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Form 990

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020

B Check if applicable:

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

DES MOINES JEWISH FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

33158 UTE AVENUE

City or town, state or province, country, and ZIP or foreign postal code

WAUKEE, IA 50263

F Name and address of principal officer:

DAVID ADELMAN

33158 UTE AVENUE

WAUKEE, IA 502637538

D Employer identification number

51-0159835

E Telephone number

(515) 987-0899

G Gross receipts \$ 23,269,968

I Tax-exempt status:

☒ 501(c)(3)

☐ 501(c) () ◀(insert no.)

☐ 4947(a)(1) or

☐ 527

J Website: ▶ WWW.JEWISHDESMOINES.ORG

K Form of organization:

☒ Corporation

☐ Trust

☐ Association

☐ Other ▶

L Year of formation: 1975

M State of legal domicile: IA

Part I

Summary

1 Briefly describe the organization's mission or most significant activities:

THE FOUNDATION WAS STRUCTURED TO ENCOURAGE FUNDING OF THE JEWISH FEDERATION OF GREATER DES MOINES, AND IS RESPONSIBLE FOR ADDING FINANCIAL STABILITY BY BROADENING THE FUNDING BASE AND THEREBY IMPROVING THE ABILITY OF THE DES MOINES JEWISH COMMUNITY TO RESPOND TO CURRENT AND FUTURE SERVICE NEEDS WHICH CANNOT BE MET THROUGH ANNUAL OPERATING FUNDS.

2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	3	14
3	Number of voting members of the governing body (Part VI, line 1a)	4	14
4	Number of independent voting members of the governing body (Part VI, line 1b)	5	0
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	6	14
6	Total number of volunteers (estimate if necessary)	7a	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7b	
b	Net unrelated business taxable income from Form 990-T, line 39		

Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
			144,829	133,488
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	607,971	237,758
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	752,800	371,246	
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,372,395	1,014,024
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶564		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	170,138	147,615
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,542,533	1,161,639	
19	Revenue less expenses. Subtract line 18 from line 12	-789,733	-790,393	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	15,734,077	14,708,322
	21	Total liabilities (Part X, line 26)	55,098	0
	22	Net assets or fund balances. Subtract line 21 from line 20	15,678,979	14,708,322

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.

Sign Here

Signature of officer

DAVID ADELMAN President

Type or print name and title

2020-12-08

Date

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN P00060061

Firm's name ▶ TARBELL & CO PLC

Firm's EIN ▶ 42-1443361

Firm's address ▶ 1466 28TH STREET SUITE 100

WEST DES MOINES, IA 50266

Phone no. (515) 282-0200

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

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