimate if necessary)			6		77
Ac			d business revenue from Part VIII, column (C), line 12			7a		0.
	b	Net unrelated	business taxable income from Form 990-T, line 38			7b		906.
					Prior Year		Current Ye	
4	8	Contributions	and grants (Part VIII, line 1h)	. 4	1,197,7			515.
Revenue	9	Program serv	ice revenue (Part VIII, line 2g)		557,7			809.
ve	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)		107,4	29.	114,	909.
æ	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	. 4	1,862,9	14.	1,490,	233.
	13	Grants and s	milar amounts paid (Part IX, column (A), lines 1-3)					
	14	Benefits paid	to or for members (Part IX, column (A), line 4)					
	15	Salaries, oth	er compensation, employee benefits (Part IX, column (A), lines 5-10)		860,3	45.	1,132,	560.
es	16 2		fundraising fees (Part IX, column (A), line 11e)		50,0			860.
Expenses	104				30,0	-	017	
ж	b		sing expenses (Part IX, column (D), line 25)  335,376.	_				
ш.	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		707,3			602.
	18	Total expens	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,617,7	02.	1,822,	022.
	19	Revenue less	expenses. Subtract line 18 from line 12	. 3	3,245,2	12.	-331,	789.
90				Beginni	ng of Curren	t Year	End of Yea	
Net Assets or Fund Balances	20	Total assets	Part X, line 16)	. [	5,758,6	62.	5,165,	200.
Ass Ba	21	Total liabilitie	s (Part X, line 26)		204,1	07.	243,	635.
Se Se	22	Net assets o	fund balances. Subtract line 21 from line 20		5,554,5	55.	4,921,	565.
	rt II	Signatu			, , -			
				the hest of n	ny knowledge	and helie	f it is true correct.	and
comp	olete. D	eclaration of prepare	clare that I have examined this return, including accompanying schedules and statements, and to rer (other than officer) is based on all information of which preparer has any knowledge.	o the best of h	ny miomicago	and bone	1, 10 10 10 10 10 10 10 10 10 10 10 10 10	arra
Cic	ın	Signatu	re of officer	Di	ate		***************************************	
Siç He		Toy	na Duhangku	CEO				
110	10	Type o	ce Dubensky print name and title	CEO				
			renarer's name Prenarer's signature Date		Check	if F	PTIN	
				119	-	J "		
Pa			T Deliati	<i>r</i> /	self-employe	ed 1	202024184	
Pre	epar				-			
US	e Or	ily   Firm's addr			Firm's EIN		4036703	
			NEW YORK, NY 10016-6517		Phone no.	(212	<u>,                                     </u>	
May	/ the	IRS discuss th	is return with the preparer shown above? (see instructions)				X Yes	No

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.

OMB No. 1545-1709

► Go to www.irs.gov/Form8868 for the latest information.

**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/e-file-providers/e-file-for-charities-and-non-profits.

Automat	ic 6-Month Extension of Time. Only sub	mit origin	al (no copies needed).		
All corpora use Form 7	tions required to file an income tax return other the 7004 to request an extension of time to file income	an Form 99 tax returns	5.	ps, REMICs, and tru	
	Name of exempt organization or other filer, see instructions.			Employer identification i	number (EIN) or
Type or print	Tanenbaum Center for Interreligious Understanding Number, street, and room or suite number. If a P.O. box, see in	netructions		13-3695475 Social security number (	rssn)
File by the due date for		Social security number (	3311)		
filing your return. See	55 Broad Street, 17th Floor City, town or post office, state, and ZIP code. For a foreign add				
instructions.	New York, NY 10004				
	INEW IOLK, NI 10004				
Enter the F	Return Code for the return that this application is for	or (file a se	parate application for each return)		01
Application	n	Return Code	Application Is For		Return Code
Form 990 o	r Form 990-EZ	01	Form 990-T (corporation)		07
Form 990-E	3L	02	Form 1041-A		08
Form 4720	(individual)	03	Form 4720 (other than individual)		09
Form 990-F	PF	04	Form 5227		10
Form 990-1	Γ (section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-7	Γ (trust other than above)	06	Form 8870		12
<ul><li>If the o</li><li>If this is check t</li></ul>	one No. ► (212) 967-7707  rganization does not have an office or place of but some a Group Return, enter the organization's four this box ► . If it is for part of the group, of the group, of the group, of the group, or the group is for.	siness in th digit Group	e United States, check this box	f this is for the whole	e group,
for the	e organization named above. The extension is for the $\overline{X}$ calendar year 20 $\underline{18}$ or	organization		zation return	
	tax year beginning, 20 tax year entered in line 1 is for less than 12 month hange in accounting period			nal return	
	s application is for Forms 990-BL, 990-PF, 990-T, 4			3a \$	0.
	s application is for Forms 990-PF, 990-T, 4720, or ayments made. Include any prior year overpaymen			3 b \$	0.
	nce due. Subtract line 3b from line 3a. Include you S (Electronic Federal Tax Payment System). See			3 c \$	0.
Caution: If	you are going to make an electronic funds withdragetructions	awal (direct	debit) with this Form 8868, see Form 8	453-EO and Form 88	379-EO for

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2019)

Pan		Check if Schedule O contains a response or note to any line in this Part III		. X
1	Briefly	y describe the organization's mission:		. ^
•	-	enbaum combats religious prejudice and hatred in everyday life through prog	rame	in
		kplace, health care, education, and by working with religious peacemakers is		
		flicts abroad. See Schedule O.	1 411	<u>iicu</u>
	0011	111000		
2	Did the	e organization undertake any significant program services during the year which were not listed on the prior		
		990 or 990-EZ? Yes	X	No
		s," describe these new services on Schedule O.	_	
		ne organization cease conducting, or make significant changes in how it conducts, any program services?	X	No
		s," describe these changes on Schedule O.		
4	Descr	ribe the organization's program service accomplishments for each of its three largest program services, as measured by on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total e	expens expense	es. es.
	and re	evenue, if any, for each program service reported.		,
4 a	(Code	e:) (Expenses \$1,289,808. including grants of \$) (Revenue \$		)
	<u>See</u>	<u> Schedule O</u>		
4 b	(Code	e:) (Expenses \$including grants of \$) (Revenue \$		)
1.0	(Code	e: ) (Expenses \$ including grants of \$ ) (Revenue \$		
40	(Couc	/ Capenses V including grants of V ) (Nevertide V		—′
A -1	Othor	program corvices (Describe in Schedule O.)		
	Otner (Expe	program services (Describe in Schedule O.) enses \$ including grants of \$ ) (Revenue \$	)	
		program service expenses   1.289.808.	,	

## Form 990 (2018) Tanenbaum Center for Part IV Checklist of Required Schedules

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

# Form 990 (2018) Tanenbaum Center for Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		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? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24 a	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
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(	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		
(	1 Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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 I	25a		Х
ŀ	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		Х
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? <i>If 'Yes,' complete Schedule L, Part III.</i>	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):			
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		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		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ŀ	olf '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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Pai	TV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			· L
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
ЗАА	TEEA0104L 08/03/18	Form	990	(2018)

S) Tanenbaum Center for Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
2 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 2a 25			
b	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	Χ	
b	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b	X	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b	If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7.	Х	
	services provided to the payor?	7 a 7 b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7 0	Λ	
·	Form 8282?	7с		Χ
d	If 'Yes,' indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	,		
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
12 a	against amounts due or received from them.)	12a		
	of Yes,' enter the amount of tax-exempt interest received or accrued during the year   12b	124		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
10		16		Χ
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		Λ

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 1 a Enter the number of voting members of the governing body at the end of the tax year..... 19 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 ... 18 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a 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 operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?............ Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... **c** Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* ... See .Schedule .Q ..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... Χ 15a 15 b X 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?..... Χ 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 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 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X 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 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

New York NY 10004 (212)

967-7707

17th Floor

Joyce Dubensky 55 Broad Street,

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

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

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

- 1 a 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)								
(A) Name and Title	(B) Average hours	thar	n one Ì s both dire	oox, an o	unles fficer truste		n	(D)  Reportable compensation from	(E) Reportable compensation from	<b>(F)</b> Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Georgette Bennett	1.25								_	_
President & CEO	0	Х		Χ				0.	0.	0.
(2) Jeffrey Becker	1.25	Х		Χ				0.	0.	0
Secretary  (2) Tridith Thompson	0 1.25	Λ		Λ				0.	0.	0.
(3) Judith Thompson		37		37				0	0	0
Treasurer (4) Justin Foa	0 1.25	Х		Χ				0.	0.	0.
Chair of Board	1.25	Х		Х				0.	0.	0.
(5) Joyce Dubensky	60	Λ		Λ				0.	0.	<u> </u>
CEO	$-\frac{60}{0}$	Х		Х				135,000.	0.	60.
(6) TJ Haynes-Morgan	1.25	71		71				133,000.	0.	00.
Director	0	Х						0.	0.	0.
(7) Sara Pandolfi	1.25									
Director	0	Х						0.	0.	0.
(8) Lester Crystal	1.25									
Director	0	Х						0.	0.	0.
(9) Robert Heller	1.25									
Director	0	Χ						0.	0.	0.
(10) Nada Hindiyeh	1.25									
Director	0	Х						0.	0.	0.
(11) Patrick Grace	1.25									
Director	0	Х						0.	0.	0.
(12) Jen Opheim	1.25									
Director	0	Х						0.	0.	0.
(13) Monika Machon	1.25									
Director	0	X						0.	0.	0.
(14) Ronald Ries	1.25									
Director	0	Χ						0.	0.	0.

Part VII   Section A. Officers, Directors, Tru	ustees, (B)	Key	Em	ıplo O)	_	es,	and	d Highest Com	pensated Empl	oyees	(contin	ued)
<b>(A)</b> Name and title	Average hours per week (list any hours for related organiza - tions below dotted line)	box	, unle cer ar	Pos check ess pe	sition more erson direct	than tis bottom Highest compensated employee	h an tee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	amou com fr org an	(F) stimated int of othingensation om the anization d related anizations	n 1
(15) Linda Marcelli Director	1.25 0	Х						0.	0.			0.
(16) Holly Weiss Director	1.25 0	Х						0.	0.			0.
(17) Marni Selman Director	1.25 0	X						0.	0.			0.
(18) Rebecca Baker Director	1.25 0	X						0.	0.			0.
(19) Christina Hioureas Director	1.25 0	Х						0.	0.			0.
C20) Mark Fowler Deputy CEO	<u>60</u> 0	-		Х				114,152.	0.		6,0	60.
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Sub-total							<b>•</b>	249,152.	0.		6,1	20.
c Total from continuation sheets to Part VII, Secti	on A						<b>&gt;</b>	0.	0.	0.		
d Total (add lines 1b and 1c)							<u> </u>	249,152.	0.		6,1	20.
2 Total number of individuals (including but not limited from the organization ► 2	I to those I	isted	abov	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	1	
											Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru ch individu	stee ıal	, key	/ em	nploy	yee,	or h	nighest compensat	ted employee	3		Х
<b>4</b> For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	f reportab er than \$1	le co 50,0	mpe 00?	ensa If '}	ition es,	and com	oth ple	er compensation te Schedule J for	from	4		X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper	satio	on fro	om :	anv	unre	late	ed organization or	individual			Х
Section B. Independent Contractors									<b>4100 000</b> (			
Complete this table for your five highest compen compensation from the organization. Report compen	sated industrial	epen the c	dent	t cor dar <u>y</u>	ntra year	ctors endi	tha ng v	it received more the vith or within the or	nan \$100,000 of ganization's tax year			
(A) Name and business address  (B) Description of services							Compe	c) nsatior	า			
2 Tabel number of independent and a first of the first of	a.uk 1 !!	(L 1 ·	ال م	'	:-1	ا جان		udea massible !	Ala a a			
2 Total number of independent contractors (including the \$100,000 of compensation from the organization		ned t	u thc	se I	isted	ı abo	ve)	who received more	uidfi			

# Form 990 (2018) Tanenbaum Center for Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to an	y line in this Part V	III		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e	Federated campaigns				
<u>ဗ</u>	h	<b>Total.</b> Add lines 1a-1f ▶	931,515.			
Program Service Revenue	2a b	Program Fees 900099	443,809.	443,809.		
n Service	c d e					
<u>ra</u>	f	All other program service revenue				
ĕ		Total. Add lines 2a-2f	443,809.			
	3	Investment income (including dividends, interest and other similar amounts)	150,043.			150,043.
	4	·				
	5	Royalties				
	6 a	Gross rents				
		Less: rental expenses				
		Rental income or (loss)				
		Net rental income or (loss)				
		(i) Securities (ii) Other				
	7 a	Gross amount from sales of assets other than inventory 1, 214, 497.				
		Less: cost or other basis and sales expenses				
		Gain or (loss)35,134.				
	d	Net gain or (loss)	-35,134.			-35,134.
Other Revenue	8 a	Gross income from fundraising events (not including \$ 474,048. of contributions reported on line 1c).				
Œ		See Part IV, line 18				
the		Less: direct expenses b 100,831.				
δ		Net income or (loss) from fundraising events ▶				
		Gross income from gaming activities. See Part IV, line 19				
		Net income or (loss) from gaming activities				
		Gross sales of inventory, less returns and allowances				
	b	Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory ▶				
		Miscellaneous Revenue Business Code				
	11 a					
	b					
	С					
	-	All other revenue				
		Total. Add lines 11a-11d				
	12	Total revenue. See instructions	1,490,233.	443,809.	0.	114,909.

Part IX | Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX						
6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundráising expenses	
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21					
2	Grants and other assistance to domestic individuals. See Part IV, line 22					
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16					
4	Benefits paid to or for members					
5	Compensation of current officers, directors, trustees, and key employees	263,620.	216,349.	13,988.	33,283.	
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	698,818.	550,138.	27,364.	121,316.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0,00,010.	330,130.	27,304.	121,310.	
9	Other employee benefits	87,959.	70,052.	3,778.	14,129.	
10	Payroll taxes	82,163.	65,435.	3,530.	13,198.	
11	Fees for services (non-employees):	02/2001	00, 100,	0,000.	20,200	
a	Management					
	Legal					
	Accounting					
	Lobbying					
	Professional fundraising services. See Part IV, line 17	67,860.			67,860.	
	Investment management fees	4,608.		4,608.	0170001	
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.\$Ch. OAdvertising and promotion	203,159.	84,928.	90,429.	27,802.	
13	Office expenses					
14	Information technology					
15	Royalties.					
16	Occupancy	116,744.	91,573.	5,943.	19,228.	
17	Travel	94,940.	88,709.	3,122.	3,109.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	.,	-,	
19 <b>20</b>	Conferences, conventions, and meetings					
21	Payments to affiliates					
22	Depreciation, depletion, and amortization	3,383.		3,383.		
23	Insurance	8,603.	6,748.	438.	1,417.	
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).	0,003.	0,740.	430.	1,711.	
ā	Program events	60,532.	48,973.	171.	11,388.	
	Other	32,396.	15,360.	15,625.	1,411.	
	Telephone	27,741.	23,250.	2,395.	2,096.	
C	Bad debt expense	20,000.		20,000.		
	All other expenses	49,496.	28,293.	2,064.	19,139.	
25	Total functional expenses. Add lines 1 through 24e	1,822,022.	1,289,808.	196,838.	335,376.	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720)		_			

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing.	185,923.	1	105,928.
	2	Savings and temporary cash investments.	231,600.	2	250,788.
	3	Pledges and grants receivable, net	995,663.	3	780,737.
	4	Accounts receivable, net		4	64,469.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	,	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
(ħ	7	Notes and loans receivable, net.		7	
Assets	8	Inventories for sale or use		8	
1SS			67.607		20.040
	9	Prepaid expenses and deferred charges	67,607.	9	30,942.
	10 a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D			
			7 047	10 c	0 020
	11	Less: accumulated depreciation	7,947.	11	8,929. 3,896,446.
	12	Investments — publicly traded securities.  Investments — other securities. See Part IV, line 11	4,160,892.	12	3,890,440.
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets.		14	
	15	Other assets. See Part IV, line 11.		15	26 061
	16	Total assets. Add lines 1 through 15 (must equal line 34)	==,	16	26,961.
	17	Accounts payable and accrued expenses	31,563.	17	5,165,200. 70,546.
	18	Grants payable	31,303.	18	70,340.
	19	Deferred revenue	154,167.	19	153,499.
	20	Tax-exempt bond liabilities	101/1011	20	100, 133.
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.  Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	18,377.	25	19,590.
	26	<b>Total liabilities.</b> Add lines 17 through 25.	204,107.	26	243,635.
ces		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets.	1,821,049.	27	1,694,763.
Bal	28	Temporarily restricted net assets.	841,920.	28	626,344.
Þ	29	Permanently restricted net assets	2,891,586.	29	2,600,458.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
3	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
let	33	Total net assets or fund balances	5,554,555.	33	4,921,565.
_	34	Total liabilities and net assets/fund balances	5,758,662.	34	5,165,200.

3 b

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.....

#### **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.

OMB No. 1545-0047

2018

Open to Public Inspection

Name	f th	e organization	Tanenbaum	Center for				Employer iden	tification number	
				ious Understar	nding			13-3695	475	
Par	Τ	Reason	for Public Cha	arity Status (All or	rganizations must o	comple	te this	part.) See instr	uctions.	
The c	rga	anization is	not a private found	dation because it is: (	For lines 1 through 12,	check o	nly one	box.)		
1		A church, o	convention of church	nes, or association of ch	nurches described in sec	tion 170(	b)(1)(A)	(i).		
2		A school de	escribed in section	170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 or	990-EZ	).)			
3		A hospital	or a cooperative h	nospital service organ	ization described in sec	ction 17	0(b)(1)(A	A)(iii).		
4			•		unction with a hospital				). Enter the hospital's	
	L	1	, and state:	,	·				,	
5		An organiz	 zation operated for <b>70(b)(1)(A)(iv).</b> (Co	r the benefit of a colle	ge or university owned	or oper	ated by	a governmental uni	t described in	
6										
7	X	An organiz in <b>section</b>	ation that normally 170(b)(1)(A)(vi).	receives a substantial p (Complete Part II.)	part of its support from a	governm	ental un	it or from the general	public described	
8			-		A)(vi). (Complete Part	•				
9	L		ty or a non-land-gra	nt college of agriculture	tion 170(b)(1)(A)(ix) oper e (see instructions). Enter	r the nan	ne, city,			
10		from activ	ities related to its	exempt functions—sub	e income (less section)	ons, and	(2) no	more than 33-1/3%	nd gross receipts of its support from gross by the organization after	
11		An organiz	zation organized a	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(a)(4).		
12		or more pr	ublicly supported o	organizations describe	ely for the benefit of, to ed in <b>section 509(a)(1)</b> outporting organization	r sectio	n 509(a	)(2). See section 50	y out the purposes of one (9(a)(3). Check the box in	
а		Type I. A si organizatio		ion operated, supervise egularly appoint or elect	d, or controlled by its sup t a majority of the directo					
b		Type II. A manageme	supporting organia	zation supervised or c	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), the supported organ	by having control or ization(s). <b>You</b>	
С		Type III fun	ctionally integrated	I. A supporting organizat	ion operated in connection	n with, a	nd functi	onally integrated with,	its supported	
d		Type III no	n-functionally integ	ı <b>rated.</b> A supporting org	panization operated in contract must satisfy a distribute A and D, and Part V.	nnection	with its	supported organization	n(s) that is not ess requirement (see	
е		Check this	box if the organiz	zation received a writt	en determination from	the IRS				
		nter the nun	nber of supported	organizations	supporting organizatior					
g	Pr	rovide the fo	ollowing information	on about the supported	d organization(s).					
•	<b>i)</b> Na	ame of supporte	ed organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	in your o	s the tion listed poverning ment?	(v) Amount of moneta support (see instruction	(vi) Amount of other support (see instructions)	
						Yes	No			
(A)										
(B)										
(C)										
(D)										
<u>(E)</u>										
Total										

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

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

Sec	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,594,099.	2,528,289.	964,375.	4,197,737.	931,515.	10,216,015.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	<b>Total.</b> Add lines 1 through 3 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)	1,594,099.	2,528,289.	964,375.	4,197,737.	931,515.	10,216,015. 4,048,146.
6	Public support. Subtract line 5 from line 4						6,167,869.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total
7	Amounts from line 4	1,594,099.	2,528,289.	964,375.	4,197,737.	931,515.	10,216,015.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	77,307.	73,137.	66,566.	109,628.	150,043.	476,681.
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.
	Total support. Add lines 7 through 10						10,692,696.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	1,813,443.
	<b>First five years.</b> If the Form 990 is organization, check this box and	stop here		rd, fourth, or fifth t	tax year as a sectio	n 501(c)(3)	
Sec	tion C. Computation of Pul Public support percentage for 20	blic Support P	ercentage	11 (0)			
	Public support percentage for 20 Public support percentage from 3						57.68 % 54.18 %
	<b>33-1/3% support test—2018.</b> If t and <b>stop here.</b> The organization	he organization di	id not check the b	ox on line 13. and	d line 14 is 33-1/3	% or more, check	k this box
b	<b>33-1/3% support test—2017.</b> If the and <b>stop here.</b> The organization	ne organization did	d not check a box	on line 13 or 16a	a, and line 15 is 33	3-1/3% or more, o	check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	e. Explain in Par	t VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-an <b>Private foundation.</b> If the organization	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this ition qualifies as	box and <b>stop her</b> a publicly support	<b>e.</b> Explain in Par ed organization	t VI how the▶
	3			•			

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

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

Calendar  1 Galendar  2 G m por fu rea ta  3 G th or ei ei ei	year (or fiscal year beginning in) > hifts, grants, contributions, and membership fees eceived. (Do not include ny 'unusual grants.')	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
1 Gan read read read read read read read read	sifts, grants, contributions, and membership fees eceived. (Do not include ny 'unusual grants.')	(a) 2014	(6) 2013	(0) 2010	(a) 2017	(6) 2010	(i) Total
2 G m po fu re ta 3 G th on ei	aross receipts from admissions, nerchandise sold or services erformed, or facilities urnished in any activity that is elated to the organization's ax-exempt purpose						
th or <b>4</b> Ta or ei	nat are not an unrelated trade r business under section 513. ax revenues levied for the rganization's benefit and ither paid to or expended on s behalfhe value of services or acilities furnished by a overnmental unit to the						
or ei	rganization's benefit and ither paid to or expended on s behalf						
	acilities furnished by a overnmental unit to the						
fa go							
<b>7a</b> A 2,	otal. Add lines 1 through 5 mounts included on lines 1, , and 3 received from isqualified persons.						
ai di ex 1°	mounts included on lines 2 nd 3 received from other than isqualified persons that xceed the greater of \$5,000 or % of the amount on line 13 or the year.						
c A	dd lines 7a and 7b						
70	c from line 6.)						
	on B. Total Support				1 40		
	r year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
<b>10a</b> Gr pa re	mounts from line 6  ross income from interest, dividends, ayments received on securities loans, ents, royalties, and income from milar sources						
in ta ad	Inrelated business taxable acome (less section 511 axes) from businesses cquired after June 30, 1975						
11 Ne	dd lines 10a and 10bet income from unrelated business citivities not included in line 10b, hether or not the business is gularly carried on						
ga ca	other income. Do not include ain or loss from the sale of apital assets (Explain in Part VI.)						
10	<b>otal support.</b> (Add lines 9, 0c, 11, and 12.)						
10	irst five years. If the Form 990 rganization, check this box and	stop here		nd, third, fourth, c	or fifth tax year as	a section 501(c)(3	)
	on C. Computation of Pul			no 12!: "	<u> </u>	1 1	0
	Public support percentage for 20	•			-		<u> </u>
	ublic support percentage from 2					16	%
	on D. Computation of Inv				(0)		0
	nvestment income percentage for	•	• •	-	* * * *		00
	nvestment income percentage fr					<u> </u>	%
is	3-1/3% support tests—2018. If to not more than 33-1/3%, check 3-1/3% support tests—2017. If to	this box and stop	<b>here.</b> The organ	ization qualifies	as a publicly supp	orted organization	
lir	ne 18 is not more than 33-1/3%	, check this box a	and <b>stop here.</b> The	e organization qu	ialifies as a public	ly supported organ see instructions.	ization ►

### Part IV Supporting Organizations

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

### **Section A. All Supporting Organizations**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If 'No,' describe in <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	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 <b>Part VI</b> 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 <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 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 <b>Part VI</b> 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 <b>Part VI</b> 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		
5а	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 <b>Part VI</b> , 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			
b	amendment to the organizing document).  Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the	5a		
c	organization's organizing document?  Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
	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 <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	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		
9а	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 <b>Part VI</b> .	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 <b>Part VI</b> .	9b		
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 <b>Part VI</b> .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II 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 whether the organization had excess business holdings.)	10b		

Pa	rt IV	Supporting Organizations (continued)			
11	∐ac :	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		rson who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
		rning body of a supported organization?	11a		
	<b>b</b> A far	mily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Se	ction	B. Type I Supporting Organizations			
1	Did #	he directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
•	or ele	ect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in			
	If the	<b>VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. e organization had more than one supported organization, describe how the powers to appoint and/or remove			
		ctors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, ied to such powers during the tax year.	1		
2		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			
		efit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Se	ction	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			
	supp	ach of the organization's supported organization(s)? If No,' describe in <b>Part VI</b> how control or management of the porting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction	D. All Type III Supporting Organizations			
				Yes	No
1	Did t	he organization provide to each of its supported organizations, by the last day of the fifth month of the			
-	orgai	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
_	\ <b>A</b> /a.v.a	and of the expension is afficed discretes an Asset of State (N. appointed by cleated by the expension			
2	orgai	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how			
	the c	organizatión maintained a close and continuous working relationship with the supported organization(s).	2		
3	By re	eason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at			
	all tir	mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played	3		
<u> </u>		is regard.  E. Type III Functionally Integrated Supporting Organizations	3		
		<u> </u>			
1	Chec	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	a ∐ 1	The organization satisfied the Activities Test. Complete line 2 below.			
	b ∐ 7	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 in	nstruc	tions)	
2	Activ	rities Test. Answer (a) and (b) below.		Yes	No
	<b>a</b> Did s	substantially all of the organization's activities during the tax year directly further the exempt purposes of the			
	supp	orted organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported</b> inizations and explain how these activities directly furthered their exempt purposes, how the organization was			
	resp	onsive to those supported organizations, and how the organization determined that these activities constituted			
	subs	tantially all of its activities.	2a		
		the activities described in (a) constitute activities that, but for the organization's involvement, one or more of organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for			
	the c	organization's position that its supported organization(s) would have engaged in these activities but for the	2L		
	orga	nization's involvement.	2b		
		nt of Supported Organizations. Answer (a) and (b) below.			
	<b>a</b> Did t each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in <b>Part VI.</b></i>	За		
		he organization exercise a substantial degree of direction over the policies, programs, and activities of each of its			
		orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

	edule A (FOITH 990 of 990-EZ) 2016 Tanenbaum Center for		13-36	95475 Page
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on N	ov. 20, 1970 (explain in st complete Sections A	Part VI). <b>See</b> through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
í	Average monthly value of securities	1a		
ŀ	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		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

BAA Schedule A (Form 990 or 990-EZ) 2018 9 Distributable amount for 2018 from Section C, line 6

10 Line 8 amount divided by line 9 amount

Sche	edule A (Form 990 or 990-EZ) 2018 Tanenbaum Center for	13-3695475	Page 7
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (co	ntinued)	
Sec	tion D - Distributions	Curren	nt Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions		

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013			
<b>b</b> From 2014			
<b>c</b> From 2015			
<b>d</b> From 2016			
<b>e</b> From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
<b>b</b> Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			
E LACESS HOITI ZOTO		Calaadala A (Fa	000 000 F7\

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Schedule A (Form 990 or 990-EZ) 2018

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 D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Tanenbaum Center for Interreligious Understanding 13-3695475 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate value of contributions to (during year). . . . . . Aggregate value of grants from (during 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 No impermissible private benefit?.... Yes **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... 2 c 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)?..... 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. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. **b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1..... (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 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.....

Part III Organizations Maintai	ining Collections	of Art, Histo	orical	Treasures, or	Other	Similar Ass	ets (c	<u>ontinu</u>	ied)				
3 Using the organization's acquisition items (check all that apply):	, accession, and other	records, check a	ny of tl	ne following that ar	e a signif	ficant use of its	collectio	n					
<b>a</b> Public exhibition		<b>d</b> Loan	or exc	hange programs									
<b>b</b> Scholarly research		e Other											
c Preservation for future generation	ations												
4 Provide a description of the organiz Part XIII.	Part XIII.												
to be sold to raise funds rather th	nan to be maintained	as part of the o	rganiz	ation's collection?	?		Yes		No				
Escrow and Custodial line 9, or reported an a	Arrangements. amount on Form	Complete if t 990, Part X,	the or line 2	rganization ans 21.	swered	'Yes' on Fo	rm 99	0, Par	t IV,				
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	tee, custodian or oth	er intermediary	for co	ntributions or othe	er assets	not included	Yes	Г	No				
<b>b</b> If 'Yes,' explain the arrangement								L					
2 11, 1 , 1 , 1 1 1 1 3		,	3				Amoun	t					
<b>c</b> Beginning balance					1 c								
<b>d</b> Additions during the year													
e Distributions during the year					1 e			-					
<b>f</b> Ending balance					1f								
2 a Did the organization include an a	mount on Form 990,	Part X, line 21,	for es	crow or custodial	account	liability?	Yes		No				
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. Check h	ere if the explar	nation	has been provide	d on Par	t XIII	<del></del> 		7				
								_	_				
Part V Endowment Funds. C	omplete if the org	ganization an	iswer	ed 'Yes' on Fo	rm 990	), Part IV, Iir	ne 10.						
	(a) Current year	(b) Prior year	r	(c) Two years back	(d)	Three years back	(e)	Four year:	s back				
<b>1 a</b> Beginning of year balance	2,891,586.	460,0	26.	470,16	4.	447,765.	1	,728,	341.				
<b>b</b> Contributions	-150,010.	2,420,0	00.										
<b>c</b> Net investment earnings, gains,													
and losses	-153,488.	-3	06.	-21,520	0.	42,540.		<b>-</b> 5,	219.				
<b>d</b> Grants or scholarships													
e Other expenditures for facilities	10 270	11 0		11 20	,	20 141	1	075	257				
and programs	-12,370.	-11,8	66.	11,382	۷.	-20,141.		<u>,</u> 275,	357.				
f Administrative expenses	0.660.450	0 001 5	0.0	460.00	_	470 164		4.47	7.65				
g End of year balance	2,660,458.	2,891,5		460,020		470,164.		44/,	765.				
2 Provide the estimated percentage	-	end balance (iiii	ie ig,	column (a)) neid	as:								
a Board designated or quasi-endowme		6											
<b>b</b> Permanent endowment	14.00 %	0.0											
c Temporarily restricted endowmen													
The percentages on lines 2a, 2b, ar	na 2c should equal 100	1%.											
3 a Are there endowment funds not in the	he possession of the o	rganization that a	are held	d and administered	for the		ſ						
organization by:							2 (2)	Yes	No				
(i) unrelated organizations							3a(i)		X				
(ii) related organizations							3a(ii)		X				
<b>b</b> If 'Yes' on line 3a(ii), are the rela	-	•					. 3b						
4 Describe in Part XIII the intended		ation's endowme	ent fun	ids. See Par	t XII.	L							
Part VI Land, Buildings, and I		n., . –											
Complete if the organi	zation answered	'Yes' on Forr	m 990	), Part IV, line	11a. S	See Form 99	0, Par	t X, lii	ne 10.				
Description of property		or other basis	(b)	Cost or other		ccumulated	(d)	Book va	alue				
1 - 1	,	vestment)	b	pasis (other)	dep	reciation							
<b>1 a</b> Land													
<b>b</b> Buildings													
c Leasehold improvements				46,419.		45,714.			705.				
<b>d</b> Equipment				170,392.		166,368.			,024.				
<b>e</b> Other				77,585.		73,385.			<u>,200.</u>				
Total. Add lines 1a through 1e. (Colum	n (d) must equal For	m 990, Part X, o	columi	n (B), line 10c.)				8	<u>,929.</u>				

BAA Schedule D (Form 990) 2018

Part VII Investments — Other Securities.	l'Vec' on Form 90	N/A 90, Part IV, line 11b. See Form 990, Part X, line	12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	12
(1) Financial derivatives	(2) 20011 141140	(b) motion of variation cook of one of your market value	
(2) Closely-held equity interests.			
(3) Other			
(A) (B) (C) (D) (E)			
(C)			
(D)			
(E)			
<u>(F)</u>			
(G)			
(H)			
			_
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶  Part VIII Investments — Program Related.	•	NT / 7	
Complete if the organization answered	d 'Yes' on Form 99	N/A 90, Part IV, line 11c. See Form 990, Part X, line	13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market valu	ie
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) •			
Part IX Other Assets.	N/Z	<u> I</u> А	
Complete if the organization answered	l 'Yes' on Form 99	90, Part IV, line 11d. See Form 990, Part X, line	15
	scription	(b) Book value	
<u>(1)</u> (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, column (	R) line 15 )	<b>&gt;</b>	
Part X Other Liabilities.	<i>b)</i> IIII <i>e</i> 13.)		
Complete if the organization answered 'Yes' on F	orm 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
(a) Description of liability	<b>(b)</b> Book value		
(1) Federal income taxes			
(2) Deferred rent	19,5	90.	
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)	_		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	. ▶ 19,5	90.	

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	•
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	1,200,163.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments. 2a -301, 201.		1
<b>b</b> Donated services and use of facilities		1
c Recoveries of prior year grants		1
d Other (Describe in Part XIII.) 2d		1
e Add lines 2a through 2d.	2 e	-285,462.
3 Subtract line 2e from line 1.	3	1,485,625.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1
a Investment expenses not included on Form 990, Part VIII, line 7b		1
b Other (Describe in Part XIII.) 4b		1
c Add lines 4a and 4b	4 c	4,608.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	1,490,233.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	rn.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	1,833,153.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		1
b Prior year adjustments		1
c Other losses. 2c		1
d Other (Describe in Part XIII.) 2d		1
e Add lines 2a through 2d.	2 e	15,739.
3 Subtract line 2e from line 1.	3	1,817,414.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		1
a Investment expenses not included on Form 990, Part VIII, line 7b		1
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.  5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4 c	4,608. 1 822 022
D TOTAL EXDEUSES. AND TIMES 5 AND 4C. LITTIS MUST COURT FORM 990. PART I, TIME 18.1		1 877 1177

Part XIII Supplemental Information.

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

#### Part V, Line 4 - 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

The Organization does not believe its financial statements include any material, uncertain tax positions. Tax filings for periods ending December 31, 2015 and later are subject to examination by applicable taxing authorities.

BAA Schedule D (Form 990) 2018

#### 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

2018

Open to Public Inspection

Name of the organization

Tanenbaum Center for

<u>Interreligious Understanding</u>

Employer identification number

13-3695475

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

the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ... X Yes

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,

2 For grantmakers. Describe in United States.	n Part V the organia	zation's procedure:	s for monitoring the use of its gra	ants and other assistance o	outside the
3 Activities per Region. (The	following Part I, I	line 3 table can b	e duplicated if additional space	e is needed.)	
(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) Bosnia	1	1	Drogram Agtivities	Peacemaker/Confl ict resolution	21 102
(i) bosiiia	1	1	Program Activities	Peacemaker/Confl	31,103.
(2) Philippines	1	2	Program Activities	ict resolution	5,751.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3 a Subtotal	2	3			36,854.
<b>b</b> Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	2	3			36,854.

13-3695475

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

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

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which	
	the grantee or counsel has provided a section 501(c)(3) equivalency letter	<b>&gt;</b>
3	Enter total number of other organizations or entities	<u> </u>

BAA Schedule F (Form 990) 2018

Schedule F (Form 990) 2018	Tanenbaum Center for	13-3695475
Part III Grants and Oth Part IV, line 16.	er Assistance to Individuals Outside the United States Part III can be duplicated if additional space is needed	. Complete if the organization answered 'Yes' on Form 990,

(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	<b>(d)</b> Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
(18) BAA						Schedule F	(Form

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

 BAA
 TEEA3505L
 11/02/18
 Schedule F (Form 990) 2018

#### 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.

BAA TEEA3504L 11/02/18 Schedule F (Form 990) 2018

#### **SCHEDULE G** (Form 990 or 990-EZ)

### 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 instructions and the latest information.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Inspection Name of the organization Tanenbaum Center for Employer identification number 13-3695475 Interreligious Understanding **Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants а Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events X In-person solicitations **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (i) Name and address of individual (iii) Did fundraiser (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) Yes No Inez Weinstein Sp. Events 215 Park Avenue South Χ 574,879 67,860 507,019. New York NY 10003 Fundraiser 2 3 5 6 7 9 10 Total. 574,879. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2018 Tanenbaum Center for 13-3695475 Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (d) Total events (a) Event #1 **(b)** Event #2 (c) Other events (add column (a) Special Event None through column (c) (event type) (event type) (total number) REVENUE **1** Gross receipts..... 574,879 574,879. 2 Less: Contributions..... 474,048 474,048. **3** Gross income (line 1 minus line 2)..... 100,831 100,831. Cash prizes..... 6 Rent/facility costs..... 7 Food and beverages ..... Other direct expenses..... 100,831. 100,831. 10 Direct expense summary. Add lines 4 through 9 in column (d)..... 100,831. Net income summary. Subtract line 10 from line 3, column (d)..... Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add column (a) through column (c)) REVENUE (a) Bingo bingo/progressive bingo (c) Other gaming Gross revenue..... **2** Cash prizes..... D X P E N C T S Rent/facility costs..... **5** Other direct expenses..... Yes Yes Yes No No No 7 Direct expense summary. Add lines 2 through 5 in column (d)..... 8 Net gaming income summary. Subtract line 7 from line 1, column (d)..... **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states?..... **b** If 'No,' explain:

**b** If 'Yes,' explain:

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?.....

Sche	edule G (Form 990 or 990-EZ) 2018 Tanenbaum Center for 1	3-3695	475	Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No
12	Indicate the percentage of gaming activity conducted in:	1 1		
		120		٥
	a The organization's facility.			%
	a An outside facility.	<u> </u>		6
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	<b>;</b> :		
	Name •			
	Address ►			
I	a 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 gaming revenue retained by the third party   If 'Yes,' enter name and address of the third party:			No
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
ä	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
ı	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the		_
	organization's own exempt activities during the tax year ► \$			
Pai	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	lumns ( ıy additi	iii) and ( onal	v);
	information. See instructions.			

#### 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.

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

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

Tanenbaum combats religious prejudice and hatred in everyday life through programs in workplaces, health care, education, and by working with religious peacemakers in armed conflicts.

Tanenbaum's Workplace program works directly with the world's leading multi-national and national companies to address religious diversity and adopt 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 35 Corporate Members (employing over 4 million people), Tanenbaum helped change working environments in nearly 100 countries. In 2018, this growing program welcomed four new Corporate Members (Google, Express Scripts, Freddie Mac, Michelin).

Total Workplace program expenses: \$316,214

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, Tanenbaum trained approximately 1000 healthcare professionals and students in 2018. These health professionals treated hundreds of thousands of patients in the New York City area. In 2018, Tanenbaum also completed a new curriculum for training nurses, titled "Fostering Religio-Cultural Competence in Nursing" which was created in partnership with Columbia University School of Nursing. The Health Care program then hosted a Symposium event

Name of the organization Tanenbaum Center for Interreligious Understanding Employer identification number

13-3695475

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

schools across the country.

Total Health Care program Expenses: \$275,913

In 2018, Tanenbaum completed a project to make its standards-referenced elementary school curriculum, Religions in My Neighborhood, a free-resource for administrators and educators across the country. In total, nearly 450 educators who reach 30,000 students annually received a free copy of Religions in My Neighborhood, in both print and digital copies. The curriculum remains available for free download on Tanenbaum's website. Tanenbaum is also preparing additional curricula to make them more readily available and user friendly for teachers. Additionally, Tanenbaum's public education initiative, Combating Extremism, reached 1,000s of people with its anti-bias fact sheets, resources to counter fake news and stereotyping and other materials for use in public and private conversations.

Total Education program expenses: \$119,784

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 2018, our Peacemakers in Action Network worked to plan a collaborative peacebuilding intervention in Bosnia, and conducted an intervention in the Philippines on the theme of "Theology and Practice of Just Peace and Pluralism." In addition, Tanenbaum worked with diplomats, policy makers, practitioners, academics

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

and students on the value of working with religious peacebuilders in armed conflicts; Tanenbaum's activities included presentations and panels at: the Parliament of World Religions, the Alliance for Peacebuilding annual conference, the U.S. Department of State, the U.N. Faith Advisory Council, the U.N. Strategic Learning Exchange and a side event at the United Nations General Assembly.

Total Peacebuilding and Conflict Resolution program expenses: \$340,107

Total Other programs Expenses: \$237,790

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

Management reviews a draft of the form 990 with the audit/finance committee and provides edits to the tax preparer. Thereafter, the form 990 is sent to the full Board of Directors prior to be being filled 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 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 proposed salary and benefit package is considered and 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

Name of the organization Tanenbaum Center for	Employer identification number
Internaliaious Understanding	13-3695475

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

the existing salary falls within these ranges. After a deliberation of this matter, the proposed salary and benefit package is considered and 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) Program	(C) Management	(D) Fund-
	_	Total	<u>Services</u>	& General	<u>raising</u>
Professional Fees	Total \$	203,159. 203,159.	84,928. \$ 84,928.	90,429. \$ 90,429.	27,802. \$ 27,802.