

**Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation**
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

2022

Open to Public Inspection

For calendar year **2022** or tax year beginning _____, 2022, and ending _____, 20

MACCABEE TASK FORCE FOUNDATION
PO BOX 19698
LAS VEGAS, NV 89132-0698

A Employer identification number
47-4908810

B Telephone number (see instructions)
702-984-6552

C If exemption application is pending, check here

D 1 Foreign organizations, check here
2 Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

G Check all that apply:

| | |
|---|--|
| <input type="checkbox"/> Initial return | <input type="checkbox"/> Initial return of a former public charity |
| <input type="checkbox"/> Final return | <input type="checkbox"/> Amended return |
| <input type="checkbox"/> Address change | <input type="checkbox"/> Name change |

H Check type of organization: Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16)
\$ 7,642,161.

J Accounting method: Cash Accrual
(Part I, column (d), must be on cash basis.)

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|---|------------------------------------|---------------------------|-------------------------|---|
| Revenue | 1 Contributions, gifts, grants, etc., received (attach schedule) . . . | 10,974,357. | | | |
| | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B | | | | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities | | | | |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) | | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | -608. | STATEMENT 1 | | |
| | b Gross sales price for all assets on line 6a | 1,251. | | | |
| | 7 Capital gain net income (from Part IV, line 2) | | | | |
| | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | 10a Gross sales less returns and allowances | | | | |
| b Less: Cost of goods sold | | | | | |
| c Gross profit or (loss) (attach schedule) | | | | | |
| 11 Other income (attach schedule) | | | | | |
| SEE STATEMENT 2 | | | | | |
| 12 Total. Add lines 1 through 11. | 508,825. | | | | |
| 13 Compensation of officers, directors, trustees, etc. | 11,482,574. | 0. | 0. | | |
| 14 Other employee salaries and wages | 487,676. | | | 487,676. | |
| 15 Pension plans, employee benefits | 1,096,150. | | | 1,096,150. | |
| 16a Legal fees (attach schedule) | 35,227. | | | 35,227. | |
| b Accounting fees (attach sch) | 7,322. | | | 7,322. | |
| c Other professional fees (attach sch) | 31,603. | | | 31,603. | |
| 17 Interest | 142,551. | | | 142,551. | |
| 18 Taxes (attach schedule)(see instrs) | | | | | |
| 19 Depreciation (attach schedule) and depletion | 110,964. | | | 110,964. | |
| 20 Occupancy | 27,383. | | | | |
| 21 Travel, conferences, and meetings | 128,175. | | | 128,175. | |
| 22 Printing and publications | 4,577. | | | 4,577. | |
| 23 Other expenses (attach schedule) | | | | | |
| SEE STATEMENT 7 | | | | | |
| 24 Total operating and administrative expenses. Add lines 13 through 23 | 877,531. | | | 870,192. | |
| 25 Contributions, gifts, grants paid. | 2,949,159. | | | 2,914,437. | |
| 26 Total expenses and disbursements. Add lines 24 and 25 | 5,439,367. | | | 5,439,367. | |
| 27 Subtract line 26 from line 12: | | | | | |
| a Excess of revenue over expenses and disbursements | 3,094,048. | | | | |
| b Net investment income (if negative, enter -0-) | | 0. | | | |
| c Adjusted net income (if negative, enter -0-) | | | 0. | | |

| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | | |
|--|--|--|----------------|-----------------------|
| | | Beginning of year | End of year | |
| | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 Cash – non-interest-bearing..... | 3,870,523. | 7,012,887. | 7,012,887. |
| | 2 Savings and temporary cash investments..... | | | |
| | 3 Accounts receivable | | | |
| | Less: allowance for doubtful accounts ----- | | | |
| | 4 Pledges receivable | | | |
| | Less: allowance for doubtful accounts ----- | | | |
| | 5 Grants receivable..... | | | |
| | 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)..... | | | |
| | 7 Other notes and loans receivable (attach sch) ----- 105,115. | | | |
| | Less: allowance for doubtful accounts ----- | 108,404. | 105,115. | 105,115. |
| | 8 Inventories for sale or use..... | | | |
| | 9 Prepaid expenses and deferred charges..... | | | |
| | 10a Investments – U.S. and state government obligations (attach schedule)..... | | | |
| | b Investments – corporate stock (attach schedule)..... | | | |
| | c Investments – corporate bonds (attach schedule)..... | | | |
| | 11 Investments – land, buildings, and equipment: basis | | | |
| Less: accumulated depreciation (attach schedule) ----- | | | | |
| 12 Investments – mortgage loans..... | | | | |
| 13 Investments – other (attach schedule)..... | | | | |
| 14 Land, buildings, and equipment: basis ----- 155,297. | | | | |
| Less: accumulated depreciation (attach schedule) ----- SEE STMT 8 96,053. | 79,318. | 59,244. | 59,244. | |
| 15 Other assets (describe SEE STATEMENT 9) | 27,586. | 464,915. | 464,915. | |
| 16 Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)..... | 4,085,831. | 7,642,161. | 7,642,161. | |
| Liabilities | 17 Accounts payable and accrued expenses..... | 69,358. | 39,899. | |
| | 18 Grants payable..... | | | |
| | 19 Deferred revenue..... | | | |
| | 20 Loans from officers, directors, trustees, & other disqualified persons..... | | | |
| | 21 Mortgages and other notes payable (attach schedule)..... | | | |
| | 22 Other liabilities (describe SEE STATEMENT 10) | 20,502. | 512,243. | |
| | 23 Total liabilities (add lines 17 through 22)..... | 89,860. | 552,142. | |
| Net Assets or Fund Balances | Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input checked="" type="checkbox"/> | | | |
| | 24 Net assets without donor restrictions..... | 504,582. | 671,527. | |
| | 25 Net assets with donor restrictions..... | 3,491,389. | 6,418,492. | |
| | Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input type="checkbox"/> | | | |
| | 26 Capital stock, trust principal, or current funds..... | | | |
| | 27 Paid-in or capital surplus, or land, bldg., and equipment fund..... | | | |
| | 28 Retained earnings, accumulated income, endowment, or other funds..... | | | |
| 29 Total net assets or fund balances (see instructions)..... | 3,995,971. | 7,090,019. | | |
| 30 Total liabilities and net assets/fund balances (see instructions)..... | 4,085,831. | 7,642,161. | | |

| Part III Analysis of Changes in Net Assets or Fund Balances | | |
|---|---|------------|
| 1 Total net assets or fund balances at beginning of year – Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)..... | 1 | 3,995,971. |
| 2 Enter amount from Part I, line 27a..... | 2 | 3,094,048. |
| 3 Other increases not included in line 2 (itemize) ----- | 3 | |
| 4 Add lines 1, 2, and 3..... | 4 | 7,090,019. |
| 5 Decreases not included in line 2 (itemize) ----- | 5 | |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29..... | 6 | 7,090,019. |

Part IV Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | | (b) How acquired P — Purchase D — Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|---|---|--|--|---|
| 1a | N/A | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) ((e) plus (f) minus (g)) | |
| a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. | | | | (i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | | |
| a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| 2 | Capital gain net income or (net capital loss)..... <input type="checkbox"/> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 | | 2 | |
| 3 | Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8..... <input type="checkbox"/> | | 3 | |

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 — see instructions)

| | | | |
|----|---|----|------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary — see instructions) | | |
| b | All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)..... | 1 | 0. |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)..... | 2 | 0. |
| 3 | Add lines 1 and 2..... | 3 | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .. | 4 | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-..... | 5 | 0. |
| 6 | Credits/Payments: | | |
| a | 2022 estimated tax pymts and 2021 overpayment credited to 2022..... | 6a | |
| b | Exempt foreign organizations — tax withheld at source..... | 6b | |
| c | Tax paid with application for extension of time to file (Form 8868)..... | 6c | 397. |
| d | Backup withholding erroneously withheld..... | 6d | |
| 7 | Total credits and payments. Add lines 6a through 6d..... | 7 | 397. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached..... | 8 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed..... | 9 | 0. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid..... | 10 | 397. |
| 11 | Enter the amount of line 10 to be: Credited to 2023 estimated tax 0. Refunded | 11 | 397. |

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Part VI-A Statements Regarding Activities

| | Yes | No |
|---|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition | | X |
| If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. | | |
| c Did the foundation file Form 1120-POL for this year? | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ <u>0.</u> (2) On foundation managers \$ <u>0.</u> | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ <u>0.</u> | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? | | X |
| If "Yes," attach a detailed description of the activities. | | |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | X |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | X |
| If "Yes," attach the statement required by <i>General Instruction T</i> . | | |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | X | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV | X | |
| 8a Enter the states to which the foundation reports or with which it is registered. See instructions <u>SEE STATEMENT 11</u> | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation. | X | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII. | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. <u>SEE STATEMENT 12</u> | X | |
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. | | X |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions | | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? ... Website address. <u>HTTPS://WWW.MACCABEETASKFORCE.ORG/</u> | X | |
| 14 The books are in care of <u>THE ORGANIZATION, CO FOX ROTH.</u> Telephone no. <u>702-984-6552</u> Located at <u>1980 FESTIVAL DR #700 LAS VEGAS NV</u> ZIP + 4 <u>89135</u> | | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here. N/A. <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. 15 <u>N/A</u> | | |
| 16 At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | | X |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country | | |

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Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

| | Yes | No |
|--|-------|----|
| 1a During the year, did the foundation (either directly or indirectly): | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 1a(1) | X |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | 1a(2) | X |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | 1a(3) | X |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 1a(4) | X |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | 1a(5) | X |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) | 1a(6) | X |
| b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. | 1b | |
| c Organizations relying on a current notice regarding disaster assistance, check here. <input type="checkbox"/> | | |
| d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022? | 1d | X |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | |
| a At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? | 2a | X |
| If "Yes," list the years 20 __ , 20 __ , 20 __ , 20 __ | | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions.) | 2b | |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 __ , 20 __ , 20 __ , 20 __ | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | 3a | X |
| b If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.) | 3b | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | X |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022? | 4b | X |

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Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

| | Yes | No |
|--|-------|-----|
| 5a During the year, did the foundation pay or incur any amount to: | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? | 5a(1) | X |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? | 5a(2) | X |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | 5a(3) | X |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions | 5a(4) | X |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? | 5a(5) | X |
| b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions | 5b | N/A |
| c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/> | | |
| d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). | N/A | 5d |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 6a | X |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. | 6b | X |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? | 7a | X |
| b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? | N/A | 7b |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? | 8 | X |

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 13 | | 455,222. | 32,454. | 0. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|--|---|------------------|---|---------------------------------------|
| URIAH ELLIS PO BOX 19698 LAS VEGAS, NV 89132-0698 | DIR OF FIN & 40 | 154,813. | 9,312. | 0. |
| BENJAMIN SWEETWOOD PO BOX 19698 LAS VEGAS, NV 89132-0698 | INTL FIELD DI 40 | 103,129. | 6,614. | 0. |
| DANIEL ANDRESEN PO BOX 19698 LAS VEGAS, NV 89132-0698 | SC CAMPUS DIR 40 | 85,305. | 14,933. | 0. |
| SEGULA DERSHOWITZ PO BOX 19698 LAS VEGAS, NV 89132-0698 | NW CAMPUS DIR 40 | 81,284. | 26,367. | 0. |
| SHIAN KNUTH PO BOX 19698 LAS VEGAS, NV 89132-0698 | SW CAMPUS DIR 40 | 79,410. | 20,489. | 0. |

Total number of other employees paid over \$50,000 7

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| MILLER INK INC 11400 WEST OLYMPIC BLVD STE 300 LOS ANGELES, CA 90064 | PUBLIC RELATIONS | 82,500. |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| Total number of others receiving over \$50,000 for professional services | | 0 |

Part VIII-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

| | Expenses |
|------------------------------------|----------|
| 1 <u>SEE STATEMENT 14</u> ----- | |
| 2 ----- | |
| 3 ----- | |
| 4 ----- | |

Part VIII-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

| | Amount |
|--|-----------|
| 1 <u>N/A</u> ----- | |
| 2 ----- | |
| All other program-related investments. See instructions. 3 ----- | |
| Total. Add lines 1 through 3 | 0. |

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Part IX **Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

| | | | |
|---|--|----|------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities..... | 1a | |
| b | Average of monthly cash balances..... | 1b | 3,204,320. |
| c | Fair market value of all other assets (see instructions)..... | 1c | 629,274. |
| d | Total (add lines 1a, b, and c)..... | 1d | 3,833,594. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)..... | 1e | 0. |
| 2 | Acquisition indebtedness applicable to line 1 assets..... | 2 | 0. |
| 3 | Subtract line 2 from line 1d..... | 3 | 3,833,594. |
| 4 | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)..... | 4 | 57,504. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3..... | 5 | 3,776,090. |
| 6 | Minimum investment return. Enter 5% (0.05) of line 5..... | 6 | 188,805. |

Part X **Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

| | | | |
|----|---|----|----------|
| 1 | Minimum investment return from Part IX, line 6..... | 1 | 188,805. |
| 2a | Tax on investment income for 2022 from Part V, line 5..... | 2a | |
| b | Income tax for 2022. (This does not include the tax from Part V.)..... | 2b | |
| c | Add lines 2a and 2b..... | 2c | |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1..... | 3 | 188,805. |
| 4 | Recoveries of amounts treated as qualifying distributions..... | 4 | |
| 5 | Add lines 3 and 4..... | 5 | 188,805. |
| 6 | Deduction from distributable amount (see instructions)..... | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1..... | 7 | 188,805. |

Part XI **Qualifying Distributions** (see instructions)

| | | | |
|---|--|----|------------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26..... | 1a | 8,353,804. |
| b | Program-related investments — total from Part VIII-B..... | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes..... | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required)..... | 3a | |
| b | Cash distribution test (attach the required schedule)..... | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4..... | 4 | 8,353,804. |

BAA

Part XII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2021 | (c) 2021 | (d) 2022 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2022 from Part X, line 7 | | | | 188,805. |
| 2 Undistributed income, if any, as of the end of 2022: | | | | |
| a Enter amount for 2021 only | | | 0. | |
| b Total for prior years: 20__, 20__, 20__ | | 0. | | |
| 3 Excess distributions carryover, if any, to 2022: | | | | |
| a From 2017 | | | | |
| b From 2018 | | | | |
| c From 2019 | | | | |
| d From 2020 | 11,435,679. | | | |
| e From 2021 | 6,676,654. | | | |
| f Total of lines 3a through e | 18,112,333. | | | |
| 4 Qualifying distributions for 2022 from Part XI, line 4: \$ 8,353,804. | | | | |
| a Applied to 2021, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior years (Election required — see instructions) | | 0. | | |
| c Treated as distributions out of corpus (Election required — see instructions) | 0. | | | |
| d Applied to 2022 distributable amount | | | | 188,805. |
| e Remaining amount distributed out of corpus | 8,164,999. | | | |
| 5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 26,277,332. | | | |
| b Prior years' undistributed income. Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable amount — see instructions | | 0. | | |
| e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount — see instructions | | | 0. | |
| f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023 | | | | 0. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a | 26,277,332. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2018 | | | | |
| b Excess from 2019 | | | | |
| c Excess from 2020 | 11,435,679. | | | |
| d Excess from 2021 | 6,676,654. | | | |
| e Excess from 2022 | 8,164,999. | | | |

BAA

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9) N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed

| | Tax year | | | | (e) Total |
|--|----------|----------|----------|----------|-----------|
| | (a) 2022 | (b) 2021 | (c) 2020 | (d) 2019 | |
| b 85% (0.85) of line 2a | | | | | |
| c Qualifying distributions from Part XI, line 4, for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a "Assets" alternative test — enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test — enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed | | | | | |
| c "Support" alternative test — enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

MIRIAM ADELSON

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XIV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|--|--------------------------------------|-------------------------------------|----------------------|
| <p><i>a</i> Paid during the year SEE STATEMENT 15</p> | | | | |
| Total | | | | 3a 5,439,367. |
| <i>b</i> Approved for future payment | | | | |
| Total | | | | 3b |

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

| | | Yes | No |
|---|-------|-----|----|
| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | |
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| (1) Cash..... | | | X |
| (2) Other assets..... | | | X |
| b Other transactions: | | | |
| (1) Sales of assets to a noncharitable exempt organization..... | 1b(1) | | X |
| (2) Purchases of assets from a noncharitable exempt organization..... | 1b(2) | | X |
| (3) Rental of facilities, equipment, or other assets..... | 1b(3) | | X |
| (4) Reimbursement arrangements..... | 1b(4) | | X |
| (5) Loans or loan guarantees..... | 1b(5) | | X |
| (6) Performance of services or membership or fundraising solicitations..... | 1b(6) | | X |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees..... | 1c | | X |

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

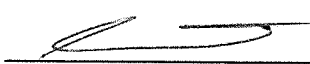
| (a) Line no. | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|--------------|---------------------|---|--|
| N/A | | | |
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|--|
| MTF LEADERSHIP INSTITUTE | 501(C) (3) | MTF LEADERSHIP INSTITUTE IS CONTROLLED BY THE MACCABEE TASK FORCE FOUNDATION |
| | | |
| | | |
| | | |

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.

 10/26/23 TREASURER
 Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below? See instructions. Yes No

Paid Preparer Use Only

| | | | | |
|---|------------------------------|------|---|--------------------------|
| Print/Type preparer's name HARRY SEALFON | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN P00224558 |
| Firm's name BONN DIOGUARDI & RAY, LLP | Firm's EIN 16-1460600 | | Phone no. 585-381-9660 | |
| Firm's address 70 LINDEN OAKS ROCHESTER, NY 14625 | | | | |

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

MACCABEE TASK FORCE FOUNDATION

Employer identification number

47-4908810

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[] 501(c)() (enter number) organization

[] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[] 527 political organization

Form 990-PF

[X] 501(c)(3) exempt private foundation

[] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

| | |
|---|---|
| Name of organization MACCABEE TASK FORCE FOUNDATION | Employer identification number 47-4908810 |
|---|---|

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

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|---|----------------------------|---|
| 1 | ADELSON FAMILY FOUNDATION ----- 300 FIRST AVENUE ----- NEEDHAM, MA 02494-2736 ----- | \$ 10,935,925. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 2 | COVENANT FOUNDATION INC ----- ONE NATIONAL DRIVE ----- ATLANTA, GA 30336 ----- | \$ 10,500. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 3 | JOSEPH J FISCH FUND ----- 4950 C/O JCF, MURPHY CANYON RD ----- SAN DIEGO, CA 92123 ----- | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| ----- | ----- | \$ ----- | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| ----- | ----- | \$ ----- | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| ----- | ----- | \$ ----- | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

Name of organization

MACCABEE TASK FORCE FOUNDATION

Employer identification number

47-4908810

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---------------------|---|---|-------------------|
| | N/A | | |
| | | \$ | |
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Name of organization **MACCABEE TASK FORCE FOUNDATION** Employer identification number **47-4908810**

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

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|--|---------------------|---|-------------------------------------|
| ----- | N/A | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- | | ----- | |
| ----- | | ----- | |
| ----- | | ----- | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- | | ----- | |
| ----- | | ----- | |
| ----- | | ----- | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- | | ----- | |
| ----- | | ----- | |
| ----- | | ----- | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- | | ----- | |
| ----- | | ----- | |

**Depreciation and Amortization
(Including Information on Listed Property)**

2022

Attachment
Sequence No. **179**

Department of the Treasury
Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

MACCABEE TASK FORCE FOUNDATION

Identifying number

47-4908810

Business or activity to which this form relates

FORM 990/990-PF

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

| | | | |
|----|--|------------------------------|------------------|
| 1 | Maximum amount (see instructions)..... | 1 | |
| 2 | Total cost of section 179 property placed in service (see instructions)..... | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation (see instructions)..... | 3 | |
| 4 | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-..... | 4 | |
| 5 | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions..... | 5 | |
| 6 | (a) Description of property | (b) Cost (business use only) | (c) Elected cost |
| 7 | Listed property. Enter the amount from line 29..... | 7 | |
| 8 | Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7..... | 8 | |
| 9 | Tentative deduction. Enter the smaller of line 5 or line 8..... | 9 | |
| 10 | Carryover of disallowed deduction from line 13 of your 2021 Form 4562..... | 10 | |
| 11 | Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instrs..... | 11 | |
| 12 | Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11..... | 12 | |
| 13 | Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12..... | 13 | |

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

| | | | |
|----|---|----|---------|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions..... | 14 | |
| 15 | Property subject to section 168(f)(1) election..... | 15 | |
| 16 | Other depreciation (including ACRS)..... | 16 | 27,383. |

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

| | | | |
|----|---|----|--|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2022..... | 17 | |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here..... <input type="checkbox"/> | | |

Section B – Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only — see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|-------------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property..... | | | | | | |
| b 5-year property..... | | | | | | |
| c 7-year property..... | | | | | | |
| d 10-year property..... | | | | | | |
| e 15-year property..... | | | | | | |
| f 20-year property..... | | | | | | |
| g 25-year property..... | | | 25 yrs | | S/L | |
| h Residential rental property..... | | | 27.5 yrs | MM | S/L | |
| i Nonresidential real property..... | | | 39 yrs | MM | S/L | |

Section C – Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System

| | | | | | | |
|---------------------|--|--|--------|----|-----|--|
| 20a Class life..... | | | | | S/L | |
| b 12-year..... | | | 12 yrs | | S/L | |
| c 30-year..... | | | 30 yrs | MM | S/L | |
| d 40-year..... | | | 40 yrs | MM | S/L | |

Part IV Summary (See instructions.)

| | | | |
|----|--|----|---------|
| 21 | Listed property. Enter amount from line 28..... | 21 | |
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions..... | 22 | 27,383. |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs..... | 23 | |

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

| 24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | 24b If 'Yes,' is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | |
|--|----------------------------------|---|-------------------------------|--|---------------------------|------------------------------|----------------------------------|---------------------------------------|--|---|--|--|--|--|--|--|--|--|--|
| (a) Type of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment use percentage | (d) Cost or other basis | (e) Basis for depreciation (business/investment use only) | (f) Recovery period | (g) Method/ Convention | (h) Depreciation deduction | (i) Elected section 179 cost | | | | | | | | | | | |
| 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions | | | | | | | | 25 | | | | | | | | | | | |
| 26 Property used more than 50% in a qualified business use: | | | | | | | | | | | | | | | | | | | |
| 27 Property used 50% or less in a qualified business use: | | | | | | | | | | | | | | | | | | | |
| 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 | | | | | | | | 28 | | | | | | | | | | | |
| 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 | | | | | | | | 29 | | | | | | | | | | | |

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

| 30 Total business/investment miles driven during the year (don't include commuting miles) | (a) Vehicle 1 | (b) Vehicle 2 | (c) Vehicle 3 | (d) Vehicle 4 | (e) Vehicle 5 | (f) Vehicle 6 | | | | | | |
|---|------------------|------------------|------------------|------------------|------------------|------------------|-----|----|-----|----|-----|----|
| 31 Total commuting miles driven during the year | | | | | | | | | | | | |
| 32 Total other personal (noncommuting) miles driven | | | | | | | | | | | | |
| 33 Total miles driven during the year. Add lines 30 through 32 | | | | | | | | | | | | |
| | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 34 Was the vehicle available for personal use during off-duty hours? | | | | | | | | | | | | |
| 35 Was the vehicle used primarily by a more than 5% owner or related person? | | | | | | | | | | | | |
| 36 Is another vehicle available for personal use? | | | | | | | | | | | | |

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

| | | |
|---|-----|----|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? | Yes | No |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners | | |
| 39 Do you treat all use of vehicles by employees as personal use? | | |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? | | |
| 41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions | | |

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' don't complete Section B for the covered vehicles.

Part VI Amortization

| (a) Description of costs | (b) Date amortization begins | (c) Amortizable amount | (d) Code section | (e) Amortization period or percentage | (f) Amortization for this year | |
|--|------------------------------------|------------------------------|------------------------|--|--------------------------------------|--------|
| 42 Amortization of costs that begins during your 2022 tax year (see instructions): | | | | | | |
| | | | | | | |
| 43 Amortization of costs that began before your 2022 tax year | | | | | 43 | 7,339. |
| 44 Total. Add amounts in column (f). See the instructions for where to report | | | | | 44 | 7,339. |

STATEMENT 1
FORM 990-PF, PART I, LINE 6A
NET GAIN (LOSS) FROM NONINVENTORY SALES PER BOOKS
ASSETS NOT INCLUDED IN PART IV

| | | | | |
|----------------------|------------------------|------|-------------|--------------|
| DESCRIPTION: | HP OMEN | | | |
| DATE ACQUIRED: | 9/17/2017 | | | |
| HOW ACQUIRED: | PURCHASE | | | |
| DATE SOLD: | 3/04/2022 | | | |
| TO WHOM SOLD: | | | | |
| GROSS SALES PRICE: | | 0. | | |
| COST OR OTHER BASIS: | | 220. | | |
| BASIS METHOD: | COST | | | |
| | | | GAIN (LOSS) | -220. |
| | | | | |
| DESCRIPTION: | DELL LATITUDE COMPUTER | | | |
| DATE ACQUIRED: | 9/01/2019 | | | |
| HOW ACQUIRED: | PURCHASE | | | |
| DATE SOLD: | 12/06/2022 | | | |
| TO WHOM SOLD: | | | | |
| GROSS SALES PRICE: | | 0. | | |
| COST OR OTHER BASIS: | | 0. | | |
| BASIS METHOD: | COST | | | |
| | | | GAIN (LOSS) | 0. |
| | | | | |
| DESCRIPTION: | MACBOOK PRO LAPTOP | | | |
| DATE ACQUIRED: | 5/15/2020 | | | |
| HOW ACQUIRED: | PURCHASE | | | |
| DATE SOLD: | 2/18/2022 | | | |
| TO WHOM SOLD: | | | | |
| GROSS SALES PRICE: | | 587. | | |
| COST OR OTHER BASIS: | | 855. | | |
| BASIS METHOD: | COST | | | |
| | | | GAIN (LOSS) | -268. |
| | | | | |
| DESCRIPTION: | MACBOOK PRO LAPTOP | | | |
| DATE ACQUIRED: | 3/15/2020 | | | |
| HOW ACQUIRED: | PURCHASE | | | |
| DATE SOLD: | 6/10/2022 | | | |
| TO WHOM SOLD: | | | | |
| GROSS SALES PRICE: | | 664. | | |
| COST OR OTHER BASIS: | | 784. | | |
| BASIS METHOD: | COST | | | |
| | | | GAIN (LOSS) | -120. |
| | | | TOTAL \$ | <u>-608.</u> |

STATEMENT 2
FORM 990-PF, PART I, LINE 11
OTHER INCOME

| | (A) REVENUE PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
|-----------------------------------|-----------------------------|---------------------------------|-------------------------------|
| MISCELLANEOUS REVENUE..... | \$ 11,821. | | |
| OTHER INVESTMENT INCOME..... | 28,538. | | |
| RETURN OF UNUSED GRANT FUNDS..... | 468,466. | | |
| TOTAL | \$ 508,825. | \$ 0. | \$ 0. |

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STATEMENT 3
FORM 990-PF, PART I, LINE 16A
LEGAL FEES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-----------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| LEGAL FEES..... | \$ 7,322. | | | \$ 7,322. |
| TOTAL | <u>\$ 7,322.</u> | <u>\$ 0.</u> | <u>\$ 0.</u> | <u>\$ 7,322.</u> |

STATEMENT 4
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|----------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| ACCOUNTING FEES..... | \$ 31,603. | | | \$ 31,603. |
| TOTAL | <u>\$ 31,603.</u> | <u>\$ 0.</u> | <u>\$ 0.</u> | <u>\$ 31,603.</u> |

STATEMENT 5
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|--------------------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| OTHER..... | \$ 512. | | | \$ 512. |
| OUTSIDE CONTRACT SERVICES..... | 56,510. | | | 56,510. |
| PAYROLL PROCESSING..... | 3,029. | | | 3,029. |
| PUBLIC RELATIONS..... | 82,500. | | | 82,500. |
| TOTAL | <u>\$ 142,551.</u> | <u>\$ 0.</u> | <u>\$ 0.</u> | <u>\$ 142,551.</u> |

STATEMENT 6
FORM 990-PF, PART I, LINE 18
TAXES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|----------------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| DISABILITY..... | \$ 199. | | | \$ 199. |
| DISABILITY..... | 773. | | | 773. |
| MEDICARE..... | 22,999. | | | 22,999. |
| OTHER COSTS..... | -1,671. | | | -1,671. |
| SOCIAL SECURITY..... | 78,890. | | | 78,890. |
| UNEMPLOYMENT..... | 4,524. | | | 4,524. |
| WORKER'S COMPENSATION..... | 5,250. | | | 5,250. |
| TOTAL | <u>\$ 110,964.</u> | <u>\$ 0.</u> | <u>\$ 0.</u> | <u>\$ 110,964.</u> |

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STATEMENT 7
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|------------------------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| 401K ADMINISTRATION..... | \$ 9,911. | | | \$ 9,911. |
| AMORTIZATION..... | 7,339. | | | N/A |
| BUSINESS REGISTRATION FEES..... | 5,422. | | | 5,422. |
| CREDIT CARD PROCESSING FEES..... | 1,134. | | | 1,134. |
| FUND RAISING COSTS..... | 296. | | | 296. |
| HEALTH BENEFIT REIMBURSEMENTS..... | 37,756. | | | 37,756. |
| HEALTH INSURANCE..... | 208,885. | | | 208,885. |
| HRA PLAN ADMINISTRATION..... | 994. | | | 994. |
| INSURANCE..... | 35,589. | | | 35,589. |
| OFFICE EXPENSE..... | 4,161. | | | 4,161. |
| OTHER COSTS..... | 35,040. | | | 35,040. |
| OTHER PROGRAM COSTS..... | 455,694. | | | 455,694. |
| PAYMENTS ON BEHALF OF MTFLI..... | 4,098. | | | 4,098. |
| POSTAGE AND MAILING..... | 4,381. | | | 4,381. |
| STAFF DEVELOPMENT..... | 9,269. | | | 9,269. |
| TECHNOLOGY..... | 22,452. | | | 22,452. |
| TELEPHONE..... | 30,647. | | | 30,647. |
| WEBSITE MAINTENANCE..... | 4,463. | | | 4,463. |
| TOTAL | \$ 877,531. | \$ 0. | \$ 0. | \$ 870,192. |

STATEMENT 8
FORM 990-PF, PART II, LINE 14
LAND, BUILDINGS, AND EQUIPMENT

| CATEGORY | BASIS | ACCUM. DEPREC. | BOOK VALUE | FAIR MARKET VALUE |
|-------------------------|--------------------|-------------------|-------------------|----------------------|
| FURNITURE AND FIXTURES | \$ 32,735. | \$ 7,029. | \$ 25,706. | \$ 25,706. |
| MACHINERY AND EQUIPMENT | 134,052. | 94,194. | 39,858. | 33,538. |
| MISCELLANEOUS | -11,490. | -5,170. | -6,320. | 0. |
| TOTAL | \$ 155,297. | \$ 96,053. | \$ 59,244. | \$ 59,244. |

STATEMENT 9
FORM 990-PF, PART II, LINE 15
OTHER ASSETS

| | BOOK VALUE | FAIR MARKET VALUE |
|----------------------------|--------------------|----------------------|
| NET INTANGIBLE ASSETS..... | \$ 9,103. | \$ 9,103. |
| OPERATING LEASE ASSET..... | 445,470. | 445,470. |
| SECURITY DEPOSIT..... | 9,843. | 9,843. |
| TRUST ACCOUNT..... | 499. | 499. |
| TOTAL | \$ 464,915. | \$ 464,915. |

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STATEMENT 10
FORM 990-PF, PART II, LINE 22
OTHER LIABILITIES

| | | |
|--------------------------------|-----------|-----------------|
| 401K MATCH PAYABLE..... | \$ | 35,227. |
| EMPLOYEE TAX LOANS..... | | 6,192. |
| OPERATING LEASE LIABILITY..... | | 470,427. |
| TOTAL | \$ | 512,243. |

STATEMENT 11
FORM 990-PF, PART VI-A, LINE 8A
STATES TO WHICH THE FOUNDATION REPORTS

NV GA NJ DE AK AL AR CA CO CT DC FL HI IL KS KY MA MD ME MI MN MO MS NC ND NH NM
 OH OR PA SC TN UT VA WA WI WV

STATEMENT 12
FORM 990-PF, PART VI-A, LINE 10
SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

| | |
|--|--|
| <u>NAME OF SUBSTANTIAL CONTRIBUTOR</u> | <u>ADDRESS OF SUBSTANTIAL CONTRIBUTOR</u> |
| ADELSON FAMILY FOUNDATION | 300 FIRST AVENUE NEEDHAM, MA 02494-2736 |

STATEMENT 13
FORM 990-PF, PART VII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

| <u>NAME AND ADDRESS</u> | <u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u> | <u>COMPEN- SATION</u> | <u>CONTRI- BUTION TO EBP & DC</u> | <u>EXPENSE ACCOUNT/ OTHER</u> |
|---|---|---------------------------|---|---------------------------------------|
| MIRIAM ADELSON PO BOX 19698 LAS VEGAS, NV 89132-0698 | PRESIDENT 1.00 | \$ 0. | \$ 0. | \$ 0. |
| MIRIAM ADELSON PO BOX 19698 LAS VEGAS, NV 89132-0698 | SECRETARY 1.00 | | 0. | 0. |
| PATRICK DUMONT PO BOX 19698 LAS VEGAS, NV 89132-0698 | TREASURER 2.00 | | 0. | 0. |
| ALAN DERSHOWITZ PO BOX 19698 LAS VEGAS, NV 89132-0698 | DIRECTOR 1.00 | | 0. | 0. |

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STATEMENT 13 (CONTINUED)
FORM 990-PF, PART VII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

| <u>NAME AND ADDRESS</u> | <u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u> | <u>COMPEN- SATION</u> | <u>CONTRI- BUTION TO EBP & DC</u> | <u>EXPENSE ACCOUNT/ OTHER</u> |
|--|---|---------------------------|---|---------------------------------------|
| JOSEPH LIEBERMAN PO BOX 19698 LAS VEGAS, NV 89132-0698 | DIRECTOR 1.00 | \$ 0. | \$ 0. | \$ 0. |
| DAVID BROG PO BOX 19698 LAS VEGAS, NV 89132-0698 | EXECUTIVE DIR. 50.00 | 455,222. | 32,454. | 0. |
| | | TOTAL \$ 455,222. | \$ 32,454. | \$ 0. |

STATEMENT 14
FORM 990-PF, PART VII-A, LINE 1
SUMMARY OF DIRECT CHARITABLE ACTIVITIES

| <u>DIRECT CHARITABLE ACTIVITIES</u> | <u>EXPENSES</u> |
|--|-----------------|
| <p>THE GOAL OF MTFF IS TO EDUCATE THE PUBLIC IN AN EFFORT TO COUNTER THE MOVEMENT TO BOYCOTT, DIVEST FROM AND SANCTION THE STATE OF ISRAEL ("BDS"). OUR AUDIENCE INCLUDES THE GENERAL PUBLIC, BUT ONE AREA OF FOCUS FOR OUR WORK IS THE COLLEGE CAMPUS WHERE MTFF FUNDS EFFORTS TO EDUCATE STUDENTS, ADMINISTRATORS AND FACULTY ABOUT ISRAEL AND ABOUT THE RIGHT OF JEWISH STUDENTS UNDER EXISTING NON-DISCRIMINATION LAWS.</p> <p>OUR WORK IS DONE THROUGH OUR OWN STAFF AND PRIMARILY BY FUNDING OTHER PUBLIC CHARITIES WHOSE WORK FURTHERS OUR MISSION. MTFF ALSO FUNDS THE PRODUCTION OF CONTENT (FILM, SOCIAL MEDIA, ARTICLES AND WEBSITES) AND EVENTS ABOUT THE FOREGOING.</p> | |

STATEMENT 15
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| <u>NAME AND ADDRESS</u> | <u>DONEE RELATIONSHIP</u> | <u>FOUND- ATION STATUS</u> | <u>PURPOSE OF GRANT</u> | <u>AMOUNT</u> |
|---|-------------------------------|------------------------------------|-----------------------------|---------------|
| CHABAD ON CAMPUS INTERNATIONAL 719 EASTERN PARKWAY, UNIT 1 BROOKLYN NY 11213 | NONE | | CAMPUS EDUCATION | \$ 398,023. |
| STUDENTS SUPPORTING ISRAEL 3131 FERNBROOK LN N, STE 223 PLYMOUTH MN 55447 | NONE | | CAMPUS EDUCATION | 74,250. |

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STATEMENT 15 (CONTINUED)
 FORM 990-PF, PART XIV, LINE 3A
 RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|---|------------|
| SANTA CRUZ HILLEL 849 ALMAR AVE SUITE C PMB 254 SANTA CRUZ CA 95060 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | \$ 18,885. |
| PRAGER UNIVERSITY FOUNDATION 15021 VENTURA BLVD, STE 552 SHERMAN OAKS CA 91403 | NONE | | CAMPUS EDUCATION | 50,000. |
| HILLEL AT DAVIS & SACRAMENTO 328 A STREET DAVIS CA 95616 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 26,824. |
| ALPHA EPSILON PI FOUNDATION 8815 WESLEYAN ROAD INDIANAPLOIS IN 46268 | NONE | | CAMPUS EDUCATION | 5,006. |
| HILLEL AT MICHIGAN STATE UNIVERISTY 300 CHARLES STREET EAST LANSING MI 48823 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 34,343. |
| GAINESVILLE HILLEL INC 2020 WEST UNIVERSITY AVENUE GAINESVILLE FL 32603 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 126,358. |
| HILLEL AT MILWAUKEE 3053 NORTH STOWELL AVENUE MILWAUKEE WI 53211 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 53,912. |
| SANTA BARBARA HILLEL 781 EMBARCADERO DEL MAR ISLA VISTA CA 93117 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 112,708. |
| JEWISH FEDERATION OF METRO CHICAGO 30 SOUTH WELLS STREET CHICAGO IL 60606 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 116,956. |
| UNIVERSITY OF MICHIGAN HILLEL 1429 HILL STREET ANN ARBOR MI 48104 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 30,254. |
| JOSEPH SLIFKA CENTER-YALE 80 WALL STREET NEW HAVEN CT 06511 | NONE | | CAMPUS EDUCATION | 36,000. |

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STATEMENT 15 (CONTINUED)
 FORM 990-PF, PART XIV, LINE 3A
 RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|---|------------|
| HILLELS OF GEORGIA 735 GATEWOOD RD NE ATLANTA GA 30322 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | \$ 79,303. |
| UNIVERSITY OF SOUTHERN CALIFORNIA HILLEL 3300 S HOOVER STREET LOS ANGELES CA 90007 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 29,540. |
| HOUSTON HILLEL 1700 BISSONNET ST HOUSTON TX 77005 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 114,741. |
| CLEVELAND HILLEL 11303 EUCLID AVENUE CLEVELAND OH 44106 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 128,666. |
| HILLEL JEWISH STUDENT CENTER 1012 SOUTH MILL AVENUE TEMPE AZ 85281 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 11,148. |
| PENN STATE HILLEL PO BOX 647 STATE COLLEGE PA 16804 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 99,864. |
| B'NAI B'RITH HILLEL-BROOKLYN 2901 CAMPUS ROAD BROOKLYN NY 11210 | NONE | | CAMPUS EDUCATION | 66,290. |
| HILLEL AT BARUCH 55 LEXINGTON AVE B2-210 NEW YORK NY 10010 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 141,096. |
| MISSOURI HILLEL 1107 UNIVERSITY AVENUE COLUMBIA MO 65201 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 20,684. |
| HILLEL AT FLORIDA INTERNATIONAL 11200 SW 8TH ST, MMC PG6 STE 130 MIAMI FL 33199 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 26,465. |
| HILLEL OF SAN LUIS OBISPO BOX 88, 1 GRAND AVENUE SAN LUIS OBISPO CA 93407 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 24,098. |

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STATEMENT 15 (CONTINUED)
 FORM 990-PF, PART XIV, LINE 3A
 RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|---|------------|
| BEN & ESTHER ROSENBLUM HILLEL 7612 MOWATT LANE COLLEGE PARK MD 20740 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | \$ 24,328. |
| BOSTON UNIVERSITY HILLEL 213 BAY STATE ROAD BOSTON MA 02215 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 83,381. |
| GREATER MIAMI HILLEL FOUNDATION 1100 STANFORD DRIVE CORAL GABLES FL 33146 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 26,279. |
| HILLEL AT BRANDEIS UNIVERSITY 415 SOUTH STREET, MS 205 WALTHAM MA 02454 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 27,211. |
| HILLEL AT UCLA 574 HILGARD AVENUE LOS ANGELES CA 90024 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 127,322. |
| HILLEL AT UMASS AMHERST 388 NORTH PLEASANT STREET AMHERST MA 01002 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 22,204. |
| HILLEL AT VA TECH 710 TOMS CREEK ROAD BLACKSBURG VA 24060 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 128,820. |
| HILLEL AT WASHINGTON UNIVERSITY 6300 FORSYTH BLVD ST LOUIS MO 63105 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 115,338. |
| HILLEL BC SOCIETY 6145 STUDENT UNION BLVD VANCOUVER NORTH AMERICA V6T 1Z1 CANADA | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 19,214. |
| HILLEL FOUNDATION FOR JEWISH LIFE 4745 17TH AVENUE NORTHEAST SEATTLE WA 98105 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 18,173. |
| HILL OF BROWARD AND PALM BEACH INC. 777 GLADES ROAD, BUILDING LY-3A BOCA RATON FL 33431 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 48,377. |

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STATEMENT 15 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| <u>NAME AND ADDRESS</u> | <u>DONEE RELATIONSHIP</u> | <u>FOUND- ATION STATUS</u> | <u>PURPOSE OF GRANT</u> | <u>AMOUNT</u> |
|---|-------------------------------|------------------------------------|---|---------------|
| HILLEL OF METROPOLITAN DETROIT 5221 GULLEN MALL 667 STUDENT CENTER DETROIT MI 48202 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | \$ 21,711. |
| HILLEL ONTARIO 36 HARBORD STREET TORONTO NORTH AMERICA M5S 1G2 CANADA | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 193,428. |
| HUNTER COLLEGE HILLEL 695 PARK AVENUE #1317A NEW YORK NY 10065 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 42,729. |
| JEWISH CAMPUS ACTIVITIES BOARD 215 SOUTH 39TH STREET PHILADELPHIA PA 19104 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 43,370. |
| NORTHEASTERN UNIVERSITY HILLEL 70 SAINT STEPHEN STREET BOSTON MA 02115 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 32,547. |
| OHIO STATE HILLEL 46 EAST 16TH STREET COLUMBUS OH 43201 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 34,752. |
| SYRACUSE HILLEL INC 102 WALNUT PLACE SYRACUSE NY 13210 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 27,203. |
| TAMID 1100 WAYNE AVENUE SUITE 850 SILVER SPRINGS MD 20910 | NONE | | CAMPUS EDUCATION | 4,211. |
| TEMPLE HILLEL 1441 WEST NORRIS STREET PHILADELPHIA PA 19121 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 15,043. |
| VANDERBILT HILLEL 2421 VANDERBILT PLACE NASHVILLE TN 37212 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 18,705. |
| AMERICAN FRIEDS OF IDC 142 W 57TH STREET, 11TH FLOOR NEW YORK NY 10019 | NONE | | CAMPUS EDUCATION | 72,800. |

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STATEMENT 15 (CONTINUED)
 FORM 990-PF, PART XIV, LINE 3A
 RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|---|------------|
| AUSTRALASIAN UNION OF JEWISH STUDENTS SHALOM COLLEGE BARKER STREET KENSINGTON EUROPE 3052 UNITED KINGDOM | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | \$ 24,067. |
| AUSTRIAN UNION OF JEWISH STUDENTS TEMPELGASSE 5 VIENNA EUROPE 1020 AUSTRIA | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 19,280. |
| CENTER FOR JEWISH CAMPUS LIFE 565 MAYFIELD AVENUE STANFORD CA 94305 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 22,888. |
| CU BOULDER HILLEL FOUNDATION 2795 COLORADO AVENUE BOULDER CO 80302 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 166,997. |
| HILLEL 818 17729 PLUMMER STREET NORTHRIDGE CA 91325 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 21,730. |
| HILLEL THE FOUNDATION FOR JEWISH LIFE 2615 CLIFTON AVENUE CINCINNATI OH 45220 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 29,540. |
| JEWISH FEDERATION OF OTTAWA 21 NADOLNY SACHS PRIVATE OTTAWA NORTH AMERICA K2A 1R9 CANADA | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 16,715. |
| KRISTOL CENTER FOR JEWISH LIFE 47 WEST DELAWARE AVENUE NEWARK DE 19711 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 53,306. |
| SOUTH AFRICAN UNION OF JEWISH STUDENTS 2 ELARY STREET, RAEDENE JOHANNESBURG AFRICA 2192 SOUTH AFRICA | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 38,546. |
| UNION DES ESTUDIANTS JUIF DE FRANCE 23 RUE DES MARTYRS PARIS EUROPE 75009 FRANCE | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 83,675. |

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STATEMENT 15 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| <u>NAME AND ADDRESS</u> | <u>DONEE RELATIONSHIP</u> | <u>FOUND- ATION STATUS</u> | <u>PURPOSE OF GRANT</u> | <u>AMOUNT</u> |
|--|-------------------------------|------------------------------------|---|---------------|
| AMERICAN UNIVERSITY HILLEL 4400 MASSACHUSETTS AVENUE NORTHWEST WASHINGTON DC 20016 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | \$ 24,743. |
| HILLEL AT BINGHAMTON INC 4400STAL PKWY E, UUW208B BINGHAMTON NY 13902 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 138,075. |
| HILLEL AT FSU FOUNDATION INC 834 WEST SAINT AUGUSTINE STREET #2 TALLAHASSEE FL 32304 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 32,873. |
| HILLEL AT GEORGE MASON UNIVERSITY 4400 UNIVERSITY DRIVE, MSN 2C7 FAIRFAX VA 22030 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 27,222. |
| HILLEL AT GEORGE WASHINGTON UNIVERSITY 2101 F STREET NORTHWEST WASHINGTON DC 20052 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 161,305. |
| HILLEL FOUNDATION AT INDIANA UNIVERSITY 730 EAST THIRD STREET BLOOMINGTON IN 47401 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 120,282. |
| HILLEL OF SAN DIEGO 5717 LINDO PASEO SAN DIEGO CA 92115 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 276,300. |
| ISRAELI-AMERICAN COUNCIL 5900 CANOGA AVENUE WOODLAND HILLS CA 91367 | NONE | | CAMPUS EDUCATION | 4,640. |
| JEWISH FEDERATION OF LAS VEGAS 9510 SAHARA AVENUE, SUITE 225 LAS VEGAS NV 89117 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 7,374. |
| MTF LEADERSHIP INSTITUTE POST OFFICE BOX 19698 LAS VEGAS NV 89132 | RELATED ORGANIZATION | | CAMPUS EDUCATION | 50,000. |

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STATEMENT 15 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| <u>NAME AND ADDRESS</u> | <u>DONEE RELATIONSHIP</u> | <u>FOUND- ATION STATUS</u> | <u>PURPOSE OF GRANT</u> | <u>AMOUNT</u> |
|---|-------------------------------|------------------------------------|---|---------------|
| NORTH CAROLINA HILLEL FOUNDATION 210 WEST CAMERON AVENUE CHAPEL HILL NC 27516 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | \$ 121,502. |
| UNIVERISTY OF ARIZONA HILLEL FOUNDATION 1245 EAST SECOND STREET TUCSON AZ 85719 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 13,826. |
| UNIVERISTY OF WISCONSIN HILLEL 611 LANGDON STREET MADISON WI 53703 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 122,000. |
| HILLEL JEWISH STUDENT CENTER OF TAMPA 13101 USF SYCAMORE DRIVE TAMPA FL 33620 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 4,975. |
| CENTRAL FLORIDA HILLEL INC 3925 LOCKWOOD BLVD OVIEDO FL 32765 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 39,321. |
| HILLEL AT KENT STATE 613 E SUMMIT ST KENT OH 44240 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 242,809. |
| HILLEL FOUNDATION OF ORANGE COUNTY 1 FEDERATION WAY, STE 205 IRVINE CA 92603 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 113,717. |
| HILLEL AT THE UNIVERSITY OF VERMONT 80 COLCHESTER AVE BURLINGTON VT 05401 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 24,295. |
| B'NAI B'RITH HILLEL FOUNDATION INC ANABERL TAYLOR HALL 548 COLLEGE AVE CORNELL NY 14850 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 48,860. |
| BRODY JEWISH CENTER 1824 UNIVERSITY CIRCLE CHARLOTTESVILLE VA 22903 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 56,355. |
| TEXAS HILLEL FOUNDATION 2105 SAN ANTONIO ST AUSTIN TX 78705 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 100,414. |

MACCABEE TASK FORCE FOUNDATION

47-4908810

STATEMENT 15 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| <u>NAME AND ADDRESS</u> | <u>DONEE RELATIONSHIP</u> | <u>FOUND- ATION STATUS</u> | <u>PURPOSE OF GRANT</u> | <u>AMOUNT</u> |
|--|-------------------------------|------------------------------------|---|----------------------|
| OREGON HILLEL 1059 HILYARD ST EUGENE OR 97401 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | \$ 136,469. |
| HILLEL FOUNDATION OF NEW ORLEANS 912 BROADWAY ST NEW ORLEANS LA 70118 | NONE | | CAMPUS EDUCATION AND TRIP TO ISRAEL | 122,706. |
| | | | TOTAL | <u>\$ 5,439,367.</u> |

**BALANCE SHEET
OTHER NOTES AND LOANS RECEIVABLE [O]**

| | | |
|---------------------------|-------|--------------------|
| RETURNED GRANT FUNDS..... | \$ | 100,000. |
| OTHER RECEIVABLES..... | | 5,115. |
| | TOTAL | <u>\$ 105,115.</u> |