PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 05-60-54
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning APR 1, 2020 and ending MAR 31, 2021

B Check if applicable:

[ ] Address change
[ ] Name change
[ ] Initial return
[ ] Final return/termination of return
[ ] Amended return
[ ] Application pending

C Name of organization
FJC
Doing business as FJC - A FOUNDATION OF PHILANTHRO

D Employer identification number
13-3848582

E Telephone number
212-714-0001

G Gross receipts $ 111,413,356

H Check if this a group return for subordinates?
[ ] Yes [X] No
If "No," attach a list. See instructions
H(c) Group exemption number

J Website: WWW.FJC.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other [ ]

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO MAXIMIZE THE IMPACT OF CHARITABLE DOLLARS; CREATE INNOVATIVE AND CUSTOMIZED SOLUTIONS; AND

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VII, line 1a)
4 Number of independent voting members of the governing body (Part VI, line 1b)
5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)
6 Total number of volunteers (estimate if necessary)
7a Total unrelated business revenue from Part VIII, column (C), line 12
7b Net unrelated business taxable income from Form 990-T, Part I, line 11

Activities & Governance

8 Contributions and grants (Part VIII, line 1h)
9 Program service revenue (Part VIII, line 2g)
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11a)
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Revenue

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)
14 Benefits paid to or for members (Part IX, column (A), line 4)
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)
16a Professional fundraising fees (Part IX, column (A), line 11a)
16b Total fundraising expenses (Part IX, column (D), line 25) ▶ 93,846.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24a)
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)
19 Revenue less expenses. Subtract line 18 from line 12

Expenses

20 Total assets (Part X, line 16)
21 Total liabilities (Part X, line 26)
22 Net assets or fund balances. Subtract line 21 from line 20

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Signature of officer

LORIN SILVERMAN, PRESIDENT

Date

Print/Type preparer's name
MAGDALENA M. CZERNIAWSKI
Preparer's signature
MAGDALENA M. CZERNIA
Date
02/15/22
Check [ ] self-employed
PTIN P00535099

Preparer's name
CBIZ MARKS PANSTH LLC
Firm's EIN 87-3707167

Use Only
Firm's address 685 THIRD AVENUE
NEW YORK, NY 10017
Phone no. 212-503-8800

May the IRS discuss this return with the preparer shown above? See instructions
[ ] Yes [X] No

Form 990 (2020)
Part III  Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
   (I) TO INCREASE AND MAXIMIZE THE IMPACT OF CHARITABLE DOLLARS; (II) TO CREATE INNOVATIVE AND CUSTOMIZED PHILANTHROPIC SOLUTIONS; (III) TO RESPOND EFFECTIVELY TO THE NEEDS AND INTERESTS OF DONORS, NOT-FOR-PROFIT BORROWERS AND OTHER CHARITABLE AGENCIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [x] No
   If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [x] No
   If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
   Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Exenses $ 22,959,695. Including grants of $ 22,079,785. ) (Revenu $ 258,912. )
   DONOR ADVISED FUNDS & SPECIALIZED ACCOUNTS. FJC PROVIDES A BOUTIQUE, CUSTOMIZABLE SERVICE TO ITS ACCOUNT HOLDERS, COLLABORATING WITH IMAGINATIVE DONORS WHO SEEK MORE CREATIVE APPROACHES. WHILE MOST ACCOUNT HOLDERS AT FJC USE DONOR ADVISED FUND (DAF) ACCOUNTS FAIRLY CONVENTIONALLY (RECOMMENDING GRANTS TO THEIR FAVORITE CHARITIES), WE ACCOMMODATE DONORS WHO WANT TO DEPLOY FUNDS AS LOANS, RECOVERABLE GRANTS, OR IMPACT INVESTMENTS. WE HAVE HOSTED FUNDER COLLABORATIVES, SCHOLARSHIP AND AWARD PROGRAMS, AND OTHER VARIATIONS ON PHILANTHROPIC ACCOUNTS THAT MEET THE NEEDS OF BOTH DONORS AND AN EVOLVING NONPROFIT SECTOR.

4b (Code: ) (Exenses $ 7,485,640. Including grants of $ 1,861,819. ) (Revenu $ 258,912. )
   FISCAL SPONSORSHIP. FJC INCUBATES A WIDE RANGE OF NONPROFIT ORGANIZATIONS AND PROJECTS THAT HAVE NOT RECEIVED THEIR 501(C)(3) STATUS. OUR SCALED PLATFORM PROVIDES OPERATIONAL EFFICIENCIES TO PARTICIPANTS, ALLOWING THEM TO RECEIVE TAX DEDUCTIBLE CONTRIBUTIONS AND DISTRIBUTE FUNDS AS GRANTS OR VENDOR PAYMENTS. WHILE SOME ORGANIZATIONS "GRADUATE" FROM OUR FISCAL SPONSORSHIP AND RECEIVE THEIR OWN 501(C)(S) DESIGNATION, OTHERS PREFER TO STAY WITH FJC TO TAKE ADVANTAGE OF OUR COST EFFECTIVE SERVICES. THE PROGRAM IS FLEXIBLE REGARDING MISSION, SERVING ORGANIZATIONS WHO FOCUS ON ARTS, EDUCATION, SOCIAL SERVICES, HEALTH, RELIGION, THE ENVIRONMENT, AND MORE.

4c (Code: ) (Exenses $ 353,841. Including grants of $ ) (Revenu $ 2,149,083. )
   AGENCY LOAN FUND. A BESPOKE IMPACT INVESTMENT OFFERED TO OUR DONORS AS PART OF OUR STANDARD INVESTMENT MENU, FJC'S AGENCY LOAN FUND (ALF) ALLOWS DONORS THE OPPORTUNITY TO INVEST A PORTION OF THEIR ACCOUNTS IN LOANS TO A DIVERSIFIED POOL OF NONPROFIT ORGANIZATIONS. FJC STAFF ORIGINATE AND UNDERWRITE THESE LOANS. INTEREST AND PRINCIPAL PAYMENTS FROM THE LOANS GROW THE ACCOUNTS OF PARTICIPATING DONORS (TYPICALLY BETWEEN 3-4% PER ANNUM). IN ADDITION TO FJC'S RIGOROUS CREDIT STANDARDS, CREDIT ENHANCEMENT ON THE POOL PROTECTS DONORS FROM PRINCIPAL LOSSES. SINCE INCEPTION, FJC HAS DEPLOYED OVER $370 MILLION IN LOANS THROUGH ALP. FJC CURRENTLY HAS $28.6 MILLION IN LOANS OUTSTANDING WITH 22 NONPROFIT BORROWERS.

4d Other program services (Describe on Schedule O.)

4e Total program service expenses $ 30,799,176.
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Part IV Checklist of Required Schedules (continued)

22 Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a

24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I

25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):

28a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV

28b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV

28c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

1a Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable

1b Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable

1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return ................................................. 2a 12
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X

Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)

3a Did the organization have unrelated business gross income of $1,000 or more during the year? 3a X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b X

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X
b If "Yes," enter the name of the foreign country


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X
c If "Yes" to line 5a or 5b, did the organization file Form 8888-T? 5c

6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b

7 Organizations that may receive deductible contributions under section 170(c).
   a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? 7a X
   b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b
   c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X
   d If "Yes," indicate the number of Forms 8282 filed during the year 7d
   e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X
   f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X
   g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g
   h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8

9 Sponsoring organizations maintaining donor advised funds.
   a Did the sponsoring organization make any taxable distributions under section 4966? 9a
   b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b

10 Section 501(c)(7) organizations. Enter:
   a Initiation fees and capital contributions included on Part VIII, line 12 .................................................... 10a
   b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b

11 Section 501(c)(12) organizations. Enter:
   a Gross income from members or shareholders ........................................................................................................... 11a
   b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) ........................................................................................................... 11b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

13 Section 501(c)(29) qualified nonprofit health insurance issuers.
   a Is the organization licensed to issue qualified health plans in more than one state? 13a
      Note: See the instructions for additional information the organization must report on Schedule O.
   b Enter the amount of reserves the organization is required to maintain in the states in which the organization is licensed to issue qualified health plans ........................................................................................................... 13b
   c Enter the amount of reserves on hand ................................................................................................................................. 13c

14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b

15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X

16a Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16a
b If "Yes," complete Form 4720, Schedule O.
Part VI | Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.

b Enter the number of voting members included on line 1a, above, who are independent

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization’s assets?

6 Did the organization have members or stockholders?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body

b Each committee with authority to act on behalf of the governing body

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address? If "Yes," provide the names and addresses on Schedule O

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization’s exempt purposes?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

a The organization’s CEO, Executive Director, or top management official

b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization’s exempt status with respect to such arrangements?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NY, AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

   [ ] Own website   [ ] Another’s website   [x] Upon request   [ ] Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization’s books and records ▶

   Regina Rodriguez, CFO   212-714-0001

   31 West 34th Street, Suite 8026, New York, NY 10001

SEE SCHEDULE O FOR FULL LIST OF STATES
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization’s tax year.

- List all of the organization’s **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s **current** key employees, if any. See instructions for definition of “key employee.”
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization’s **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
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<td>(7) <strong>GARY FINGER</strong></td>
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<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) <strong>HENRY BUBEL</strong></td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SECRETARY</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) <strong>JIM ROTHKOFF</strong></td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>(10) <strong>JONATHAN GOLD</strong></td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) <strong>LORIN SILVERMAN</strong></td>
<td>10.00</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>PRESIDENT &amp; TREASURER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) <strong>NEAL MYERBERG</strong></td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13) <strong>RONNA BROWN</strong></td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
<th>(E)</th>
<th>(F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and title</td>
<td>Average hours per week (list any hours for related organizations below line)</td>
<td>Position (do not check more than one box, unless person is both an officer and a director/trustee)</td>
<td>Reportable compensation from the organization (W-2/1099-MISC)</td>
<td>Reportable compensation from related organizations (W-2/1099-MISC)</td>
<td>Estimated amount of other compensation from the organization in related organizations</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Individual trustee or director</th>
<th>Individual trustee or director</th>
<th>Individual trustee or director</th>
<th>Individual trustee or director</th>
<th>Individual trustee or director</th>
<th>Individual trustee or director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
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<tr>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
</tr>
<tr>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
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<td>Individual trustee or director</td>
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<tr>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
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<td>Individual trustee or director</td>
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<td>Individual trustee or director</td>
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<tr>
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<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
<td>Individual trustee or director</td>
</tr>
</tbody>
</table>

1b Subtotal

- 919,351
- 0
- 175,061

c Total from continuation sheets to Part VII, Section A

- 0
- 0
- 0

d Total (add lines 1b and 1c)

- 919,351
- 0
- 175,061

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>X</td>
</tr>
</tbody>
</table>

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>X</td>
</tr>
</tbody>
</table>

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>X</td>
</tr>
</tbody>
</table>

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>X</td>
</tr>
</tbody>
</table>

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and business address</td>
<td>Description of services</td>
<td>Compensation</td>
</tr>
<tr>
<td>CAMBRIDGE HEATH VENTURES</td>
<td>ADVISORY</td>
<td>110,250</td>
</tr>
<tr>
<td>FIDUCIARY TECHNOLOGY PARTNERS LLC</td>
<td>SOFTWARE</td>
<td>102,000</td>
</tr>
<tr>
<td>177 BROAD ST, STANFORD, CT 06901</td>
<td>SUBSCRIPTION AND MAI</td>
<td>102,000</td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>
## Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>Total revenue</th>
<th>Related or exempt function revenue</th>
<th>Unrelated business revenue</th>
<th>Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Membership dues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Fundraising events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Related organizations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>31,412,976.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Noncash contributions included in lines 1a-1f</td>
<td>10,784,050.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>h Total, Add lines 1a-1f</td>
<td></td>
<td></td>
<td>31,412,976.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>a LOAN INTEREST</td>
<td>522291</td>
<td>2,149,083.</td>
<td></td>
<td>2,149,083.</td>
</tr>
<tr>
<td></td>
<td>b MANAGEMENT FEES</td>
<td>523920</td>
<td>258,912.</td>
<td></td>
<td>258,912.</td>
</tr>
<tr>
<td></td>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Total, Add lines 2a-2f</td>
<td></td>
<td></td>
<td></td>
<td>2,407,995.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Investment income (including dividends, interest, and other similar amounts)</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
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<td></td>
<td></td>
<td>3,435,401.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross rents</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
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<td></td>
<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross rent from sales of assets other than inventory</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net gain or (loss)</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross income from fundraising events (not including $ of contributions reported on line 1c)</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td></td>
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<td></td>
<td>3,435,401.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Net income or (loss) from fundraising events</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross income from gaming activities</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
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<td></td>
<td></td>
<td>3,435,401.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Net income or (loss) from gaming activities</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross sales of inventory, less returns and allowances</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
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<td></td>
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<td>3,435,401.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Net income or (loss) from sales of inventory</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
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<td></td>
<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total revenue, See instructions</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
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<td></td>
<td>3,435,401.</td>
</tr>
</tbody>
</table>
### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Column (A) Total Expenses</th>
<th>Column (B) Program Service Expenses</th>
<th>Column (C) Management and General Expenses</th>
<th>Column (D) Fundraising Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>23,467,602</td>
<td>23,467,602</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>5,250</td>
<td>5,250</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td>468,753</td>
<td>468,753</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>925,064</td>
<td>434,780</td>
<td>444,030</td>
<td>46,254</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>447,124</td>
<td>232,599</td>
<td>210,171</td>
<td>4,354</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>10,318</td>
<td>3,564</td>
<td>6,645</td>
<td>109</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>162,484</td>
<td>65,823</td>
<td>94,275</td>
<td>2,386</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>81,643</td>
<td>35,319</td>
<td>43,828</td>
<td>2,496</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Legal</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Accounting</td>
<td>86,365</td>
<td></td>
<td>86,365</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f Investment management fees</td>
<td>553,233</td>
<td>477,598</td>
<td>75,635</td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>75,240</td>
<td></td>
<td>39,860</td>
<td>35,380</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>5,735</td>
<td></td>
<td>2,868</td>
<td>2,867</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>68,981</td>
<td>39,511</td>
<td>29,470</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>138,625</td>
<td>110,299</td>
<td>28,326</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>135,799</td>
<td>108,641</td>
<td>27,158</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>4,444</td>
<td></td>
<td></td>
<td>4,444</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>1,786</td>
<td></td>
<td>1,786</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>31,537</td>
<td>12,904</td>
<td>18,633</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Other expenses, Itemize expenses not covered above (List miscellaneous expenses on line 24e, If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a FISCAL-SPONSORSHIP</td>
<td>5,320,089</td>
<td>5,320,089</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b FOREIGN DIVIDENDS TAX</td>
<td>30,190</td>
<td>16,444</td>
<td>13,746</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c STATE FILING TAX</td>
<td>10,238</td>
<td></td>
<td>10,238</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e All other expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>32,030,500</td>
<td>30,799,176</td>
<td>1,137,478</td>
<td>93,846</td>
</tr>
</tbody>
</table>

**Note:** Check here ▶ if following SOP 98-2 (ASC 958-720)
## Balance Sheet

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td>3,182,458.</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>72,795,723.</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>9</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>36,901.</td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>1,786.</td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td>135,010,479.</td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td>36,536,255.</td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td>35,937,788.</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td>14</td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>3,601,225.</td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>287,513,370.</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>115,730.</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>18</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>19</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>20</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>21</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td>22</td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>24</td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>35,024,426.</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>35,140,156.</td>
</tr>
</tbody>
</table>

### Organizations that follow FASB ASC 958, check here ▶ X

- Net assets without donor restrictions
  - 248,856,840. | 27 | 316,593,837. |
- Net assets with donor restrictions
  - 3,516,374. | 28 | 3,123,144. |

### Organizations that do not follow FASB ASC 958, check here ▶ □

- Net assets or fund balances
  - 252,373,214. | 32 | 319,716,981. |
- Total liabilities and net assets/fund balances
  - 287,513,370. | 33 | 362,350,786. |
**Part XI | Reconciliation of Net Assets**

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>9</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>10</td>
</tr>
</tbody>
</table>

**Part XII | Financial Statements and Reporting**

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Ma Cash</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Accrual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>&quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ma Separate basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Consolidated basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>&quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ma Separate basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Consolidated basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes&quot; to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2020)
Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Name of the organization: FJC

Employer identification number: 13-3848582

Part I  Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

9 ☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university.

10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

b ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

c ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

d ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f ☐ Enter the number of supported organizations

Provide the following information about the supported organization(s):

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
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</tr>
</tbody>
</table>

Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
Part II  Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unsual grants.&quot;)</td>
<td>34204880.35119487.32701019.33006930.31412976.166445292</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3  The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4  Total. Add lines 1 through 3</td>
<td>34204880.35119487.32701019.33006930.31412976.166445292</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6  Public support. Subtract line 5 from line 4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>16183292.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>150262000</td>
</tr>
</tbody>
</table>

Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7  Amounts from line 4</td>
<td>34204880.35119487.32701019.33006930.31412976.166445292</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8  Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>2728136.4278595.3615931.4330553.3435401.18388616</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9  Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11  Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>184833908</td>
</tr>
<tr>
<td>12  Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13  First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14  Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15  Public support percentage from 2019 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 <strong>Total. Add lines 1 through 5</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 <strong>Public support. (Subtract line 7c from line 6)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 <strong>Total support. (Add lines 9, 10c, 11, and 12)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <strong>stop here</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

| (Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) | 15% |
| Public support percentage from 2019 Schedule A, Part III, line 15 | 16% |

#### Section D. Computation of Investment Income Percentage

| (Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) | 17% |
| Investment income percentage from 2019 Schedule A, Part III, line 17 | 18% |

**19a 33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

**19b 33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions
### Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If &quot;No,&quot; describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If &quot;Yes,&quot; explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If &quot;Yes,&quot; answer lines 3b and 3c below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If &quot;Yes,&quot; describe in Part VI when and how the organization made the determination.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If &quot;Yes,&quot; explain in Part VI what controls the organization put in place to ensure such use.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a Was any supported organization not organized in the United States (&quot;foreign supported organization&quot;)? If &quot;Yes,&quot; and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If &quot;Yes,&quot; describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If &quot;Yes,&quot; explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a Did the organization add, substitute, or remove any supported organizations during the tax year? If &quot;Yes,&quot; answer lines 5b and 5c below if applicable. Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Substitutions only. Was the substitution the result of an event beyond the organization's control?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If &quot;Yes,&quot; complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If &quot;Yes,&quot; complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If &quot;Yes,&quot; answer line 10b below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part IV Supporting Organizations (continued)

11 Has the organization accepted a gift or contribution from any of the following persons?
   a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and
c 11c, below, the governing body of a supported organization?  
      11a
   b A family member of a person described in line 11a above?
      11b
   c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide
detail in Part VI.
      11c

Section B. Type I Supporting Organizations

1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or
   more supported organizations have the power to regularly appoint or elect at least a majority of the organization’s officers,
directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)
effectively operated, supervised, or controlled the organization’s activities. If the organization had more than one supported
organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
   1

2 Did the organization operate for the benefit of any supported organization other than the supported
organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,
supervised, or controlled the supporting organization.
   2

Section C. Type II Supporting Organizations

1 Were a majority of the organization’s directors or trustees during the tax year also a majority of the directors
or trustees of each of the organization’s supported organization(s)? If "No," describe in Part VI how control
or management of the supporting organization was vested in the same persons that controlled or managed
the supported organization(s).
   1

Section D. All Type III Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the
organization’s tax year, (i) a written notice describing the type and amount of support provided during the prior tax
year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the
organization’s governing documents in effect on the date of notification, to the extent not previously provided?
   1

2 Were any of the organization’s officers, directors, or trustees either (i) appointed or elected by the supported
organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how
the organization maintained a close and continuous working relationship with the supported organization(s).
   2

3 By reason of the relationship described in line 2, above, did the organization’s supported organizations have a
significant voice in the organization’s investment policies and in directing the use of the organization’s
income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization’s
supported organizations played in this regard.
   3

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
   a The organization satisfied the Activities Test. Complete line 2 below.
   b The organization is the parent of each of its supported organizations. Complete line 3 below.
   c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.
   a Did substantially all of the organization’s activities during the tax year directly further the exempt purposes of
the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify
those supported organizations and explain how these activities directly furthered their exempt purposes,
how the organization was responsive to those supported organizations, and how the organization determined
that these activities constituted substantially all of its activities.
   b Did the activities described in line 2a, above, constitute activities that, but for the organization’s involvement,
one or more of the organization’s supported organization(s) would have been engaged in? If "Yes," explain in
Part VI the reasons for the organization’s position that its supported organization(s) would have engaged in
these activities but for the organization’s involvement.
   2

3 Parent of Supported Organizations. Answer lines 3a and 3b below.
   a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or
trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
   b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each
of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.
# Schedule A (Form 990 or 990-EZ) 2020

## Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1. Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.

   All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td>Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td>Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by 0.035.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 0.85 of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td>Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
</tbody>
</table>

7. Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).
## Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

### Section D - Distributions

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td><strong>Total annual distributions.</strong> Add lines 1 through 6.</td>
<td><strong>7</strong></td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
<td><strong>8</strong></td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2020 from Section C, line 6</td>
<td><strong>9</strong></td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
<td><strong>10</strong></td>
</tr>
</tbody>
</table>

### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2020</th>
<th>(iii) Distributable Amount for 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2020 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2020</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>From 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>From 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td><strong>Total</strong> of lines 3a through 3e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2020 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2015 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from line 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2020 from Section D, line 7:</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2020 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder, Subtract lines 4a and 4b from line 4,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2020, if any, Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2020, Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Excess distributions carryover to 2021.</strong> Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2020</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6; 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.

(See instructions.)
2020

Name of the organization: FJC

Employer identification number: 13-3848582

Organization type (check one):

[ ] 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

[ ] 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 or 990-EZ), 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).
## Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$3,400,364</td>
<td>Person ☒ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$2,037,755</td>
<td>Person ☐ Payroll ☐ Noncash ☒</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$1,550,000</td>
<td>Person ☒ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$1,010,760</td>
<td>Person ☐ Payroll ☐ Noncash ☒</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>$1,000,000</td>
<td>Person ☒ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>$755,449</td>
<td>Person ☐ Payroll ☐ Noncash ☒</td>
</tr>
</tbody>
</table>
### Part II  Noncash Property

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

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>PUBLICLY TRADED SECURITIES</td>
<td>$ 2,037,755.</td>
<td>03/31/20</td>
</tr>
<tr>
<td>4</td>
<td>PUBLICLY TRADED SECURITIES</td>
<td>$ 1,010,760.</td>
<td>11/12/20</td>
</tr>
<tr>
<td>6</td>
<td>PUBLICLY TRADED SECURITIES</td>
<td>$  755,449.</td>
<td>12/16/20</td>
</tr>
<tr>
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<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Purpose of gift</td>
<td>(c) Use of gift</td>
<td>(d) Description of how gift is held</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------------------</td>
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<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee’s name, address, and ZIP + 4

Relationship of transferor to transferee
Name of the organization: FJC
Employer identification number: 13-3848582

Part I  Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td>760</td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td>22,345,422</td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td>20,680,621</td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value of end of year</td>
<td>218,061,804</td>
</tr>
</tbody>
</table>

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [X Yes  No]

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X Yes  No]

Part II  Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply):

   - Preservation of land for public use (for example, recreation or education)
   - Preservation of a historically important land area
   - Protection of natural habitat
   - Preservation of a certified historic structure
   - Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year:

   a Total number of conservation easements [ ] Held at the End of the Tax Year
   b Total acreage restricted by conservation easements
   c Number of conservation easements on a certified historic structure included in (a)
   d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year [ ]

4 Number of states where property subject to conservation easement is located [ ]

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements? [X Yes  No]

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year [ ]

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year [ ]

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [X Yes  No]

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

   b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

      (i) Revenue included on Form 990, Part VIII, line 1 [ ]
      (ii) Assets included in Form 990, Part X [ ]

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

032051 12-01-20
Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
   a  □ Public exhibition         d  □ Loan or exchange program
   b  □ Scholarly research       e  □ Other
   c  □ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? □ Yes  □ No

Part IV  Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  □ Yes  □ No

   b If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? □ Yes  □ No

   b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

Part V  Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

1a Beginning of year balance ................................................................. 22,769,585, 22,331,397, 21,563,089, 19,826,630, 17,412,457.

   b Contributions ...................................................................................... 2,499,754, 104,555, 10,362, 181,444, 1,042,843.

   c Net investment earnings, gains, and losses .............................................. 5,944,595, -665,398, 600,541, 1,578,792, 1,399,367.

   d Grants or scholarships ........................................................................... 33,000, 14,300, 25,000.

   e Other expenditures for facilities and programs ...........................................

   f Administrative expenses ........................................................................ 9,969, 9,593, 9,477, 3,037.

   g End of year balance ........................................................................... 30,204,934, 21,760,585, 22,331,397, 21,563,089, 19,826,630.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   a  Board designated or quasi-endowment ▶ 100 %
   b  Permanent endowment ▶ %
   c  Term endowment ▶ %

   The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) Unrelated organizations .....................................................................
   (ii) Related organizations ......................................................................

   b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? □ Yes  □ No

   c If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? □ Yes  □ No

3b

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI  Land, Buildings, and Equipment.

   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td>36,901.</td>
<td>1,786.</td>
<td>35,115.</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 35,115.

Schedule D (Form 990) 2020

032052 12-01-20
### Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A) NON-EXCHANGE TRADED</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B) SECURITIES</td>
<td>52,053,364</td>
<td>END-OF-YEAR MARKET VALUE</td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
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<td>(G)</td>
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<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total:</strong> ([Col. (b)] must equal Form 990, Part X, col. (B) line 12)</td>
<td>52,053,364</td>
<td></td>
</tr>
</tbody>
</table>

### Part VIII Investments - Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) LOANS TO NON-PROFIT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) ORGANIZATIONS</td>
<td>41,318,473</td>
<td>END-OF-YEAR MARKET VALUE</td>
</tr>
<tr>
<td>(3) ACCRUED INTEREST</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) RECEIVABLE FROM LOANS</td>
<td>294,202</td>
<td>END-OF-YEAR MARKET VALUE</td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
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<td>(8)</td>
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<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total:</strong> ([Col. (b)] must equal Form 990, Part X, col. (B) line 13)</td>
<td>41,612,675</td>
<td></td>
</tr>
</tbody>
</table>

### Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<tr>
<td>(2)</td>
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<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td><strong>Total:</strong> ([Column (b)] must equal Form 990, Part X, col. (B) line 15)</td>
<td></td>
</tr>
</tbody>
</table>

### Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability | (b) Book value | 42,491,281.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. [X]
Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
</tr>
<tr>
<td></td>
<td>a Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td></td>
<td>b Donated services and use of facilities</td>
</tr>
<tr>
<td></td>
<td>c Recoveries of prior year grants</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)</td>
</tr>
</tbody>
</table>

Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
</tr>
<tr>
<td></td>
<td>a Donated services and use of facilities</td>
</tr>
<tr>
<td></td>
<td>b Prior year adjustments</td>
</tr>
<tr>
<td></td>
<td>c Other losses</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
</tr>
</tbody>
</table>

Part XIII | Supplemental Information.

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

PART V, LINE 4:

ASSETS HELD FOR OTHERS ARE FUNDS RECEIVED FROM NOT-FOR-PROFIT ORGANIZATIONS, SOME OF WHICH HAVE TRANSFERRED FUNDS TO FJC FOR THE PURPOSE OF INVESTING IN FJC'S AGENCY LOAN FUND WHICH IS AVAILABLE TO PROVIDE SECURED INTEREST BEARING LOANS TO CHARITABLE ORGANIZATIONS. THESE FUNDS CAN BE REDEEMED BY THE PARTICIPANTS IN ACCORDANCE WITH FJC'S POLICIES. FJC DOES NOT HAVE VARIANCE POWER OVER THE USE OF THESE ASSETS. FJC Follows GUIDANCE THAT ESTABLISHED CRITERIA THAN AN INDIVIDUAL TAX POSITION MUST MEET FOR SOME OR ALL OF THE BENEFITS OF THAT POSITION TO BE RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS.

PART X, LINE 2:

032054 12-01-20
FJC HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2021.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF BENEFICIAL INTEREST IN THIRD-PARTY TRUSTS  -201,251.
FOREIGN DIVIDEND TAX  -30,190.
TOTAL TO SCHEDULE D, PART XI, LINE 2D  -231,441.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

FOREIGN DIVIDEND TAX  30,190.
**FJC**

**Part I | General Information on Activities Outside the United States**

Complete if the organization answered “Yes” on Form 990, Part IV, line 14b.

1. **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? □ Yes □ No

2. **For grantmakers.** Describe in Part V the organization’s procedures for monitoring the use of its grants and other assistance outside the United States.

3. **Activities per Region.** (The following Part I line 3 table can be duplicated if additional space is needed.)

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in the region</th>
<th>(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>(f) Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA &amp; BARBUDA, ARUBA, BAHAMAS,</td>
<td>0</td>
<td>0</td>
<td>INVESTMENT</td>
<td>GENERAL OPERATIONS</td>
<td>28,816,409.</td>
</tr>
<tr>
<td>EUROPE (INCLUDING ICELAND &amp; GREENLAND) - ALBANIA, ANDORRA,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AUSTRIA, BELGIUM</td>
<td>0</td>
<td>0</td>
<td>GRANTMAKING</td>
<td>GENERAL OPERATIONS</td>
<td>396,000.</td>
</tr>
<tr>
<td>EUROPE (INCLUDING ICELAND &amp; GREENLAND) - ALBANIA, ANDORRA,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AUSTRIA, BELGIUM</td>
<td>0</td>
<td>0</td>
<td>INVESTMENT</td>
<td>GENERAL OPERATIONS</td>
<td>7,687,556.</td>
</tr>
<tr>
<td>MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,</td>
<td>0</td>
<td>0</td>
<td>GRANTMAKING</td>
<td>GENERAL OPERATIONS</td>
<td>48,500.</td>
</tr>
</tbody>
</table>

| 3a Subtotal | 0 | 0 | | | 36,948,467. |
| b Total from continuation sheets to Part I | 0 | 0 | | | 0. |
| c Totals (add lines 3a and 3b) | 0 | 0 | | | 36,948,467. |
### Part II

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

<table>
<thead>
<tr>
<th></th>
<th><strong>(a) Name of organization</strong></th>
<th><strong>(b) IRS code section and EIN (if applicable)</strong></th>
<th><strong>(c) Region</strong></th>
<th><strong>(d) Purpose of grant</strong></th>
<th><strong>(e) Amount of cash grant</strong></th>
<th><strong>(f) Manner of cash disbursement</strong></th>
<th><strong>(g) Amount of noncash assistance</strong></th>
<th><strong>(h) Description of noncash assistance</strong></th>
<th><strong>(i) Method of valuation (book, FMV, appraisal, other)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td>EUROPE (INCLUDING ICELAND &amp; GREENLAND)</td>
<td>GENERAL OPERATING</td>
<td>396,000.00</td>
<td>WIRE</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>MIDDLE EAST AND NORTH AFRICA</td>
<td>GENERAL OPERATING</td>
<td>37,000.00</td>
<td>WIRE</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3. Enter total number of other organizations or entities

---

Schedule F (Form 990) 2020
### Part III
Grants and Other Assistance to Individuals Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HONORARIA</td>
<td>MIDDLE EAST AND NORTH AFRICA</td>
<td>2</td>
<td>11,500</td>
<td>WIRE</td>
<td>0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ................................................................. ☒ Yes ☐ No

2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don’t file with Form 990) ................................................................. ☐ Yes ☒ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471) ................................................................. ☒ Yes ☐ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ................................................................. ☐ Yes ☒ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) ................................................................. ☐ Yes ☒ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don’t file with Form 990) ................................................................. ☐ Yes ☒ No
PART I, LINE 2:

ALL GRANTS ARE APPROVED BY FJC'S GRANT COMMITTEE COMPRISED OF FJC'S INDEPENDENT BOARD. APPLICATIONS ARE SUBJECT TO EXTENSIVE VETTING WHICH INCLUDES: (1) DETERMINING THE FORMAL LEGAL STATUS OF THE ORGANIZATION; (2) REVIEWING A DESCRIPTION OF THE ORGANIZATION'S HISTORY AND PROJECTS/PROGRAMS; (3) CONFIRMING THAT NO PRIVATE OR PERSONAL BENEFITS WILL BE PAID FROM THE GRANT BEING REQUESTED. ADDITIONALLY, RESEARCH IS DONE BY FJC STAFF ON THE ORGANIZATION IN BOTH THE OFAC/SPECIALTY DESIGNATED NATIONALS LIST AND CONFIRMING TO THE EXTENT THEY ARE KNOWN, NO EXECUTIVE STAFF AND BOARD MEMBERS ARE ON FBI'S MOST WANTED LIST. UPON APPROVAL, CERTAIN GRANTEEES ENTER INTO WRITTEN AGREEMENTS WITH FJC, OBLIGATING THEM TO REPORT ON THEIR ORGANIZATIONS OPERATIONS AND EXPENDITURES ENABLING FJC TO PROVIDE EXPENDITURE RESPONSIBILITY. UNDER THE AGREEMENTS, FUNDS CAN BE EXPENDED EXCLUSIVELY FOR THE DESIGNATED CHARITABLE PURPOSE.
### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>FJC</td>
<td>13-3848582</td>
</tr>
</tbody>
</table>

#### Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No  

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.
   - Yes [X]  
   - No  

#### Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>A TORAH INFERTILITY MEDIUM OF EXCHANGE - 1310 48TH STREET, SUITE 406 - BROOKLYN, NY 11219</td>
<td>11-3394747</td>
<td>501(C)(3)</td>
<td>7,800.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABDUL LATIF JAMEEL POVERTY ACTION LAB - 400 MAIN STREET, E19-201 - CAMBRIDGE, MA 02142</td>
<td>04-2103594</td>
<td>501(C)(3)</td>
<td>25,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABRAMAMIC HOUSE</td>
<td>540 S MASON STREET</td>
<td>HARRISBERG, VA 22801</td>
<td>83-4159723</td>
<td>501(C)(3)</td>
<td>20,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
</tr>
<tr>
<td>ACCION EAST INC</td>
<td>80 MAIDEN LN RM 903</td>
<td>NEW YORK, NY 10038-4740</td>
<td>11-3317234</td>
<td>501(C)(3)</td>
<td>10,060.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
</tr>
<tr>
<td>ACHIEVEMENT FIRST INC</td>
<td>370 JAMMS ST. SUITE 404</td>
<td>NEW HAVEN, CT 06513</td>
<td>65-1203744</td>
<td>501(C)(3)</td>
<td>368,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
</tr>
<tr>
<td>ACLU OF FLORIDA</td>
<td>4343 WEST FLAGLER STREET, SUITE 400</td>
<td>MIAMI, FL 33134-1585</td>
<td>23-7137529</td>
<td>501(C)(3)</td>
<td>10,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table  
   - 570.  

3. Enter total number of other organizations listed in the line 1 table  
   - 0.
<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACTION AGAINST HUNGER USA</td>
<td>13-3327220</td>
<td>501(C)(3)</td>
<td>33,883.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 WHITEHALL STREET, PL. 2</td>
<td>NEW YORK, NY 10004</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADHIKAAR FOR HUMAN RIGHTS AND SOCIAL JUSTICE - 7107 WOODSIDE AVE</td>
<td>20-3384725</td>
<td>501(C)(3)</td>
<td>20,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1ST FL - WOODSIDE, NY 11377-3939</td>
<td>NEW YORK, NY 10027-3723</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AFRICAN COMMUNITIES TOGETHER</td>
<td>46-1689772</td>
<td>501(C)(3)</td>
<td>20,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>127 WEST 127TH STREET SUITE 324</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AGUDAT REFUA VCHAIM</td>
<td>11-3466034</td>
<td>501(C)(3)</td>
<td>45,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PO BOX 190029</td>
<td>BROOKLYN, NY 11219</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AGUDATH ISRAEL BAIS BINYOMIC</td>
<td>11-2814155</td>
<td>501(C)(3)</td>
<td>100,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2913 AVENUE L</td>
<td>BROOKLYN, NY 11210-4638</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AHAVAT ACHIM ORTHODOX CONGREGATION</td>
<td>22-2202845</td>
<td>501(C)(3)</td>
<td>12,126.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OF FAIR LAWN - 18-25 SADDLE RIVER</td>
<td>ROAD - FAIR LAWN, NJ 07410</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALEXANDER HAMILTON FRIENDS</td>
<td>34-2011733</td>
<td>501(C)(3)</td>
<td>7,500.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ASSOCIATION - 200 1ST AVENUE WST</td>
<td>SUITE 201 - SEATTLE, WA 98119</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALPINE VALLEY SCHOOL</td>
<td>501 PARFET STREET</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WHEAT RIDGE, CO 80033</td>
<td>84-1293796</td>
<td>501(C)(3)</td>
<td>50,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALS ASSOCIATION - GREATER NY</td>
<td>13-3616680</td>
<td>501(C)(3)</td>
<td>15,300.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHAPTER - 42 BROADWAY, SUITE 1742</td>
<td>NEW YORK, NY 10004</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Name and address of organization or government</td>
<td>(b) EIN</td>
<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>--------</td>
<td>------------------------------</td>
<td>-------------------------</td>
<td>-------------------------------</td>
<td>---------------------------------</td>
<td>----------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>ALUMNI FUND ASSOCIATION OF YALE UNIVERSITY - P.O. BOX 2038 C/O CONTRIBUTION PROCESSING - NEW HAVEN, CT 06521-2038</td>
<td>06-0646973</td>
<td>501(C)(3)</td>
<td>10,000.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALZHEIMER'S DISEASE RESEARCH FOUNDATION DBA CURE AL - 34 WASHINGTON STREET, SUITE 310 - WELLESLEY HILLS, MA 02481</td>
<td>52-2396428</td>
<td>501(C)(3)</td>
<td>25,500.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALZHEIMER'S FOUNDATION OF AMERICA 322 EIGHTH AVENUE, 16TH FLOOR NEW YORK, NY 10001</td>
<td>91-1792864</td>
<td>501(C)(3)</td>
<td>11,260.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AMERICAN ASSOCIATES BEN-GURION UNIVERSITY OF THE NRGFV INC - 1001 AVE OF AMERICAS 19TH FL - NEW YORK, NY 10018</td>
<td>23-7270753</td>
<td>501(C)(3)</td>
<td>21,555.</td>
<td>0.</td>
<td>GENERAL OPERATING SUPPORT</td>
<td></td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
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<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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<td>(h) Purpose of grant or assistance</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
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<td>13-2992985</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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<td>(a) Name and address of organization or government</td>
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<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>84-0866211</td>
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<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
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Schedule I (Form 990)
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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<td>AND DESIGNS - 370 LEXINGTON AVE RM 1612 -</td>
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<td>(c) IRC section if applicable</td>
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<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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Schedule I (Form 990)
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>13-1624096</td>
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Schedule I (Form 990)
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
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<td>(d) Amount of cash grant</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
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<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
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<td>UNIVERSITY OF PENNSYLVANIA 3420 WALNUT STREET PHILADELPHIA, PA 19104-6206 23-1352685   501(C)(3)   7,600. 0.</td>
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<td>UNIVERSITY OF PENNSYLVANIA - SCHOOL OF NURSING OFFICE OF DEVELOPMENT AND ALUMNI RE - 418 CURIE BOULEVARD SUITE 445 - 23-1352685   501(C)(3)   122,826. 0.</td>
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<td>UNIVERSITY OF UTAH OFFICE OF SPONSORED PROJECTS - 75 SOUTH 2000 EAST - SALT LAKE CITY, UT 84112 87-6000525   501(C)(3)   8,700. 0.</td>
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<td>UPROSE INC 166A 22ND STREET BROOKLYN, NY 11232 11-2490531   501(C)(3)   5,250. 0.</td>
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<td>(d) Amount of cash grant</td>
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<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
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<td>(b) EIN</td>
<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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<td>XERCES SOCIETY INC PO BOX 97387 WASHINGTON, DC 20090-7387</td>
<td>51-0175253</td>
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<td>YAI NATIONAL INST. FOR PEOPLE WITH DISABILITIES - 460 WEST 34TH STREET - NEW YORK, NY 10001-2382</td>
<td>22-3521022</td>
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<td>YEB EDUCATIONAL PROGRAMS C/O TREETOP DEVELOPMENT - 500 FRANK W BURR BLVD #47 - TEANECK, NJ 07666</td>
<td>45-1606975</td>
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<tr>
<td>YESHIVA BEN PORAT YOSEF 243 FRISCH COUNTER PARAMUS, NJ 07652</td>
<td>22-38684043</td>
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<td>(b) EIN</td>
<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
<td>(e) Amount of non-cash assistance</td>
<td>(f) Method of valuation (book, FMV, appraisal, other)</td>
<td>(g) Description of non-cash assistance</td>
<td>(h) Purpose of grant or assistance</td>
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Schedule I (Form 990)
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<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
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<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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### Part III - Grants and Other Assistance to Domestic Individuals

Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

<table>
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<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
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**Part IV - Supplemental Information**

Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

ON A WEEKLY BASIS, FJC'S GRANTS ADMINISTRATOR WILL REVIEW THE LIST OF RECOMMENDED GRANTS, VERIFYING THAT EACH GRANTEE IS A 501C3 CHARITABLE ORGANIZATION, IS IN GOOD STANDING WITH THE IRS AND IS NOT LISTED ON THE SPLC'S LIST OF HATE ORGANIZATIONS. ANY RECOMMENDED GRANT THAT DOES NOT MEET THESE REQUIREMENTS ARE REJECTED. ONCE THE REVIEW IS COMPLETE, THE LIST OF RECOMMENDED GRANTS IS SUBMITTED TO FJC'S GRANTS COMMITTEE, A COMMITTEE OF THE BOARD TO REVIEW AND APPROVE. ONCE APPROVED, GRANTEES ARE SENT A GRANT LETTER WHICH PROVIDES INFORMATION ON THE AMOUNT OF THE GRANT,
THE RECOMMENDER, AND FURTHER DESIGNATIONS, IF ANY. FJC'S GRANT LETTERS STATE THAT ACCEPTANCE OF GRANT FUNDS SERVES AS ACCEPTANCE TO THE TERMS OF THE GRANT.
**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- Attach to Form 990.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

### Part I Questions Regarding Compensation

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</td>
<td></td>
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<tr>
<td>First-class or charter travel</td>
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<tr>
<td>Travel for companions</td>
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<tr>
<td>Tax indemnification and gross-up payments</td>
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<tr>
<td>Discretionary spending account</td>
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<td>Housing allowance or residence for personal use</td>
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<tr>
<td>Payments for business use of personal residence</td>
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<tr>
<td>Health or social club dues or initiation fees</td>
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<tr>
<td>Personal services (such as maid, chauffeur, chef)</td>
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</table>

b. If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2. Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3. Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

4. During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a. Receive a severance payment or change-of-control payment?

b. Participate in or receive payment from a supplemental nonqualified retirement plan?

c. Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a. The organization?

b. Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a. The organization?

b. Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9. If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

---

LHA  For Paperwork Reduction Act Notice, see the Instructions for Form 990.  Schedule J (Form 990) 2020

032111  12-07-20
### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren’t listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SAMUEL MARKS</td>
<td>(i) 252,905. (ii) 0. (iii) 0.</td>
<td>(i) 2,913. (ii) 56,080. (iii) 311,898.</td>
<td>0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>CEO</td>
<td>(i) 0. (ii) 0.</td>
<td></td>
<td>(ii) 221,245.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>(2) REGINA A. RODRIGUEZ</td>
<td>(i) 176,397. (ii) 0.</td>
<td>(i) 44,848. (ii) 0.</td>
<td>0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>CFO</td>
<td>(i) 0. (ii) 0.</td>
<td></td>
<td>(ii) 0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>(3) MARK COHEN</td>
<td>(i) 209,102. (ii) 0.</td>
<td>(i) 5,789. (ii) 0.</td>
<td>0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>ASST. SECRETARY, CHIEF LEGAL OFFICER</td>
<td>(i) 0. (ii) 0.</td>
<td></td>
<td>(ii) 215,560.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>(4) ORLANDO COLON</td>
<td>(i) 130,390. (ii) 0.</td>
<td>(i) 3,584. (ii) 50,156. (iii) 184,130.</td>
<td>0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>CONTROLLER</td>
<td>(i) 0. (ii) 0.</td>
<td></td>
<td>(ii) 0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>(5) MEGHAN HUDSON</td>
<td>(i) 150,557. (ii) 0.</td>
<td>(i) 4,184. (ii) 6,838. (iii) 161,579.</td>
<td>0.</td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>COO</td>
<td>(i) 0. (ii) 0.</td>
<td></td>
<td>(ii) 0.</td>
<td></td>
<td>0.</td>
</tr>
</tbody>
</table>
# Transactions With Interested Persons

(Section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

## Part I: Excess Benefit Transactions

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 38a or 40b.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of disqualified person</th>
<th>(b) Relationship between disqualified person and organization</th>
<th>(c) Description of transaction</th>
<th>(d) Corrected?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td>Yes</td>
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</tbody>
</table>

2  Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958: $ 

3  Enter the amount of tax, if any, on line 2, above, reimbursed by the organization: $ 

## Part II: Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship with organization</th>
<th>(c) Purpose of loan</th>
<th>(d) Loan to or from the organization?</th>
<th>(e) Original principal amount</th>
<th>(f) Balance due in default?</th>
<th>(g) Approved by board or committee?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>To</td>
<td>From</td>
<td></td>
<td>Yes</td>
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</tbody>
</table>

Total: $ 

## Part III: Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of assistance</th>
<th>(d) Type of assistance</th>
<th>(e) Purpose of assistance</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
**Part IV** Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of transaction</th>
<th>(d) Description of transaction</th>
<th>(e) Sharing of organization's revenues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>LORIN SILVERMAN</td>
<td>DIRECTOR, PRESIDENT</td>
<td>20,003,840</td>
<td>LORIN SILVERMAN</td>
<td>X</td>
</tr>
</tbody>
</table>

**Part V** Supplemental Information.

Provide additional information for responses to questions on Schedule L, (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: LORIN SILVERMAN

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DIRECTOR, PRESIDENT & TREASURER

(D) DESCRIPTION OF TRANSACTION: LORIN SILVERMAN IS A DIRECTOR, PRESIDENT AND TREASURER OF THE MARTY AND DOROTHY SILVERMAN FOUNDATION WHICH HAS PLEDGED TO FJC A SECURITY INTEREST IN SECURITIES TO BE USED AS COLLATERAL FOR THE REPAYMENT OF PRINCIPAL AMOUNTS IN THE EVENT OF DEFAULT OF ANY OF FJC'S AGENCY LOAN FUND RECEIVABLES. THIS AGREEMENT REMAINS IN EFFECT UNTIL OCTOBER 1, 2022 AND IS RENEWABLE BY MUTUAL CONSENT. AS OF MARCH 31, 2021, THE FAIR VALUE OF THE COLLATERAL HELD AS SECURITY UNDER THE PLEDGE AGREEMENT WAS $20,003,840.
**Noncash Contributions**

**Part I: Types of Property**

<table>
<thead>
<tr>
<th></th>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art - Works of art</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Art - Historical treasures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Art - Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
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<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
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<tr>
<td>7</td>
<td>Boats and planes</td>
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<td></td>
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<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities - Publicly traded</td>
<td>X</td>
<td>303</td>
<td>10,784,050, PMV</td>
</tr>
<tr>
<td>10</td>
<td>Securities - Closely held stock</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Securities - Partnership, LLC, or trust interests</td>
<td></td>
<td></td>
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<tr>
<td>12</td>
<td>Securities - Miscellaneous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution - Historic structures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Qualified conservation contribution - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Real estate - Residential</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Real estate - Commercial</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Real estate - Other</td>
<td></td>
<td></td>
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<tr>
<td>18</td>
<td>Collectibles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Food inventory</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>20</td>
<td>Drugs and medical supplies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Taxidermy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Historical artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Scientific specimens</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>24</td>
<td>Archeological artifacts</td>
<td></td>
<td></td>
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<tr>
<td>25</td>
<td>Other ▶ (</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>26</td>
<td>Other ▶ (</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>27</td>
<td>Other ▶ (</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Other ▶ (</td>
<td></td>
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</tr>
</tbody>
</table>

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement       29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 

- Yes: ☑
- No: 

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 

- Yes: ☑
- No: 

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 

- Yes: ☑
- No: 

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part II** Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33. and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

**SCHEDULE M, LINE 30B:**

**THE NUMBER IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTORS.**
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO RESPOND TO THE NEEDS OF DONORS, NFP BORROWERS AND OTHER CHARITABLE AGENCIES.

FORM 990, PART VI, SECTION A, LINE 2:
LORIN SILVERMAN, DIRECTOR, PRESIDENT & TREASURER, HAS A BUSINESS RELATIONSHIP WITH MARK COHEN, ASST. SECRETARY, CHIEF LEGAL OFFICER.

FORM 990, PART VI, SECTION B, LINE 11B:
PRIOR TO THE PREPARATION OF FORM 990, THE AUDIT COMMITTEE REVIEWS AND APPROVES THE UNDERLYING AUDITED FINANCIAL STATEMENTS WITH FJC'S OUTSIDE AUDITOR. THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND PROVIDED TO EACH BOARD MEMBER AND OFFICER FOR REVIEW AND DISCUSSION. ONCE APPROVED FORM 990 IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:
FJC MONITORS EACH DIRECTOR AND OFFICER'S CONFLICT OF INTERESTS ON AN ANNUAL BASIS. BOARD MEMBERS, OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO FILL QUESTIONNAIRES ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15A:
THE COMPENSATION OF THE CEO IS DETERMINED BY REVIEWING COMPARABLE COMPENSATIONS BY POSITIONS THROUGHOUT THE INDUSTRY. COMPENSATION OF THE CEO IS DETERMINED BY THE COMPENSATION COMMITTEE, CONSISTING OF (3) MEMBERS OF FJC'S INDEPENDENT BOARD.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
NY, AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE FJC WEBSITE, WWW.FJC.ORG.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
CHANGE IN VALUE OF BENEFICIAL INTEREST IN THIRD-PARTY TRUSTS -201,251.

FORM 990, PART XII, LINE 2C:
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.
### Part I  Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>BARNEGAT, LLC C/O FJC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>FJC - A FOUNDATION OF</td>
</tr>
<tr>
<td>520 8TH AVENUE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>FJC PHILANTHROPIC FUNDS</td>
</tr>
<tr>
<td>NEW YORK, NY 10018</td>
<td>REAL ESTATE</td>
<td>NEW YORK</td>
<td>0.</td>
<td>417,226</td>
<td></td>
</tr>
</tbody>
</table>

### Part II  Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 501(c)(3) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes / No</td>
</tr>
</tbody>
</table>
### Part III: Identification of Related Organizations Taxable as a Partnership
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-JBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

### Part IV: Identification of Related Organizations Taxable as a Corporation or Trust
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>
**Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
   - a. Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
   - b. Gift, grant, or capital contribution to related organization(s)
   - c. Gift, grant, or capital contribution from related organization(s)
   - d. Loans or loan guarantees to or from related organization(s)
   - e. Loans or loan guarantees by related organization(s)
   - f. Dividends from related organization(s)
   - g. Sale of assets to related organization(s)
   - h. Purchase of assets from related organization(s)
   - i. Exchange of assets with related organization(s)
   - j. Lease of facilities, equipment, or other assets to related organization(s)
   - k. Lease of facilities, equipment, or other assets from related organization(s)
   - l. Performance of services or membership or fundraising solicitations for related organization(s)
   - m. Performance of services or membership or fundraising solicitations by related organization(s)
   - n. Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   - o. Sharing of paid employees with related organization(s)
   - p. Reimbursement paid to related organization(s) for expenses
   - q. Reimbursement paid by related organization(s) for expenses
   - r. Other transfer of cash or property to related organization(s)
   - s. Other transfer of cash or property from related organization(s)

2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
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**Schedule R (Form 990) 2020**

**FJC**

### Part VI Unrelated Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all persons sec. 513(g)(1) recipients?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocation?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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Schedule R (Form 990) 2020