

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

OMB No. 1545-0687

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

A <input type="checkbox"/> Check box if address changed		Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.	D Employer identification number (Employees' trust, see instructions.) 51-0172429
B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)			Number, street, and room or suite no. If a P.O. box, see instructions. 130 EAST 59TH STREET	E Unrelated business activity code (See instructions.) 211110
			City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10022-1302	
C Book value of all assets at end of year 1,458,215,000.			F Group exemption number (See instructions.)	G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust

H Enter the number of the organization's unrelated trades or businesses. **4** Describe the only (or first) unrelated trade or business here **SEE STATEMENT 1**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☐ Yes ☒ No
 If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **JOANN LOCASCIO, CONTROLLER**

Telephone number **212-836-1730**

Part I Unrelated Trade or Business Income				(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales					
b	Less returns and allowances		c Balance	1c		
2	Cost of goods sold (Schedule A, line 7)			2		
3	Gross profit. Subtract line 2 from line 1c			3		
4a	Capital gain net income (attach Schedule D)			4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			4b		
c	Capital loss deduction for trusts			4c		
5	Income (loss) from a partnership or an S corporation (attach statement)			5		
6	Rent income (Schedule C)			6		
7	Unrelated debt-financed income (Schedule E)			7		
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)			8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			9		
10	Exploited exempt activity income (Schedule I)			10		
11	Advertising income (Schedule J)			11		
12	Other income (See instructions; attach schedule) STATEMENT 2			12	2,482,713.	2,482,713.
13	Total. Combine lines 3 through 12			13	2,482,713.	2,482,713.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	223,444.
20	Charitable contributions (See instructions for limitation rules)	20	225,927.
21	Depreciation (attach Form 4562)	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	
29	Total deductions. Add lines 14 through 28	29	449,371.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	2,033,342.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	31	
32	Unrelated business taxable income. Subtract line 31 from line 30	32	2,033,342.

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

► **File a separate application for each return.**
 ► **Go to www.irs.gov/Form8868 for the latest information.**

OMB No. 1545-1709

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number, see instructions
Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. UNITED JEWISH APPEAL - FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.	Employer identification number (EIN) or 51-0172429
	Number, street, and room or suite no. If a P.O. box, see instructions. 130 EAST 59TH STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10022	

Enter the Return Code for the return that this application is for (file a separate application for each return) **07**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JOANN LOCASCIO
 • The books are in the care of ► 130 EAST 59TH STREET NEW YORK NY 10022

Telephone No. ► 212 836-1730

Fax No. ► 212 836-1353

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 05/15, 20 20, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year 20 ____ or

► ☒ tax year beginning 07/01, 20 18, and ending 06/30, 20 19.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$ 607,541.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 1,326,416.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

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

Part III Total Unrelated Business Taxable Income

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	<213,851.>
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	0.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	<213,851.>
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	<213,851.>

Part IV Tax Computation

39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input checked="" type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	0.
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	970.
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	970.

Part V Tax and Payments

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	970.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	970.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other <input type="checkbox"/> Total	50g	
51	Total payments. Add lines 50a through 50g	51	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	970.
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	55	

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

	Yes	No
56 At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here <input type="checkbox"/> NOT APPLICABLE		X
57 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58 Enter the amount of tax-exempt interest received or accrued during the tax year \$ 2,839.		

Sign Here

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

Signature of officer *David M. Highfill* Date *12/14/20* Title **CONTROLLER**

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
DAVID M. HIGHFILL	<i>David M. Highfill</i>	7/13/2020	<input type="checkbox"/>	P01517891
Firm's name <input checked="" type="checkbox"/> KPMG LLP	Firm's EIN <input checked="" type="checkbox"/> 13-5565207			
Firm's address <input checked="" type="checkbox"/> 345 PARK AVENUE NEW YORK, NY 10154	Phone no. 212-758-9700			

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ► N/A

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6		
3 Cost of labor	3		from line 5. Enter here and in Part I,		
4a Additional section 263A costs			line 2	7	
(attach schedule)	4a		8 Do the rules of section 263A (with respect to		
b Other costs (attach schedule)	4b		property produced or acquired for resale) apply to		
5 Total. Add lines 1 through 4b	5		the organization?		
				Yes	No

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

N/A

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)**(b) Total deductions.**

Enter here and on page 1, Part I, line 6, column (B) ...

0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

N/A

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)			
(2)			
(3)			
(4)			
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)
(1)		%	
(2)		%	
(3)		%	
(4)		%	
		Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
		0.	0.
Totals			
Total dividends-received deductions included in column 8			0.

Form 990-T (2018)

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

N/A

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

N/A

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

N/A

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.
Totals		0.	0.			0.

Schedule J - Advertising Income (see instructions)

N/A

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

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

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

N/A

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

Form 990-T (2018)

SCHEDULE M
(Form 990-T)

Unrelated Business Taxable Income for
Unrelated Trade or Business

ENTITY 1

OMB No. 1545-0687

2018

Department of the Treasury
Internal Revenue Service (99)

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019.

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

Name of the organization UNITED JEWISH APPEAL-FEDERATION OF
JEWISH PHILANTHROPIES OF NEW YORK, INC.

Employer identification number
51-0172429

Unrelated business activity code (see instructions) ▶ 211110

Describe the unrelated trade or business ▶ WORKING INTEREST IN OIL AND GAS PROPERTIES

Part I Unrelated Trade or Business Income			(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales					
b Less returns and allowances		c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)			2		
3 Gross profit. Subtract line 2 from line 1c			3		
4 a Capital gain net income (attach Schedule D)			4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			4b		
c Capital loss deduction for trusts			4c		
5 Income (loss) from a partnership or an S corporation (attach statement)			5		
6 Rent income (Schedule C)			6		
7 Unrelated debt-financed income (Schedule E)			7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)			8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			9		
10 Exploited exempt activity income (Schedule I)			10		
11 Advertising income (Schedule J)			11		
12 Other income (See instructions; attach schedule) STMT 3			12 560,958.		560,958.
13 Total. Combine lines 3 through 12			13 560,958.		560,958.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)		14	
15 Salaries and wages		15	
16 Repairs and maintenance		16	
17 Bad debts		17	
18 Interest (attach schedule) (see instructions)		18	
19 Taxes and licenses		19	
20 Charitable contributions (See instructions for limitation rules)		20	
21 Depreciation (attach Form 4562)	21 2,597.		
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b 2,597.	
23 Depletion		23 8,254.	
24 Contributions to deferred compensation plans		24	
25 Employee benefit programs		25	
26 Excess exempt expenses (Schedule I)		26	
27 Excess readership costs (Schedule J)		27	
28 Other deductions (attach schedule) SEE STATEMENT 4		28 636,392.	
29 Total deductions. Add lines 14 through 28		29 647,243.	
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30 -86,285.	
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) SEE STATEMENT 8		31	
32 Unrelated business taxable income. Subtract line 31 from line 30		32 -86,285.	

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

SCHEDULE M
(Form 990-T)

Unrelated Business Taxable Income for
Unrelated Trade or Business

ENTITY 2

OMB No. 1545-0687

2018

Department of the Treasury
Internal Revenue Service (99)

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019.

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501(c)(3) Organizations Only

Name of the organization **UNITED JEWISH APPEAL-FEDERATION OF
JEWISH PHILANTHROPIES OF NEW YORK, INC.**

Employer identification number
51-0172429

Unrelated business activity code (see instructions) ▶ **525990**

Describe the unrelated trade or business ▶ **INVESTMENTS IN LIMITED PARTNERSHIPS**

Part I Unrelated Trade or Business Income			(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales					
b Less returns and allowances		c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)			2		
3 Gross profit. Subtract line 2 from line 1c			3		
4 a Capital gain net income (attach Schedule D)			4a 16,926.		16,926.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			4b -146,540.		-146,540.
c Capital loss deduction for trusts			4c		
5 Income (loss) from a partnership or an S corporation (attach statement) <small>SEE STATEMENT 6</small>			5 -1,501,863.		-1,501,863.
6 Rent income (Schedule C)			6		
7 Unrelated debt-financed income (Schedule E)			7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)			8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			9		
10 Exploited exempt activity income (Schedule I)			10		
11 Advertising income (Schedule J)			11		
12 Other income (See instructions; attach schedule)			12		
13 Total. Combine lines 3 through 12			13 -1,631,477.		-1,631,477.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)		14	
15 Salaries and wages		15	249,841.
16 Repairs and maintenance		16	
17 Bad debts		17	
18 Interest (attach schedule) (see instructions)		18	
19 Taxes and licenses		19	55,037.
20 Charitable contributions (See instructions for limitation rules)		20	0.
21 Depreciation (attach Form 4562)	21		
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b	
23 Depletion		23	
24 Contributions to deferred compensation plans		24	
25 Employee benefit programs		25	49,437.
26 Excess exempt expenses (Schedule I)		26	
27 Excess readership costs (Schedule J)		27	
28 Other deductions (attach schedule) <small>SEE STATEMENT 5</small>		28	189,170.
29 Total deductions. Add lines 14 through 28		29	543,485.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30	-2,174,962.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) <small>SEE STATEMENT 8</small>		31	
32 Unrelated business taxable income. Subtract line 31 from line 30		32	-2,174,962.

LHA **For Paperwork Reduction Act Notice, see instructions.**

Schedule M (Form 990-T) 2018

SCHEDULE M
(Form 990-T)

Unrelated Business Taxable Income for
Unrelated Trade or Business

ENTITY 3

OMB No. 1545-0687

2018

Department of the Treasury
Internal Revenue Service (99)

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019.

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501(c)(3) Organizations Only

Name of the organization **UNITED JEWISH APPEAL-FEDERATION OF
JEWISH PHILANTHROPIES OF NEW YORK, INC.**

Employer identification number
51-0172429

Unrelated business activity code (see instructions) ▶ **525990**

Describe the unrelated trade or business ▶ **INVESTMENT IN 225 FOURTH HOLDING COMPANY**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances				
c Balance ▶	1c			
2 Cost of goods sold (Schedule A, line 7)	2			
3 Gross profit. Subtract line 2 from line 1c	3			
4 a Capital gain net income (attach Schedule D)	4a			
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c Capital loss deduction for trusts	4c			
5 Income (loss) from a partnership or an S corporation (attach statement)	5	-2,840.		-2,840.
6 Rent income (Schedule C)	6			
7 Unrelated debt-financed income (Schedule E)	7			
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8			
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10 Exploited exempt activity income (Schedule I)	10			
11 Advertising income (Schedule J)	11			
12 Other income (See instructions; attach schedule)	12			
13 Total. Combine lines 3 through 12	13	-2,840.		-2,840.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule)	28	
29 Total deductions. Add lines 14 through 28	29	0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-2,840.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) SEE STATEMENT 8	31	
32 Unrelated business taxable income. Subtract line 31 from line 30	32	-2,840.

LHA **For Paperwork Reduction Act Notice, see instructions.**

Schedule M (Form 990-T) 2018

**SCHEDULE D
(Form 1120)****Capital Gains and Losses**

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC,
1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.▶ Go to www.irs.gov/Form1120 for instructions and the latest information.**2018**

Name

UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.

Employer identification number

51-0172429

Part I Short-Term Capital Gains and Losses (See instructions.)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				56,174
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37			4	
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computation)			6 ()	
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h			7	56,174

Part II Long-Term Capital Gains and Losses (See instructions.)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				-39,248
11 Enter gain from Form 4797, line 7 or 9			11	0
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824			13	
14 Capital gain distributions (see instructions)			14	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h			15	-39,248

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16	16,926
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17	
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns.	18	16,926

Note: If losses exceed gains, see **Capital losses** in the instructions.

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2018

UNITED JEWISH APPEAL-FEDERATION OF
JEWISH PHILANTHROPIES OF NEW YORK, INC.

Social security number or taxpayer identification number	51-0172429
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Part I **Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

X (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.) SEE STATEMENT 7	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	PASSTHROUGH FROM PARTNERSHIP							56,174
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►								56,174

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8949** (2018)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

UNITED JEWISH APPEAL - FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.

51-0172429

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II **Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ **(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ **(E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☒ **(F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	SEE STATEMENT 7							
	PASSTHROUGH FROM PARTNERSHIP							- 39 , 248
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								- 39 , 248

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

2018Attachment
Sequence No. **27**

Name(s) shown on return

UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.

Identifying number

51-0172429

1 Enter the gross proceeds from sales or exchanges reported to you for 2018 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions**1****Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year** (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	SEE STATEMENT 7						
	PASSTHROUGH FROM PARTNERSHIP						-146,540
3	Gain, if any, from Form 4684, line 39						3
4	Section 1231 gain from installment sales from Form 6252, line 26 or 37						4
5	Section 1231 gain or (loss) from like-kind exchanges from Form 8824						5
6	Gain, if any, from line 32, from other than casualty or theft						6
7	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows						7 -146,540
	Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.						
	Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.						
8	Nonrecaptured net section 1231 losses from prior years. See instructions						8
9	Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions						9

Part II Ordinary Gains and Losses (see instructions)

10	Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):						
11	Loss, if any, from line 7						11 (146,540)
12	Gain, if any, from line 7 or amount from line 8, if applicable.						12
13	Gain, if any, from line 31						13
14	Net gain or (loss) from Form 4684, lines 31 and 38a						14
15	Ordinary gain from installment sales from Form 6252, line 25 or 36						15
16	Ordinary gain or (loss) from like-kind exchanges from Form 8824						16
17	Combine lines 10 through 16						17 -146,540
18	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.						
a	If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions						18a
b	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), line 14						18b

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2018)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255
(see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A		
B		
C		
D		

These columns relate to the properties on lines 19A through 19D. ►	Property A	Property B	Property C	Property D
20 Gross sales price (Note: See line 1 before completing.) 20				
21 Cost or other basis plus expense of sale 21				
22 Depreciation (or depletion) allowed or allowable . . . 22				
23 Adjusted basis. Subtract line 22 from line 21 23				
24 Total gain. Subtract line 23 from line 20. 24				
25 If section 1245 property:				
a Depreciation allowed or allowable from line 22 . . . 25a				
b Enter the smaller of line 24 or 25a. 25b				
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.				
a Additional depreciation after 1975. See instructions . 26a				
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions 26b				
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e . 26c				
d Additional depreciation after 1969 and before 1976 . 26d				
e Enter the smaller of line 26c or 26d 26e				
f Section 291 amount (corporations only) 26f				
g Add lines 26b, 26e, and 26f 26g				
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.				
a Soil, water, and land clearing expenses 27a				
b Line 27a multiplied by applicable percentage. See instructions . 27b				
c Enter the smaller of line 24 or 27b 27c				
28 If section 1254 property:				
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions . . 28a				
b Enter the smaller of line 24 or 28a 28b				
29 If section 1255 property:				
a Applicable percentage of payments excluded from income under section 126. See instructions 29a				
b Enter the smaller of line 24 or 29a. See instructions . 29b				

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24 30	
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13 31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6 32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less
(see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years 33		
34 Recomputed depreciation. See instructions 34		
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report 35		

Form **8827**Department of the Treasury
Internal Revenue Service**Credit for Prior Year Minimum Tax - Corporations**

OMB No. 1545-0123

2018

▶ Attach to the corporation's tax return.

▶ Go to www.irs.gov/Form8827 for the latest information.Name **UNITED JEWISH APPEAL-FEDERATION OF**

Employer identification number

JEWISH PHILANTHROPIES OF NEW YORK, INC.**51-0172429**

1 Alternative minimum tax (AMT) for 2017. Enter the amount from line 14 of the 2017 Form 4626	1	
2 Minimum tax credit carryforward from 2017. Enter the amount from line 9 of the 2017 Form 8827	2	11,242.
3 Enter any 2017 unallowed qualified electric vehicle credit (see instructions)	3	
4 Add lines 1, 2, and 3	4	11,242.
5 Enter the corporation's 2018 regular income tax liability minus allowable tax credits (see instructions)	5	426,792.
6 Enter the refundable minimum tax credit (see instructions)	6	0.
7 Add lines 5 and 6	7	426,792.
8a Enter the smaller of line 4 or line 7. If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions	8a	11,242.
b Current year minimum tax credit. Enter the smaller of line 4 or line 5 here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions. If you made an entry on line 6, go to line 8c. Otherwise, skip line 8c	8b	11,242.
c Subtract line 8b from line 8a. This is the current year refundable minimum tax credit. Include this amount on Form 1120, Schedule J, Part II, line 20c (or the applicable line of your return)	8c	
9 Minimum tax credit carryforward to 2019. Subtract line 8a from line 4. Keep a record of this amount to carry forward and use in future years	9	

Form **965-B**(Rev. January 2020)
Department of the Treasury
Internal Revenue Service**Corporate and Real Estate Investment Trust (REIT) Report of Net 965
Tax Liability and Electing REIT Report of 965 Amounts**

OMB No. 1545-0123

► Go to www.irs.gov/Form965B for instructions and the latest information.Check this box if this is an amended report ☐

Name of taxpayer or REIT

UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.

Identifying number

51-0172429

Taxable year of reporting

2018

REITs Electing To Account for Section 965 Amounts Over Time Must Fill Out Part III.

Part I Report of Net 965 Tax Liability and Election To Pay in Installments

	(a) Year of Section 965(a) Inclusion or Liability Assumed (see instructions)	(b) Taxpayer's Net Tax Liability With all 965 Amounts (see instructions)	(c) Taxpayer's Net Tax Liability Without 965 Amounts (see instructions)	(d) Net 965 Tax Liability (subtract column (c) from column (b))	(e) Installment Election Made		(f) Net 965 Tax Liability To Be Paid in Full in Year 1 (if column (e) is "No," enter amount from column (d))	(g) Net 965 Tax Liability To Be Paid in Installments (if column (e) is "Yes," enter amount from column (d) and see instructions)	(h) Net 965 Tax Liability Transferred (Out), Transferred In, or Subsequent Adjustments, if any (see instructions)	(i) Tax Identification Number of Buyer/ Transferee or Seller/ Transferor
					Yes	No				
1	2017	641,151	222,273	418,878	✓		0	418,878	0	N/A
2	2018	0	0	0		✓	0	0	0	N/A
3	2019									
4										
5										
6										
7										
8										

Part II Record of Amount of Net 965 Tax Liability Paid by the Taxpayer (see instructions)

	(a) Year of Section 965(a) Inclusion or Liability Assumed (see instructions)	(b) Paid for Year 1	(c) Paid for Year 2	(d) Paid for Year 3	(e) Paid for Year 4	(f) Paid for Year 5
1	2017	33,510	33,510			
2	2018	0	0			
3	2019					
4						
5						
6						
7						
8						

	(g) Paid for Year 6	(h) Paid for Year 7	(i) Paid for Year 8	(j) Net 965 Tax Liability Remaining Unpaid (see instructions)	(k) Net 965 Tax Liability Paid for the Reporting Year
1				351,858	33,510
2				0	0
3					
4					
5					
6					
7					
8					

Totals				351,858	33,510
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For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 71278S

Form **965-B** (Rev. 1-2020)

Part III

Electing REIT Report of Section 965 Amounts Accounted for Over Time (see instructions)

	(a) Tax Year of Section 965(a) Inclusion and Section 965(c) Deduction	(b) Amount Elected To Be Accounted for Over Time	(c) Portion Accounted for in Year 1	(d) Portion Accounted for in Year 2	(e) Portion Accounted for in Year 3	(f) Portion Accounted for in Year 4
1a	2017 Section 965(a) Inclusion					
1b	2017 Section 965(c) Deduction					
2a	2018 Section 965(a) Inclusion					
2b	2018 Section 965(c) Deduction					
3a	2019 Section 965(a) Inclusion					
3b	2019 Section 965(c) Deduction					
	(g) Portion Accounted for in Year 5	(h) Portion Accounted for in Year 6	(i) Portion Accounted for in Year 7	(j) Portion Accounted for in Year 8	(k) Amount Remaining To Be Accounted for	(l) Portion Accounted for in This Reporting Year
1a						
1b						
2a						
2b						
3a						
3b						
Totals ▶					0	0

If more lines are needed for any Parts on this form, attach additional sheets.

**Limitation on Business Interest Expense
Under Section 163(j)**

▶ **Attach to your tax return.**

OMB No. 1545-0123

▶ **Go to www.irs.gov/Form8990 for instructions and the latest information.**

Taxpayer name(s) shown on tax return

Identification number

UNITED JEWISH APPEAL - FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.

51-0172429

Part I Computation of Allowable Business Interest Expense

Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j).

Section I - Business Interest Expense

1	Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1	17,750.00	
2	Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership).	2		
3	Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3		
4	Floor plan financing interest expense. See instructions	4		
5	Total business interest expense. Add lines 1 through 4. ▶	5		17,750.00

Section II - Adjusted Taxable Income

Taxable Income

6	Taxable income. See instructions	6		-230,743.00
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Additions (adjustments to be made if amounts are taken into account on line 6)

7	Any item of loss or deduction which is not properly allocable to a trade or business of the taxpayer. See instructions	7		
8	Any business interest expense not from a pass-through entity. See instructions	8	17,750.00	
9	Amount of any net operating loss deduction under section 172	9		
10	Amount of any qualified business income deduction allowed under section 199A	10		
11	Deduction for depreciation, amortization, or depletion attributable to a trade or business. See instructions	11		
12	Amount of any loss or deduction items from a pass-through entity. See instructions	12	1,550,182.00	
13	Other additions. See instructions	13	39,584.00	
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14	5,783,926.00	
15	Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c)).	15		
16	Total. Add lines 7 through 15 ▶	16		7,391,442.00

Reductions (adjustments to be made if amounts are taken into account on line 6)

17	Any item of income or gain which is not properly allocable to a trade or business of the taxpayer. See instructions	17	()	
18	Any business interest income not from a pass-through entity. See instructions	18	(16,970.00)	
19	Amount of any income or gain items from a pass-through entity. See instructions	19	(-62,842.00)	
20	Other reductions. See instructions	20	(14,810.00)	
21	Total. Combine lines 17 through 20 ▶	21	(-31,062.00)	
22	Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-.) ▶	22		7,191,761.00

Section III - Business Interest Income

23	Current year business interest income. See instructions	23	16,970.00	
24	Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g); and Schedule B, line 46, column (d)) .	24	614,151.00	
25	Total. Add lines 23 and 24 ▶	25		631,121.00

For Paperwork Reduction Act Notice, see the instructions.

Form **8990** (Rev. 12-2019)

Section IV - Section 163(j) Limitation Calculations**Limitation on Business Interest Expense**

26	Multiply adjusted taxable income (line 22) by 30% (0.30). See instructions	26	2,157,528.00	
27	Business interest income (line 25)	27	631,121.00	
28	Floor plan financing interest expense (line 4)	28		
29	Total. Add lines 26, 27, and 28	29		2,788,649.00

Allowable Business Interest Expense

30	Total current year business interest expense deduction. See instructions.	30		17,750.00
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Carryforward

31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.) . . .	31		NONE
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Part II Partnership Pass-Through Items

Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

Excess Business Interest Expense

32	Excess business interest expense. Enter amount from line 31	32		
-----------	--	-----------	--	--

Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)

33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.)	33		
34	Subtract line 33 from line 26. (If zero or less, enter -0-.)	34		
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.)	35		
36	Excess Taxable Income. Multiply line 35 by line 22	36		

Excess Business Interest Income

37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.).	37		
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Part III S Corporation Pass-Through Items

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.

Excess Taxable Income

38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.)	38		
39	Subtract line 38 from line 26. (If zero or less, enter -0-.).	39		
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.)	40		
41	Excess Taxable Income. Multiply line 40 by line 22	41		

Excess Business Interest Income

42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.).	42		
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SCHEDULE A **Summary of Partner's Section 163(j) Excess Items**

Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I.

(a) Name of partnership	(b) EIN	Excess Business Interest Expense			(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (see instructions)	(i) Current year excess business interest expense carryforward ((e) minus (h))
		(c) Current year	(d) Prior year carryforward	(e) Total ((c) plus (d))				
43 SEE ATTACHMENT 1								
44 Total ▶								

SCHEDULE B **Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income**

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

(a) Name of S corporation	(b) EIN	(c) Current year excess taxable income	(d) Current year excess business interest income
45			
46 Total ▶			

Form 8990

SCHEDULE A		Summary of Partner's Section 163(j) Excess Items						
Any taxpayer that owns an interest in a partnership subject to §163(j) should complete Schedule A <u>before</u> completing Part I.								
(a) Name of partnership	(b) EIN	Excess Business Interest Expense			(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (lesser of (e) or (f) plus (g))	(i) Current year excess business interest expense carryover ((e) minus (h))
		(c) Current year	(d) Prior year carryover	(e) Total ((c) plus (d))				
43 225 FOURTH	13-3935925			-			-	-
APOLLO RE INVESTMENT FUND III	13-3969710			-			-	-
B. BROS REALTY	20-0860290			-	2,234,082		-	-
BAUPOST VALUE, LP-I	04-3506440			-	2,443,612	275,577	-	-
CCP II AIV II, L.P.	30-0715450			-	6,023		-	-
CCP II FALCON AIV - B, LP	82-1988031			-				
CCP II PWD-TFK AIV, LP	90-0857562			-	1,078			
CCP III AIV II, LP	37-1789865			-				
CENTERBRIDGE CAPITAL AIV II, LP	20-5672564			-		3,101		
CLEARLAKE CAPITAL PARTNERS V	82-3100733			-				
COLUMBIA CAPITAL EQUITY PARTNERS IV (QP)	41-2179167			-				
CP FALCON AIV, LP	36-4767158			-	3,946			
FOUNDRY GROUP NEXT, LP	81-2277556			-			-	-
HIGHFIELDS CAPITAL IV, L.P.	11-3841276			-	672,794	316,736	-	-
KKR ENERGY INCOME AND GROWTH	68-0683554			-	33,015			
LS POWER EQUITY II, LP	20-5721263	3,762		3,762				
LS POWER EQUITY LP	20-2455155			-				
PINE BROOK CAPITAL PARTNERS II, LP	37-1699332			-	152,105	18,668		
PINE BROOK CAPITAL PARTNERS II CAYMAN AV HM-1 LP	98-1427453			-				
REALTY FINANCIAL PARTNERS VI, LP	20-1626146			-				
ROARK CAPITAL PARTNERS IV AIV I-U, L.P.	81-2828481			-	237,271	69		
				-				
44 Total ▶					5,783,926	614,151	-	

Form 8990

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT 1
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UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.
("UJA") IS RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS A TAX-EXEMPT
PUBLICLY SUPPORTED ORGANIZATION AS DEFINED IN SECTION 501(C)(3) AND
QUALIFIES AS A PUBLIC CHARITY UNDER SECTION 509(A)(1)/170(B)(1)(A)(VI).
UJA IS SUBJECT TO UNRELATED BUSINESS INCOME TAX PURSUANT TO IRC SECTION 511.
UJA'S UBTI AS A RESULT OF SUBPART F IS REPORTED ON PART 1, LINE 12.
ALL AMOUNTS SUBJECT TO TAXATION ARE REPORTED ON FORM 990-T.

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER INCOME	STATEMENT 2
DESCRIPTION		AMOUNT
SUBPART F INCLUSION		2,482,713.
TOTAL TO FORM 990-T, PAGE 1, LINE 12		2,482,713.

FORM 990-T (M)

OTHER INCOME

STATEMENT 3

DESCRIPTION

AMOUNT

WORKING INTEREST IN OIL AND GAS PROPERTIES

560,958.

TOTAL TO SCHEDULE M, PART I, LINE 12

560,958.

FORM 990-T (M)

OTHER DEDUCTIONS

STATEMENT 4

DESCRIPTION

AMOUNT

PRODUCTION EXPENSE

466,151.

PROFESSIONAL SERVICES

80,000.

CONSULTANTS

59,112.

INSURANCE

31,129.

TOTAL TO SCHEDULE M, PART II, LINE 28

636,392.

FORM 990-T (M)

OTHER DEDUCTIONS

STATEMENT 5

DESCRIPTION

AMOUNT

TAX FEES

63,000.

AUDIT FEES

56,487.

CONSULTANTS

30,167.

INVESTMENT SOFTWARE

22,456.

CUSTODIAL FEES

13,867.

OTHER INVESTMENT OFFICE EXPENSE

3,193.

TOTAL TO SCHEDULE M, PART II, LINE 28

189,170.

UNITED JEWISH APPEAL - FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC
YEAR ENDED JUNE 30, 2019
SCHEDULE M (FORM 990-T), PART I, LINE 5 DETAIL

51-0172429
STATEMENT 6

PARTNERSHIP INVESTMENT	FLOW-THROUGH INCOME(LOSS)
B. BROS REALTY	676,265
APOLLO RE INVESTMENT FUND III	(1,660)
BAUPOST VALUE, LP-I	(156,682)
CCP II AIV II, L.P.	(28,585)
CCP II FALCON AIV - B, LP	-
CCP II PWD-TFK AIV, LP	(5,979)
CCP III AIV II, LP	59,492
CENTERBRIDGE CAPITAL AIV II, LP	(128,715)
CLEARLAKE CAPITAL PARTNERS V	(80)
COLUMBIA CAPITAL EQUITY PARTNERS IV (QP)	(6,179)
CP FALCON AIV, LP	(513)
FOUNDRY GROUP NEXT, LP	(1,741)
HIGHFIELDS CAPITAL IV, L.P.	(2,338)
KKR ENERGY INCOME AND GROWTH	(328,198)
LS POWER EQUITY II, LP	(949)
LS POWER EQUITY LP	76,576
PINE BROOK CAPITAL PARTNERS II, LP	(872,700)
PINE BROOK CAPITAL PARTNERS II CAYMAN AV HM-1 LP	(10,322)
REALTY FINANCIAL PARTNERS VI, LP	(638,326)
ROARK CAPITAL PARTNERS IV AIV I-U, L.P.	(131,229)
	<u>(1,501,863)</u> SCHEDULE M, PART I, LINE 5

UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.

EIN: 51-0172429

TAX YEAR ENDED 6/30/19

<u>PARTNERSHIP</u>	<u>STCG</u>	<u>LTCG</u>	<u>1231 Gain(Loss)</u>	<u>Total Capital Gain (Loss)</u>
BAUPOST VALUE PARTNERS, LP - I	(1,427)	11,084	(7,613)	2,044
CCP III AIV II, L.P.	-	-	104	104
CCP II PWD-TFK AIV, LP	-	-	(36)	(36)
CCP II FALCON AIV-B, L.P.	-	3	-	3
CENTERBRIDGE CAPITAL PARTNERS AIV II, LP	-	(92,985)	-	(92,985)
CP FALCON AIV	(17)	303	(2)	284
KKR ENERGY INCOME AND GROWTH FUND I-TE LP	-	-	71,832	71,832
PINE BROOK CAPITAL PARTNERS II, LP	57,765	42,308	(96,073)	4,000
REALTY FINANCIAL PARTNERS VI, LP	-	-	(114,358)	(114,358)
ROARK CAPITAL PARTNERS IV AIV I-U, LP	(147)	39	(394)	(502)
TOTAL	56,174	(39,248)	(146,540)	(129,614)

UNITED JEWISH APPEAL - FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC
YEAR ENDED JUNE 30, 2019
Net Operating Loss Carryover

51-0172429
STATEMENT 7

Trade or Business: Working Interest in Oil and Gas Properties

<u>Tax Period</u>	<u>Original NOL</u>	<u>NOL Utilized Prior Year</u>	<u>NOL Utilized Current Year Or Expired</u>	<u>NOL Carried Forward</u>	<u>Year of Expiration</u>
6/30/2019	(86,285)			(86,285)	N/A
			Carryforward to 6/30/2020	<u>(86,285)</u>	

Trade or Business: Investments in Limited Partnerships

<u>Tax Period</u>	<u>Original NOL</u>	<u>NOL Utilized Prior Year</u>	<u>NOL Utilized Current Year Or Expired</u>	<u>NOL Carried Forward</u>	<u>Year of Expiration</u>
6/30/2019	(2,174,962)			(2,174,962)	N/A
			Carryforward to 6/30/2020	<u>(2,174,962)</u>	

Trade or Business: 225 Fourth

<u>Tax Period</u>	<u>Original NOL</u>	<u>NOL Utilized Prior Year</u>	<u>NOL Utilized Current Year Or Expired</u>	<u>NOL Carried Forward</u>	<u>Year of Expiration</u>
6/30/2019	(2,840)			(2,840)	N/A
			Carryforward to 6/30/2020	<u>(2,840)</u>	

United Jewish Appeal-Federation of Jewish Philanthropies 51-0172429
of New York, Inc.

FEDERAL ELECTIONS

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DESCRIPTION: DE MINIMIS SAFE HARBOR ELECTION

REGULATION REFERENCE: TREAS. REG. SEC. 1.263(A)-1(F)

United Jewish Appeal-Federation of Jewish Philanthropies of New York, Inc.
("UJA")
130 East 59th Street
New York, NY 10022-1302

UJA ELECTS THE DE MINIMIS SAFE HARBOR ELECTION UNDER TREAS. REG.
SEC.1.263(A)-1(F) FOR THE TAXABLE YEAR ENDED JUNE 30, 2019.

FEDERAL ELECTIONS

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DESCRIPTION: BOOK CONFORMITY CAPITALIZATION ELECTION

REGULATION REFERENCE: TREAS. REG. SEC. 1.263 (A) -3 (N)

United Jewish Appeal-Federation of Jewish Philanthropies of New York, Inc.
("UJA")
130 East 59th Street
New York, NY 10022-1302

UJA ELECTS THE BOOK CONFIRMITY CAPITALIZATION ELECTION UNDER TREAS.
REG. SEC. 1.263 (A) -3 (N) FOR THE TAXABLE YEAR ENDED JUNE 30, 2019.

Return of U.S. Persons With Respect to Certain Foreign Partnerships
▶ Attach to your tax return. ▶ Go to www.irs.gov/Form8865 for instructions and the latest information.
Information furnished for the foreign partnership's tax year
beginning JAN 1 , 2018, and ending DEC 31 , 2018

OMB No. 1545-1668

2018Attachment
Sequence No. **118**

Name of person filing this return UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.	Filer's identification number 51-0172429
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Filer's address (if you aren't filing this form with your tax return) 130 EAST 59TH STREET NEW YORK, NY 10022	A Category of filer (see Categories of Filers in the instructions and check applicable box(es)): <table><tr><td>1</td><td>2</td><td>3</td><td><input checked="" type="checkbox"/> 4</td></tr></table> B Filer's tax year beginning JUL 1 , 2018 , and ending JUN 30 , 2019	1	2	3	<input checked="" type="checkbox"/> 4
1	2	3	<input checked="" type="checkbox"/> 4		

C Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$

D If filer is a member of a consolidated group but not the parent, enter the following information about the parent:	
Name	EIN
Address	

E Check if any excepted specified foreign financial assets are reported on this form. See instructions

F Information about certain other partners (see instructions)					
(1) Name	(2) Address	(3) Identification number	(4) Check applicable box(es)		
			Category 1	Category 2	Constructive owner

G1 Name and address of foreign partnership PINE BROOK CAPITAL PARTNER II (CAYMAN) AV HM-1, L.P. P.O. BOX 309, UGLAND HOUSE GRAND CAYMAN, CAYMAN ISLANDS KY1-1104	2(a) EIN (if any) 98-1427453 2(b) Reference ID number 3 Country under whose laws organized CAYMAN ISLANDS
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4 Date of organization 03/15/2013	5 Principal place of business CAYMAN ISLANDS	6 Principal business activity code number 523900	7 Principal business activity INVESTMENTS	8a Functional currency US DOLLAR	8b Exchange rate (see instructions)
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H Provide the following information for the foreign partnership's tax year:	
1 Name, address, and identification number of agent (if any) in the United States	2 Check if the foreign partnership must file: Form 1042 <input type="checkbox"/> Form 8804 <input checked="" type="checkbox"/> Form 1065 Service Center where Form 1065 is filed:
3 Name and address of foreign partnership's agent in country of organization, if any	4 Name and address of person(s) with custody of the books and records of the foreign partnership, and the location of such books and records, if different PINE BROOK ROAD PARTNERS LLC 60 EAST 42ND STREET, 50TH FLOOR NEW YORK, NY 10165

5 During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions	Yes <input type="checkbox"/> No <input type="checkbox"/>
If "Yes," enter the total amount of the disallowed deductions	\$
6 Is the partnership a section 721(c) partnership, as defined in Temporary Regulations section 1.721(c)-1T(b)(14)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7 Were any special allocations made by the foreign partnership?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
8 Enter the no. of Forms 8858, Info Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return	
9 How is this partnership classified under the law of the country in which it's organized?	LTD PARTNERSHIP
10a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Reg. 1.1503(d)-1(b)(4) or part of a combined separate unit under Reg. 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Reg. 1.1503(d)-1(b)(5)(ii)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11 Does this partnership meet both of the following requirements? 1. The partnership's total receipts for the tax year were less than \$250,000. 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Sign Here Only if You're Filing This Form Separately and Not With Your Tax Return.	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member) is based on all information of which preparer has any knowledge.
Signature of general partner or limited liability company member	Date

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	Firm's name	Firm's EIN			
	Firm's address	Phone no.			