Form 990-T	E	Exempt Orgai	ax Return	ı L	OMB No. 1545-0047			
			nd proxy tax unde					2040
	For ca	lendar year 2019 or other tax yea					_ ·	2019
Department of the Treasury Internal Revenue Service	•	► Go to www. Do not enter SSN number			ons and the latest informate de public if your organiza			Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed		Name of organization (UNITED JEWISH APP		-	and see instructions.)		(Empl	oyer identification number oyees' trust, see ctions.)
B Exempt under section	Print	JEWISH PHILANTHRO	PIES OF NEW YORK	, INC	2.			51-0172429
X 501(c)(3)	Type	Number, street, and room		k, see ir	structions.			ated business activity code nstructions.)
408(e) 220(e)	1,750	130 EAST 59TH STR					-	
408A 530(a) 529(a)		City or town, state or prov NEW YORK, NY 100		r foreig	n postal code		52599	90
C Book value of all assets at end of year		F Group exemption numb		<u> </u>				
1,420,472	,000.	G Check organization type	e ► X 501(c) corp	oration	501(c) trust	401(a)	trust	Other trust
H Enter the number of the	-					the only (or first) ur		
		ESTMENT IN LIMITED				•		
		ice at the end of the previou	is sentence, complete Pa	rts I an	d II, complete a Schedule	M for each addition	al trade	or
business, then complete								
		ooration a subsidiary in an a	and the second s	ıt-subsi	diary controlled group?		Ye	s X No
J The books are in care of		tifying number of the paren			Talanh	ana numbar 🕨 2	12 02	<i>6</i> 1720
		de or Business Inc			(A) Income	one number 2 (B) Expenses		(C) Net
1a Gross receipts or sale		ac or Buomoco mo	01110		(A) Illicollic	(b) Expenses	,	(0) 1461
b Less returns and allo			c Balance	1c				
		 A, line 7)		2				
3 Gross profit. Subtrac				3				
		ch Schedule D)		4a	655,001.			655,001.
		Part II, line 17) (attach Form		4b	,			,
		sts		4c				
		ship or an S corporation (at		5	-1,418,432.	STMT 3		-1,418,432.
				6				
		me (Schedule E)		7				
8 Interest, annuities, ro	yalties, a	nd rents from a controlled o	organization (Schedule F)	8				
9 Investment income o	f a sectio	on 501(c)(7), (9), or (17) or	ganization (Schedule G)	9				
	-	me (Schedule I)		10				
		e J)		11				
		ns; attach schedule)		12				
		gh 12			-763,431.			-763,431.
		ot Taken Elsewhere be directly connected wi	•		•			
14 Compensation of of	ficers, di	rectors, and trustees (Sche	dule K)				14	
							15	279,127.
							16	
							17	
		ee instructions)					18	115 054
19 Taxes and licenses							19	115,954.
		562)					1,,,	
		n Schedule A and elsewhere					21b	
		mnoneation plane					22	
		mpensation plans					23	66,836.
24 Employee benefit pr25 Excess exempt expe	ogranis inspe (Sa	chedule I)					25	20,000.
26 Excess readership c	nsts (Scl	hedule J)					26	
27 Other deductions (a:	ttach sch	nedule)			SEE STATEMEN	 IT 2	27	189,987.
		14 through 27					28	651,904.
		ncome before net operating					29	-1,415,335.
		loss arising in tax years bec						
•			•			STMT 7	30	0.
		ncome. Subtract line 30 fro					31	-1,415,335.

Form **8868**

(Rev. January 2020)

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.

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

OMB No. 1545-0047

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.

filing of this	form, visit www.irs.gov/e-file-providers/e-file-f	for-charities	-and-non-profits.						
Automatic	6-Month Extension of Time. Only subm	it original	(no copies needed).				_		
•	ons required to file an income tax return othe orm 7004 to request an extension of time to f		, ,	O-C filers), partnerships,	REM	ICs, and trusts	3		
Type or	Name of exempt organization or other filer, see in UNITED JEWISH APPEAL - FEDERA			Taxpayer identification nu	mber ((TIN)	_		
print	OF JEWISH PHILANTHROPIES OF N	EW YORK,	INC.	51-0172429	9				
File by the due date for filing your	Number, street, and room or suite no. If a P.O. bo 130 EAST 59TH STREET	x, see instruc	ctions.						
return. See nstructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10022								
Enter the Re	eturn Code for the return that this application	is for (file	a separate application fo	or each return)		0	7		
Application		Return	Application			Retur			
ls For		Code	Is For			Code			
	r Form 990-EZ	01	Form 990-T (corporat	ion)		07			
Form 990-B		02	Form 1041-A			08			
Form 4720	,	03	Form 4720 (other tha	n individual)		09	—		
Form 990-PI		04	Form 5227			10			
	(sec. 401(a) or 408(a) trust)	05	Form 6069			11			
-orm 990-1	(trust other than above) JOANN LOCASCIO	06	Form 8870			12			
Telephon If the orga If this is for the whola	s are in the care of ► 130 EAST 59TH Stree No. ► 212 836-1730 anization does not have an office or place of or a Group Return, enter the organization's for e group, check this box ►	l business ir ur digit Gro f it is for pa ion is for.	Fax No. ▶ 212 83 If the United States, check the group, check the group, check the group in the	ck this box	a	. If this is nd attach			
•	est an automatic 6-month extension of time u			$\frac{21}{2}$, to file the exempt	orga	nization retur	n		
2 If the ta	for the organization named above. The extension is for the organization's return for: calendar year 20 or X tax year beginning 07/01, 2019, and ending 06/30, 20 20.								
3a If this	application is for Forms 990-BL, 990-PF, 9	90-T, 4720), or 6069, enter the	tentative tax, less any					
	undable credits. See instructions.				3a \$	35,29	5.		
	application is for Forms 990-PF, 990-T,								
	ted tax payments made. Include any prior yea				3b \$	300,00	0.		
	e due. Subtract line 3b from line 3a. Include		ent with this form, if re-	quired, by using EFTPS					
(Electr	onic Federal Tax Payment System). See instru	ctions.			3c \$	i	0.		
Caution: If yo	u are going to make an electronic funds withdrawa	I (direct deb	it) with this Form 8868, se	e Form 8453-EO and Form	8879	-EO for payme	nt		
nstructions.									
For Privacy A	Act and Paperwork Reduction Act Notice, see instr	ructions.			Form	8868 (Rev. 1-2	020)		

JSA

9F8054 2.000

Part	t III Total Unrelated Business Taxable Income								
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	9,	499.					
33	Amounts paid for disallowed fringes	33							
34	Charitable contributions (see instructions for limitation rules)	34		0.					
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	9,	499.					
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36							
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	9,	499.					
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,	000.					
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,								
	enter the smaller of zero or line 37	39	8,	499.					
Part									
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	1,	785.					
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:								
	Tax rate schedule or Schedule D (Form 1041)	41							
42	Proxy tax. See instructions	42							
43	Alternative minimum tax (trusts only)	43							
44	Tax on Noncompliant Facility Income. See instructions	44							
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	1,	785.					
Part	t V Tax and Payments								
46 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a								
C	General business credit. Attach Form 3800 46c								
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 46d								
е		46e							
47	Subtract line 46e from line 45	47	1,	785.					
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 X Other (attach schedule)		33,	510.					
49	Total tax. Add lines 47 and 48 (see instructions)	49	35,	295.					
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50		0.					
	Payments: A 2018 overpayment credited to 2019 51a 300,000								
	2019 estimated tax payments 51b	7							
r	Tax deposited with Form 8868 51c	-							
q	Foreign organizations: Tax paid or withheld at source (see instructions) 51d	-							
	Backup withholding (see instructions) 51e	-							
	Credit for small employer health insurance premiums (attach Form 8941) 51f	-							
	Other credits, adjustments, and payments: Form 2439	-							
9	Form 4136 Other Total >								
52	Total payments. Add lines 51a through 51g	52	300,	000.					
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53							
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54							
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	264	705.					
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax	56	164.						
Part		1 00 1							
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes	No					
31	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		163	INU					
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country								
	here BERMUDA		х						
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			Х					
30	If "Yes," see instructions for other forms the organization may have to file.								
59	Enter the amount of tax-exempt interest received or accrued during the tax year \(\bigs \) \(\bigs \								
	Under penalties of periury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled	edge and belief. it is t	rue,						
Sign									
Here	15/12/2021	May the IRS discuss to		/ith					
		the preparer shown be instructions)? X	Yes	No					
		if PTIN		110					
. .									
Paid	DAVID M. HIGHEITI	P0151789	91						
•	Preparer								
use	Only Firm's name Fried LLP Firm's EIN F								
		212-758-9700							

Form 990-T (2019) JEWISH PHILANTHROPIES OF NEW YORK, INC.

Scl	hedule A - Cost of Goods	Sold. Enter	method of inver	ntory v	valuation N/A					
1	Inventory at beginning of year	1		6	Inventory at end of yea	r		6		
2	Purchases				Cost of goods sold. St					
3	Cost of labor				from line 5. Enter here					
4 a	Additional section 263A costs				line 2			7		
	(attach schedule)	4a		8		263A (v	with respect to		Yes	No
b	Other costs (attach schedule)				property produced or a	cquired	for resale) apply to			
5	Total. Add lines 1 through 4b	5			the organization?					
Sch	nedule C - Rent Income (From Real	Property and	d Per	sonal Property L	ease	d With Real Prope	erty)		
_(se	ee instructions)									
1. D	escription of property									
(1)										
(2)										
(3)										
(4)										
(- /		2. Rent receive	ed or accrued							
	(a) From personal property (if the percentage of rent for personal property is more than			personal	sonal property (if the percentage I property exceeds 50% or if sed on profit or income)	ge	3(a) Deductions directly columns 2(a) and	connect d 2(b) (a	ed with the income ir ttach schedule)	ו
(1)	•				,					
(2)										
(3)										
(4)										
Total		0.	Total			0.				
here	otal income. Add totals of columns and on page 1, Part I, line 6, column	(A)	▶			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>		0.
Sch	nedule E - Unrelated Deb	t-Financed	Income (see	instru	ıctions)					
				2	Gross income from or allocable to debt-		Deductions directly conn to debt-finance			
	1. Description of debt-fin	anced property			financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	ns
(1)										
(2)										
(3)										
(4)										
	Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	(6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(0	8. Allocable deduct column 6 x total of co 3(a) and 3(b))	
(1)					%					
(2)					%					
(3)					%					
(4)					%					
							inter here and on page 1, Part I, line 7, column (A).		nter here and on pag Part I, line 7, column (
Tota	als				.		0 .	.		0.
	al dividends-received deductions in	cluded in columr	า 8				•			0.

Form **990-T** (2019)

Schedule F - Interest, A		<u> </u>		1	Controlled O				,	structio	
1. Name of controlled organizat	tion	2. Em identifi num	cation	3. Net unr (loss) (see	elated income instructions)	4. Total of specified payments made		includ	t of column 4 ed in the cont ation's gross	rolling	6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organi	zations	1									
7. Taxable Income	8. Net u	unrelated incom see instructions		9. Total	of specified payr made	nents	10. Part of colur in the controlli gross	nn 9 tha ng orgar s income	ization's	11 . D	eductions directly connect th income in column 10
(1)											
(2)											
(3)											
_(4)										<u> </u>	
							Add colum Enter here and line 8, c		1, Part I,		Add columns 6 and 11. here and on page 1, Part I, line 8, column (B).
Totals						▶			0.		
Schedule G - Investme	nt Incor	me of a S	Section	501(c)(7	'), (9), or (17) Org	janization				
(see instr	ructions)				I		0 5 1 11				F =
1. Desc	cription of inco	ome			2. Amount of	income	 Deduction directly conne (attach sched) 	cted	4. Set-asides (attach schedule)		5. Total deduction and set-asides (col. 3 plus col. 4
(1)											
(2)											
(3)											
(4)											
					Enter here and Part I, line 9, co						Enter here and on pag Part I, line 9, column (I
Totals				>		0.					
Schedule I - Exploited (see instru	Exempt	Activity	Incom	e, Other	Than Adv	ertisin	g Income				
•					4. Net incon	ne (loss)					
1. Description of exploited activity	unrelated incom	Gross d business ne from business	directly with pr of un	connected connected oduction related ss income	from unrelated business (co minus colum gain, comput through	I trade or Ilumn 2 n 3). If a e cols. 5	Gross inco from activity t is not unrelat business inco	hat ed	attribu	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
	page 1	re and on 1, Part I, , col. (A).	page	ere and on 1, Part I, , col. (B).							Enter here and on page 1, Part II, line 25.
Totals ► Schedule J - Advertisi	na Incor	0.	aatw.catio.	0.							
Part I Income From I					solidated	Basis					
					1 4		<u> </u>				Ι -
1. Name of periodical		2. Gross advertising income	adv	3. Direct rertising costs	or (loss) (c col. 3). If a g	ising gain ol. 2 minus ain, compute arough 7.	5. Circulat income		6. Read cos		7. Excess readership costs (column 6 minus column 5, but not mor than column 4).
(1)											
(1) (2) (3)											
(3)											
(4)											
Totals (carry to Part II line (5))			n	ſ	, I						

 $\underline{\text{Form 990-T}}$ (2019) JEWISH PHILANTHROPIES OF NEW YORK, INC.

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.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 26.
Totals, Part II (lines 1-5)	0.	0.				0.
Schedule K - Compensation	n of Officers, I	Directors, and	Trustees (see in	nstructions)		
				3. Percei	nt of 4 Comp	anastian attributable

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

Form **990-T** (2019)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

____, and ending JUN 30, 2020 For calendar year 2019 or other tax year beginning $\,$ JUL 1, 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).

501(c)(3) Organizations Only

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

Employer identification number 51-0172429

ENTITY

Unrelated Business Activity Code (see instructions) ▶ WORKING INTEREST IN OIL AND GAS PROPERTIES Describe the unrelated trade or business

Pa	art I Unrelated Trade or Business Income			(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales					
b	Less returns and allowances	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 Fo	rm 4797)	4b			
	Capital loss deduction for trusts		4c			
5	Income (loss) from a partnership or an S corporation					
	statement)		5			
6	Rent income (Schedule C)		6			
7	Unrelated debt-financed income (Schedule E)		7			
8	Interest, annuities, royalties, and rents from a contro					
	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	267,252.		267,252.
13	Total. Combine lines 3 through 12		13	267,252.		267,252.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (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	185,171.
16	Repairs and maintenance			16	
17	Bad debts			17	
18	Interest (attach schedule) (see instructions)			18	
19	Taxes and licenses			19	
20	Depreciation (attach Form 4562)		527.		
21	Less depreciation claimed on Schedule A and elsewhere on return			21b	527.
22	Depletion			22	2,296.
23	Contributions to deferred compensation plans			23	
24	Employee benefit programs			24	
25	Excess exempt expenses (Schedule I)			25	
26	Excess readership costs (Schedule J)			26	
27	Other deductions (attach schedule)	E STATEMEN	Т 5	27	366,256.
28	Total deductions. Add lines 14 through 27			28	554,250.
29	Unrelated business taxable income before net operating loss deduction. Subtract line	28 from line	13	29	-286,998.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2	2018 (see			
	instructions)		STMT 7	30	0.
31	Unrelated business taxable income. Subtract line 30 from line 29			31	-286,998.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning $\,$ JUL 1, 2019

___, and ending JUN 30, 2020

► 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).

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

ENTITY

525990 Unrelated Business Activity Code (see instructions) ▶ INVESTMENT IN 225 FOURTH HOLDING COMPANY Describe the unrelated trade or business

Par	t I Unrelated Trade or Business Incom	ne		(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			
4 a	Capital gain net income (attach Schedule D)		4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach F	orm 4797)	4b			
С	Capital loss deduction for trusts		4c			
5	Income (loss) from a partnership or an S corporation	n (attach				
	statement)		5	12,339.		12,339.
6	Rent income (Schedule C)		6			
7	Unrelated debt-financed income (Schedule E)		7			
8	Interest, annuities, royalties, and rents from a contro	olled				
	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	12,339.		12,339.

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

14	Compensation of officers, directors, and trustees (Schedule K)		14	
15	Salaries and wages			
16	Repairs and maintenance		16	
17	Bad debts			
18	Interest (attach schedule) (see instructions)			
19	Taxes and licenses			
20	Depreciation (attach Form 4562)	20		
21	Less depreciation claimed on Schedule A and elsewhere on return	21a	21b	
22	Depletion			
23	Contributions to deferred compensation plans			
24	Employee benefit programs			
25	Excess exempt expenses (Schedule I)			
26	Excess readership costs (Schedule J)			
27	Other deductions (attach schedule)			
28	Total deductions. Add lines 14 through 27			0.
29	Unrelated business taxable income before net operating loss deduction. Subj	29	12,339.	
30	Deduction for net operating loss arising in tax years beginning on or after Jan			
	instructions)		STMT 7 30	2,840.
31	Unrelated business taxable income. Subtract line 30 from line 29		31	9,499.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

SCHEDULE D (Form 1120)

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC,

► Go to www.irs.gov/Form1120 for instructions and the latest information.

Employer identification number

Department of the Treasury Internal Revenue Service

1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

OMB No. 1545-0123

UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC. 51-0172429 X No Yes Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss Short-Term Capital Gains and Losses (See instructions.) (a) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter or (e) Subtract column (e) from the lines below. or loss from Form(s) Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) the result with column (q) whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with Box C checked 3,954 3,954 Short-term capital gain from installment sales from Form 6252, line 26 or 37 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 Unused capital loss carryover (attach computation) 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h 3,954 Long-Term Capital Gains and Losses (See instructions.) See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) (e) or loss from Form(s) Subtract column (e) from the lines below. Cost Proceeds 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) the result with column (g) column (q) whole dollars 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 Totals for all transactions reported on Form(s) 8949 with Box Echecked Totals for all transactions reported on Form(s) 8949 with Box F checked 11,638 -11,638 Enter gain from Form 4797, line 7 or 9 11 662,685 Long-term capital gain from installment sales from Form 6252, line 26 or 37 12 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 Capital gain distributions (see instructions) 14 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 651,047 Part III Summary of Parts I and II Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 3,954 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 651,047 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns. 655,001 18 Note: If losses exceed gains, see Capital Losses in the instructions.

8949

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Social security number or taxpayer identification number Name(s) shown on return

UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK

INS1-0172429

Before you check Box A, B, or C 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.

1

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 (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss.

(a) Description of property	(b) (c) Date acquired Date sold of		(d) Proceeds	Cost or other basis. See the Note below	enter a co	amount in column (g), de in column (f). rrate instructions.	Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
SEE STATEMENT 6					IIIStructions	aujustinent		
PASSTHROUGH FROM			3,954				3,954	
PARTNERSHIP								
2 Totals. Add the amounts in columns	s (d), (e), (g), and	d (h) (subtract						
negative amounts). Enter each total								
Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C a	**	•					3,954	
Note: If you checked Box A above b			RS was incorrect	enter in column	(e) the basis	as reported to the	•	

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.

Form 8949 (2019) Attachment Sequence No. 12A Page 2

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

ING.1-0172429

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

(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price) (see instructions)	Cost or other basis. See the Note below	-		(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example: 100 sh. XYZ Co.) SEE STATEMENT 6	(Mo., day, yr.)	(Mo., day, yr.)		and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)	
PASSTHROUGH FROM PARTNERSHIP				11,638			-11,638	
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	here and incluis checked), line	ude on your 9 (if Box E					-11,638	

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.

JSA

Form **4797**

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) OMB No. 1545-0184

Septement

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Attach to your tax return.
 Go to www.irs.gov/Form4797 for instructions and the latest information.

Attachment Sequence No.

Identifying number

UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC. 51-0172429 Enter the gross proceeds from sales or exchanges reported to you for 2019 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions 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) (f) Cost or other (g) Gain or (loss) (a) Description (c) Date sold (d) Gross 2 (b) Date acquired allowed or basis, plus Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) sales price allowable since improvements and sum of (d) and (e) SEE STATEMENT 6 expense of sale acquisition PASSTHROUGH FROM PARTNERSHIP 662,685 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 Gain, if any, from line 32, from other than casualty or theft 6 7 662,685 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, 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 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 662,685 Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Gain, if any, from line 7 or amount from line 8, if applicable 12 662,685 12 13 13 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 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 17 17 662,685 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 or Form 1040-SR), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 Form 4797 (2019) For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2019) Page **2**

19	(a) Description of section 1245, 1250, 1252, 1254, or		(b) Date acquired (mo., day, yr.)	\blacksquare	(c) Date sold (mo., day, yr.)			
							_	
	;							
	Y			_				
		D.,		Duamantus	n	Duament. C		Dramarty D
	These columns relate to the properties on lines 19A through 19D.	► FIG	perty A	Property	Ь	Property C		Property D
20	Gross sales price (Note: See line 1 before completing.)	0						
21	Cost or other basis plus expense of sale	1						
22	Depreciation (or depletion) allowed or allowable 22	2						
23	Adjusted basis. Subtract line 22 from line 21	3						
24	Total gain. Subtract line 23 from line 20 24	4						
25	If section 1245 property:							
а	Depreciation allowed or allowable from line 22 25	ia						
	Enter the smaller of line 24 or 25a.							
	If section 1250 property: If straight line depreciation was							
	used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions 26	ia						
	Applicable percentage multiplied by the smaller of	-						
_	line 24 or line 26a. See instructions	ib						
_	Subtract line 26a from line 24. If residential rental property							
·	or line 24 isn't more than line 26a, skip lines 26d and 26e . 26	ic						
4	Additional depreciation after 1969 and before 1976, 26							
	Enter the smaller of line 26c or 26d						_	
	Section 291 amount (corporations only)						_	
	Add lines 26b, 26e, and 26f	og					+	
	dispose of farmland or if this form is being completed for a partnership.							
а	Soil, water, and land clearing expenses 27	'a						
b	Line 27a multiplied by applicable percentage. See instructions 27	'b						
c	Enter the smaller of line 24 or 27b	'c						
	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits,							
	mining exploration costs, and depletion. See instructions 28	Ba 💮					_	
b	Enter the smaller of line 24 or 28a	Bb					\perp	
29	If section 1255 property:							
а	Applicable percentage of payments excluded from							
	income under section 126. See instructions 29)a						
	Enter the smaller of line 24 or 29a. See instructions _ 29							
Su	mmary of Part III Gains. Complete property	columns	A through	D through line	e 29b	before going to	line	e 30.
30	Total gains for all properties. Add property columns A th	rough D, lir	ne 24				30	
31	Add property columns A through D, lines 25b, 26g, 27c	, 28b, and	29b. Enter he	ere and on line 13			31	
32	Subtract line 31 from line 30. Enter the portion from c	asualty or	theft on Forn	1 4684, line 33.	Enter	the portion from		
	other than casualty or theft on Form 4797, line 6						32	
Par	Recapture Amounts Under Sections (see instructions)	179 and	280F(b)(2	When Busin	ess l	Use Drops to 50)% c	or Less
	((a) Section	$\overline{}$	(b) Section
						179	+	280F(b)(2)
						·	- 1	
33	Section 179 expense deduction or depreciation allowab Recomputed depreciation. See instructions				33		\dashv	

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

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. ALL AMOUNTS SUBJECT TO TAXATION ARE REPORTED ON FORM 990-T.

TO FORM 990-T, PAGE 1

FORM 990-T O	THER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
CONSULTANTS		14,316.
AUDIT FEES		50,000.
TAX FEES		40,000.
CUSTODIAL FEES		19,299.
INVESTMENT SOFTWARE		24,907.
OTHER INVESTMENT OFFICE EXPENSE		41,465.
TOTAL TO FORM 990-T, PAGE 1, LINE	: 27	189,987.

UNITED JEWISH APPEAL - FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC YEAR ENDED JUNE 30, 2020 FORM 990-T, PART I, LINE 5 DETAIL

	FLOW-THROUGH	
PARTNERSHIP INVESTMENT	INCOME(LOSS)	
B. BROS REALTY	730,581	
APOLLO RE INVESTMENT FUND III	(2,007)	
BAUPOST VALUE, LP-I	(121,157)	
CCP II AIV II, L.P.	(77,757)	
CCP II PWD-TFK AIV, LP	(32,503)	
CCP III AIV II, LP	(2,401)	
CLEARLAKE CAPITAL PARTNERS V	(1,042)	
COLUMBIA CAPITAL EQUITY PARTNERS III (QP), L.P.	(4)	
COLUMBIA CAPITAL EQUITY PARTNERS IV (QP) LP	(4,721)	
FOUNDRY VENTURE CAPITAL 2013, LP	(28,671)	
FOUNDRY GROUP NEXT, LP	555	
HIGHFIELDS CAPITAL IV, L.P.	(417)	
KKR ENERGY INCOME AND GROWTH	(492,213)	
LS POWER EQUITY II, LP	55,061	
PINE BROOK CAPITAL PARTNERS II, LP	(486,389)	
PINE BROOK CAPITAL PARTNERS II CAYMAN AV HM-1 LP	30,051	
REALTY FINANCIAL PARTNERS VI, LP	(785,985)	
ROARK CAPITAL PARTNERS IV AIV I-U, L.P.	(103,478)	
ROARK CAPITAL PARTNERS V (T) LP	(76,121)	
TOWERBROOK STRUCTURED OPPORTUNITIES FUND II ONSHORE, L.	.P. 5,180	
WARBURG PINCUS FINANCIAL SECTOR (CAYMAN), LP	(24,994)	
	(1,418,432) FORM 990, PART I, LIN	IE 5

FORM 990-T (M)	OTHER :	INCOME	STATEMENT 4
DESCRIPTION			AMOUNT
WORKING INTEREST IN OIL	AND GAS PROPER	ries -	267,252.
TOTAL TO SCHEDULE M, PAI	267,252.		
FORM 990-T (M)	OTHER	DEDUCTIONS	STATEMENT 5
DESCRIPTION			AMOUNT
PRODUCTION EXPENSE PROFESSIONAL SERVICES CONSULTANTS INSURANCE			197,567. 80,000. 58,082. 30,607.
TOTAL TO SCHEDULE M, PAI	RT II, LINE 27		366,256.

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

EIN: 51-0172429

TAX YEAR ENDED 6/30/20

<u>PARTNERSHIP</u>	<u>STCG</u>	<u>LTCG</u>	1231 Gain(Loss)	Total Capital Gain (Loss)
BAUPOST VALUE PARTNERS, LP - I	2,392	(7,187)	(1,866)	(6,661)
CCP II PWD-TFK AIV, LP	-	-	28	28
FOUNDRY VENTURE CAPITAL 2013, LP	-	13,119	-	13,119
KKR ENERGY INCOME AND GROWTH FUND I-TE LP	-	-	3,417	3,417
PINE BROOK CAPITAL PARTNERS II, LP	1,565	(17,540)	(1,593)	(17,568)
REALTY FINANCIAL PARTNERS VI, LP	-	-	665,078	665,078
ROARK CAPITAL PARTNERS IV AIV I-U, LP	(3)	(30)	(2,379)	(2,412)
TOTAL	3,954	(11,638)	662,685	655,001

51-0172429

UNITED JEWISH APPEAL - FEDERATIONOF JEWISH PHILANTHROPIES OF NEW YORK, INC YEAR ENDED JUNE 30, 2020 **Net Operating Loss Carryover**

Trade or Business:	Working Interest in	n Oil and Gas Propei			
Tax Period 6/30/2019 6/30/2020	Original NOL (86,285) (286,998)	NOL Utilized Prior Year Carryforward to 0	NOL Utilized Current Year Or Expired 6/30/2021	NOL Carried Forward (86,285) (286,998) (373,283)	Year of Expiration N/A
Trade or Business:	Investments in Lin	nited Partnerships NOL Utilized	NOL Utilized Current Year		
Tax Period	Original NOL	Prior Year	Or Expired	NOL Carried Forward	Year of Expiration
6/30/2019 6/30/2020	(2,180,789) (1,415,335)			(2,180,789) (1,415,335)	N/A
0/30/2020	(1,410,000)	Carryforward to 6	6/30/2021	(3,596,124)	
Trade or Business:	225 Fourth		NOL Utilized		
		NOL Utilized	Current Year		
Tax Period	Original NOL	Prior Year	Or Expired	NOL Carried Forward	Year of Expiration
6/30/2019 6/30/2020	(2,840)		2,840	-	N/A
		Carryforward to	6/30/2021		

^{*}Taxpayer hereby makes an election under IRC Section 172(b)(3) under Rev. Proc. 2020-24 to relinquish the carryback period for an NOL for all of the tax years listed above.

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

FEDERAL ELECTIONS

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.

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

FEDERAL ELECTIONS

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.

(Rev. May 2020) Department of the Treasury

Limitation on Business Interest Expense Under Section 163(i)

► Attach to your tax return.

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

OMB No. 1545-0123

Internal Revenue Service Identification number Taxpayer name(s) shown on tax return 51-0172429 UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC. If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter: Name of foreign entity ▶ Employer identification number, if any ▶ Reference ID number ▶ 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 Current year business interest expense (not including floor plan 73,866.00 financing interest expense), before the section 163(j) limitation Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership) 2 Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h)) 3 Floor plan financing interest expense. See instructions Total business interest expense. Add lines 1 through 4 73,866.00 5 Section II - Adjusted Taxable Income **Taxable Income** -1,689,994.00Taxable income. See instructions 6 Additions (adjustments to be made if amounts are taken into account on line 6) Any item of loss or deduction that is not properly allocable to a 7 trade or business of the taxpayer. See instructions 7 Any business interest expense not from a pass-through entity. See 8 73,866.00 Amount of any net operating loss deduction under section 172 9 Amount of any qualified business income deduction allowed under 10 10 section 199A 11 Deduction allowable for depreciation, amortization, or depletion attributable to a trade or business. See instructions 11 Amount of any loss or deduction items from a pass-through entity. 12 1,101,296.00 See instructions 12 114,333.00 Other additions. See instructions 13 13 Total current year partner's excess taxable income (Schedule A. line 2,919,375.00 14 44, column (f)) 15 Total current year S corporation shareholder's excess taxable 15 income (Schedule B, line 46, column (c)) 4,208,870.00 16 Reductions (adjustments to be made if amounts are taken into account on line 6) Any item of income or gain that is not properly allocable to a trade 17 or business of the taxpayer. See instructions Any business interest income not from a pass-through entity. See 18 23,927.00) instructions 18 Amount of any income or gain items from a pass-through entity. 19 827,126.00) See instructions 19 70,606.00) Other reductions. See instructions 20 Total. Combine lines 17 through 20 21 921,659.00) 21 1,597,217.00 Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-.) 22

Form 8990 (Rev. 5-2020) Page **2**

Section III - Business Interest Income 23,927.00 Current year business interest income. See instructions Excess business interest income from pass-through entities (total of 24 558,668.00 24 Schedule A, line 44, column (g), and Schedule B, line 46, column (d)) 25 582,595.00 25 Section IV - 163(j) Limitation Calculations Limitation on Business Interest Expense 26 Multiply adjusted taxable income (line 22) by the applicable 26 479,165.10 percentage. See instructions Business interest income (line 25) 582,595.00 27 Floor plan financing interest expense (line 4) 28 29 1,061,760.10 29 Allowable Business Interest Expense 73,866.00 30 30 Carryforward Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.) . . . NONE 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 Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.) Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) 33 Subtract line 33 from line 26. (If zero or less, enter -0-.) 34 34 Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) 35 35 Excess taxable income. Multiply line 35 by line 22. 36 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 37 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-.) Subtract line 38 from line 26. (If zero or less, enter -0-.) 39 39 40 Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) 40 41 Excess Business Interest Income Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or 42

Form **8990** (Rev. 5-2020)

42

Form 8990 (Rev. 5-2020)

								9
SCHEDULE A Sumr	nary of Partner's	Section 163(j) Exc	cess Items					
Any taxpayer that owns ar	n interest in a partne	ership subject to section	on 163(j) should d	complete Schedule	A before completing	ng Part I.		
(a) Name of partnership	(b) EIN	(c) Current year	usiness Interest Exper (d) Prior year carryforward	(e) Total ((c) plus (d))	(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))
43 SEE ATTACHMENT	1							
44 Total								
Any taxpayer that is require before completing Part I.								omplete Schedule B
(a) Name of S corporation			(b) EIN		(c) Current year excess taxable income		rent year excess s interest income	
45								
40 Tatal							1	

Form **8990** (Rev. 5-2020)

Form 8990

		Ex	cess Business Interest Expe	nse	(f) Current year excess	(g) Current year excess	(h) Excess business interest	(i) Current year excess business
(a) Name of partnership	(b) EIN	(c) Current year	(d) Prior year carryover	(e) Total ((c) plus (d))	taxable income	business interest income	expense treated as paid or accrued (lesser of (e) or (f) plus	interest expense carryover ((minus (h))
225 FOURTH	13-3935925			-			-	
APOLLO RE INVESTMENT FUND III	13-3969710			=			=	
B. BROS REALTY	20-0860290			=	2,369,750		=	
BAUPOST VALUE, LP-I	04-3506440			-	74,372	381,371	-	
CCP II AIV II, L.P.	30-0715450			-			-	
CCP II FALCON AIV - B, LP	82-1988031			-				
CCP II PWD-TFK AIV, LP	90-0857562			-				
CCP III AIV II, LP	37-1789865			-				
CENTERBRIDGE CAPITAL AIV II, LP	20-5672564			-				
CLEARLAKE CAPITAL PARTNERS V	82-3100733			-				
COLUMBIA CAPITAL EQUITY PARTNERS IV (QP)	41-2179167			-				
CP FALCON AIV, LP	36-4767158			-				
FOUNDRY GROUP NEXT, LP	81-2277556			-			=	
HIGHFIELDS CAPITAL IV, L.P.	11-3841276			1		63,188	=	
KKR ENERGY INCOME AND GROWTH	68-0683554			-	43,732			
LS POWER EQUITY II, LP	20-5721263	3,435		3,435				
LS POWER EQUITY LP	20-2455155			-				
PINE BROOK CAPITAL PARTNERS II, LP	37-1699332			-	131,343	112,904		
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			-	300,178	1,205		
Total ▶				-	2,919,375	558,668	_	
SCHEDULE B	Summary of S	Corporation Share	holder's Excess Ta	xable Income and	Excess Business In	terest Income		
(a) Name of S corporation			(b) EIN	(c) Current year exc	cess taxable income	(d) Current year excess I	business interest income	

Form **8990**

(December 2018)

Tax on Base Erosion Payments of Taxpayers With Substantial Gross Receipts

20 19	, and ending	06/30	. 20 20
20	, and ending		. , 20

For tax year beginning $\frac{07/01}{}$ ▶ Go to www.irs.gov/Form8991 for instructions and the latest information. OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

➤ See instructions. Employer identification number 51-0172429

Par	Applicable Taxpayer				
	box if this form is being filed by a taxpayer with which another taxpayer has been agg	•			, -
	above box is checked, attach a statement listing the names and EINs of all sep	arate taxpayers	s taken in	ito a	ccount in the
detern	nination of "1 person" under section 59A(e)(3). $_{ m N/A}$				
		(a)	(b)		(c)
		First	Second	i	Third
		Preceding Tax Year	Precedir	-	Preceding
			Tax Yea	ır	Tax Year
1 a		1,352,489,000	904,694	,000	835,772,000
b	Gross receipts from partnerships STATEMENT 1				
С	Gross receipts of all other persons treated as 1 person as the "applicable				
	taxpayer" pursuant to section 59A(e)(3)				
d	Gross receipts. Combine lines 1a through 1c		904,694	,000	835,772,000
е	Gross receipts of first, second, and third preceding tax years. Combine columns (a), (b), and (c)	of line		
	1d			1e	3,092,955,000
f	3-year average annual gross receipts (Divide line 1e by 3.0)			1f	1,030,985,000
g	Is line 1f \$500 million or more?				
	X Yes. Continue to line 2.				
	No. STOP here and attach this form to your tax return.				
2 a	Aggregate base erosion tax benefit (from Schedule A, line 14)			2a	NONE
b	Aggregate amount of deductions allowable under Chapter 1 of the Internal Revenue C	ode		2b	1,206,154
С	Other allowable deductions not included in line 2b above	2c			
d	Base erosion tax benefits resulting from reductions in insurance premit				
	reported on Schedule A, line 8, column a-2	2d			
е	Base erosion tax benefits resulting from reductions in gross receipts reported				
	Schedule A, line 10, column a-2	2e			
f	Add lines 2c through 2e			2f	
g	Total deductions for amounts paid or accrued for services to which the excep	tion			
	under section 59A(d)(5) applies (from Schedule A, line 5b)				
h	Qualified derivative payments excepted by section 59A(h)				
i	Total deductions allowed under sections 172, 245A, and 250 for the tax year				
i	Combine lines 2g through 2i			2i	NONE
k	Total Deductions. Subtract line 2j from the sum of line 2b and line 2f			2k	1,206,154
I	Base Erosion Percentage for purposes of section 59A(c)(4)(A). Divide line 2a by line			21	0.0000 %
m	Is the taxpayer's base erosion percentage on line 2I 3% or higher (2% or higher for		ı		
	dealer)?	•.			
	Yes. Continue to Part II.				
	X No. STOP after completing Part I and Schedule A and attach this form to your to	ax return.			

For Paperwork Reduction Act Notice, see separate instructions.

Form 8991 (12-2018) Page **2**

Par	t II Modified Taxable Income (MTI)		
3 a	Taxable income after net operating loss and special deductions	3a	
b	Base erosion tax benefits for the tax year with respect to base erosion payments.	3b	
С	Base erosion percentage of the net operating loss deduction allowed under section 172 for the tax year.		
	See instructions	3с	
d	Modified Taxable Income. See instructions	3d	
Par	t III Regular Tax Liability Adjusted for Purposes of Computing Base Erosion Minimum Tax Amo	unt	
4 a	Regular tax liability	4a	
b	Allowable credits, as adjusted (from Schedule B, line 7)	4b	
С	Regular tax liability adjusted for purposes of computing Base Erosion Minimum Tax Amount. Subtract		
	line 4b from line 4a	4c	
Par	t IV Computation of Base Erosion Minimum Tax Amount		
5 a	Modified Taxable Income (from line 3d)	5a	
b	Tax rate applicable for current tax year	5b	%
С	Base Erosion Minimum Tax. Multiply line 5a by line 5b	5c	
d	Regular tax liability adjusted for purposes of computing Base Erosion Minimum Tax Amount (from		
	line 4c)	5d	
e	Base Erosion Minimum Tax Amount. Subtract line 5d from line 5c. If zero or less, enter "-0-"	5e	

Form 8991 (12-2018)

Base Erosion Payments and Base Erosion Tax Benefits (see instructions) Schedule A (Check all applicable boxes in columns (c), (d), and (e) below) (a-1) (a-2) (b-1) (b-2) (c) (d) (e) Person Related **Aggregate Base** Base Erosion Base Erosion Any 25% **Any Person** Aggregate Base Erosion **Erosion Tax** Payment for Tax Benefit Owner of **Under Sections** Related Within Payment for Benefit for Purposes of for Purposes the Taxpaver 267(b) or the Meaning of Type of Base Erosion Payments Purposes of Purposes of Modified of Modified 707(b)(1) to the Section 482 **Base Erosion** Base Erosion Taxable Taxable Taxpayer or any to the Taxpayer Percentage Percentage Income Income 25% Owner of the Taxpayer Reserved for future use Reserved for future use Purchase or creations of property rights for intangibles (patents, trademarks, etc.) Rents, royalties, and license fees 5a Compensation/consideration paid for services NOT excepted by section 59A(d)(5) **b** Compensation/consideration paid for services excepted by section 59A(d)(5) \$ _____ 6 Interest expense Payments for the purchase of tangible personal property 8 Premiums and/or other considerations paid or accrued for insurance and reinsurance as covered by section 59A(d)(3) and

Form 8991 (12-2018)

Base Erosion Payments and Base Erosion Tax Benefits (see instructions) (continued from page 3) Schedule A Check all applicable boxes in columns (c), (d), and (e) below) (a-1) (a-2) (b-1) (b-2) (d) (c) (e) Aggregate Base Base Erosion Base Erosion Any 25% Person Related Any Person Aggregate Base Erosion **Erosion Tax** Payment for Tax Benefit Owner of **Under Sections** Related Within Payment for Benefit for Purposes of for Purposes the Taxpaver 267(b) or the Meaning of Type of Base Erosion Payments Purposes of Purposes of Modified of Modified 707(b)(1) to the Section 482 Base Erosion Base Erosion Taxable Taxable Taxpayer or any to the Taxpayer Percentage Percentage Income Income 25% Owner of the Taxpayer 9a Nonqualified derivative payments **b** Qualified derivative payments excepted by section 59A(h) \$ _____ 10 Payments reducing gross receipts made to surrogate foreign corporation 11 Other payments - specify Combine lines 3 through 11 NONE NONE NONE NONE Base erosion tax benefits related to payments reported on lines 3 through 11, on which tax is imposed by section 871 or 881, with respect to which tax has been withheld under section 1441 or 1442 at 30% statutory withholding tax rate 14 Total base erosion tax benefits for purposes of computing base erosion percentage. Subtract line 13, column (a-2) from line 12, column (a-2). Enter on Part I, line 2a NONE 15 Portion of base erosion tax benefits reported on lines 3 through 11, on which tax is imposed by section 871 or 881, with respect to which tax has been withheld under section 1441 or 1442 at reduced withholding rate pursuant to income tax treaty. Multiply ratio of percentage withheld divided by 30% times tax benefit. NONE See instructions 16 Total base erosion tax benefits for purposes of determining MTI. Subtract the sum of line 13, column (b-2); and line 15, column (b-2) from line 12, column (b-2). Enter this amount on Part II, NONE

Form 8991 (12-2018) Page **5**

Sch	Schedule B Credits Reducing Regular Tax Liability in Computing Base Erosion Minimum Tax Amount (BEMTA)										
Part I Credits Allowed Against Regular Tax (see instructions)											
1	1 Total credits allowed in current year. Enter the amount from Form 1120, Schedule J, Part I, line 6; or the										
	applicable line of your return										
2											
3											
	credit reported in Form 3800, Part II, line 38. See instructions										
4											
5	Limitation of applicable section 38 credits. Multiply line 4 by 80% (0.80)	5									
6	6 Adjustments to allowed credits. Add lines 3 and 5										
7	Credits allowed against regular tax in computing BEMTA. Subtract line 6 from line 1. Enter here and										
	on Form 8991, line 4b	7									
Part II Applicable section 38 credits											
	(Only complete Parts II and III if you have allowed applicable section 38 credits.)										
8	Low income housing credit from lines 1d and 4d of all Parts III of Form 3800										
9	Renewable electricity production credit but only to extent of the renewable										
	electricity under section 45(a) from lines 1f and 4e of all Parts III of Form 3800										
10	Investment credit but only to extent of energy credit property under section 48										
	from line 4a of all Parts III of Form 3800										
11	I Total allowed applicable section 38 credits for current year. Enter the amount of applicable credits										
	reported in Form 3800, Part II, line 38. See instructions										
Part III BEMTA determined without adjustment for applicable section 38 credits											
12	Base erosion minimum tax (Form 8991, line 5c)	12									
13	Regular tax liability (Form 8991, line 4a)										
14	4 Subtract Schedule B, Part I, line 3 from line 1										
15	15 Regular tax adjusted for credits that offset BEMTA. Subtract line 14 from line 13										
16	6 Base erosion minimum tax determined without adjustment for applicable section 38 credits. Subtract										
	line 15 from line 12: if zero or less enter -0-	16									

UNITED JEWISH APPEAL- FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC. 51-0172429
JUNE 30, 2020

The taxpayer has used the following estimates for purposes of preparing Form 8991:

Gross receipts of the taxpayer on lines 1a through 1d were calculated using the audited financial statements of the taxpayer for the three preceding periods. Gross receipts receipts passing through from partnership investments were not available at the date of filing Form 8991; however, because the taxpayer has exceeded \$500 million in gross receipts, there is no impact to the taxpayer's requirement to complete Form 8991.

Base erosion tax benefits on line 2a are estimated to be zero. The taxpayer has not paid or accrued amounts to a foreign person (as defined in Regulations section 1.59A-1(b)(10)) that is a foreign related party (as defined in Regulations section 1.59A-1(b)(12)). The taxpayer is not aware that any partnership investment has made payments that would be considered base eroding to the taxpayer or its aggregate group.

Total deductions on lines 2b and 2k include total deductions against unrelated business taxable income, none of which are base eroding payments to the taxpayer.

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

▶ Go to www.irs.gov/Form965B for instructions and the latest information.

OMB No. 1545-0123

	of taxpayer or		n amended r	ероп								dentifying number		Taxable year of r	
UNITED JEWISH APPEAL-FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC. 51-0172429									9	2019					
				965 Amounts Over			<u>. </u>					31 017242	,	20	1 7
Par	tl Re	port of Ne	et 965 Tax	Liability and Ele	ction To	Pay in Installmo	ents								
	(a) Year of Section 965(a) Inclusion or Liability Assumed (see instructions)	Taxpayer's N Wi 965 A	(b) Net Tax Liability ith all Amounts structions)	(c) Taxpayer's Net Tax Lia Without 965 Amounts (see instructions)		(d) Net 965 Tax Liability (subtract column (c) from column (b))	Instal Elec	e) Ilment ction ade	Net 965 Tax To Be Paid in F (if column (e) is amount from o	Liability full in Year 1 "No," enter	To Be (if colun amou	(g) 965 Tax Liability Paid in Installments on (e) is "Yes," enter nt from column (d) see instructions)	ter Transferred In, or		(i) Tax Identification Number of Buyer/ Transferee or Seller/ Transferor
1	2017		641,151	22:	2,273	418,878	✓			0)	418,878		0	N/A
2	2018		0		0	0		✓		0)	0		0	N/A
3	2019		0		0	0		✓		0)	0		0	NA
4															
_ 5															
6															
7															
8 Par				L. L. COST T. L. L. L. L.				<u> </u>							
	Year of Sec Inclus Liability	Record of Amount of Net 965 Tax Liability Paid by (a) Section 965(a) (b) Ilusion or Paid for Year 1 Pain Pain structions)		(c) Paid for Year 2	(c)			(d) Paid for Year 3		(e) Paid for Year 4		(f) Paid for Year 5			
1	20	17	33,510			33,510				33,510					
_2	20	18 0			0				0						
3	20	19		0			0			0					
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												318,34	8		33,510
2													0		0
3													0		0
4													1		
5															
6													+		
7													+		
8	-1-												_		
_ rota	als					<u> </u>			<u> ▶</u>			318,34	8		33,510

Form 965-B (Rev. 1-2020)

Par	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	(I) Portion Accounted for in This Reporting Year					
1a											
1b											
2a											
2b											
3a											
3b											
Tot	als	0									

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