## Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))



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

Form 990-T (2022)

Form 8868
(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

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

Electronic filing (e-file). You can electronically file Form 8868 to request a 6 -month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.
Automatic 6-Month Extension of Time. Only submit original (no copies needed).
All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| Type or print | Name of exempt organization or other filer, see instructions. <br> UNITED JEWISH APPEAL - FEDERATION <br> OF JEWISH PHILANTHROPIES OF NEW YORK, IN |  |  | Taxpayer identification numb $51-017242$ | $\mathrm{r}(\mathrm{TIN})$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| File by the due date for filing your return. See instructions. | Number, street, and room or suite no. If a P.O. box, see instructions. 130 EAST 59TH STREET |  |  |  |  |
|  | City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10022-1302 |  |  |  |  |
| Enter the Return Code for the return that this application is for (file a separate application for each return) |  |  |  |  | 07 |
| ApplicationIs For |  | Return <br> Code | Application Is For |  | Return <br> Code |
|  |  | 01 | Form 1041-A |  | 08 |
| Form 4720 (individual) |  | 03 | Form 4720 (other than individual) |  | 09 |
| Form 990-PF |  | 04 | Form 5227 |  | 10 |
| Form 990-T (sec. 401 (a) or 408(a) trust) |  | 05 | Form 6069 |  | 11 |
| Form 990-T (trust other than above) |  | 06 | Form 8870 |  | 12 |
| Form 990-T (corporation) |  | 07 |  |  |  |
| - The bo | JOANN LOCASCIO |  |  |  |  |

Telephone No
212-836-1730
Fax No.

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) $\qquad$ . If this is for the whole group, check this
box $\square$. If it is for part of the group, check this box $\square$ and attach a list with the names and TINs of all members the extension is for.
1 I request an automatic 6-month extension of time until MAY 15, 2024 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
$\square$
$\square$
calendar year $\qquad$ or
tax year beginning JUL 1, 2022 $\qquad$ , and ending JUN 30, 2023
$\qquad$ .

2 If the tax year entered in line 1 is for less than 12 months, check reason:
$\square$ Final return $\square$ Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.
Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

\section*{| Part III | Tax and Payments |
| :--- | :--- |}

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)
b Other credits (see instructions)
c General business credit. Attach Form 3800 (see instructions)
d Credit for prior year minimum tax (attach Form 8801 or 8827)
e Total credits. Add lines 1a through 1d
2 Subtract line 1e from Part II, line 7
3 Other amounts due. Check if from: $\square$ Form 4255Form 8611Form 8697
 Form 8866

4 Total tax. Add lines 2 and 3 (see instructions). section 1294. Enter tax amount here
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)
6a Payments: A 2021 overpayment credited to 2022
b 2022 estimated tax payments. Check if section $643(\mathrm{~g})$ election applies
c Tax deposited with Form 8868
d Foreign organizations: Tax paid or withheld at source (see instructions)
e Backup withholding (see instructions)
f Credit for small employer health insurance premiums (attach Form 8941)
g Other credits, adjustments, and payments: $\square$ Form 2439 $\square$ Form 4136 $\qquad$ $\square$ Other
7 Total payments. Add lines 6 a through 6 g
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached
9 Tax due. If line 7 is smaller than the total of lines 4,5 , and 8 , enter amount owed
10 Overpayment. If line 7 is larger than the total of lines 4,5 , and 8 , enter amount overpaid
11 Enter the amount of line 10 you want: Credited to 2023 estimated tax 3,178. Refunded

| 6 Ca | $71,797$. |
| :--- | :--- |
| 6 b |  |
| 6 c |  |
| 6 d |  |
| 6 e |  |
| 6 f |  |
|  |  |
| 6 g |  |


| Part IV | Statements Regarding Certain Activities and Other Information (see instructions) |
| :--- | :--- |

1 At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here BERMUDA
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?
If "Yes," see instructions for other forms the organization may have to file.
3 Enter the amount of tax-exempt interest received or accrued during the tax year
\$ $\qquad$
4 Enter available pre-2018 NOL carryovers here \$ $\qquad$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.

| Business Activity Code |  |
| :---: | :---: |
| 210000 | $\$$ |
| 901101 | $\$$ |


|  | Available post-2017 NOL carryover |
| :--- | ---: |
| $\$$ | $597,782$. |
| $\$$ | $5,649,103$. |


\section*{| Part V | Supplemental Information |
| :--- | :--- |}

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.


SCHEDULE A (Form 990-T)

## Unrelated Business Taxable Income From an Unrelated Trade or Business

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

| AName of the organization UNITED JEWISH APPEAL-FEDERATION OF <br> JEWISH PHILANTHROPIES OF NEW YORK, INC. | B Employer identification number |
| :--- | :---: | :---: |
| $51-0172429$ |  |

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

| Part I Unrelated Trade or Business Income |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: |
| 1a Gross receipts or sales <br> b Less returns and allowances $\qquad$ c Balance | 1c |  |  |  |
| 2 Cost of goods sold (Part III, line 8) | 2 |  |  |  |
| 3 Gross profit. Subtract line 2 from line 1c | 3 |  |  |  |
| 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions | 4a |  |  |  |
| b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) | 4b |  |  |  |
| c Capital loss deduction for trusts | 4c |  |  |  |
| 5 Income (loss) from a partnership or an S corporation (attach statement) | 5 |  |  |  |
| 6 Rent income (Part IV) | 6 |  |  |  |
| 7 Unrelated debt-financed income (Part V) | 7 |  |  |  |
| 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) | 8 |  |  |  |
| 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) | 9 |  |  |  |
| 10 Exploited exempt activity income (Part VIII) | 10 |  |  |  |
| 11 Advertising income (Part IX) | 11 |  |  |  |
| 12 Other income (see instructions; attach statement) ... STMT 1 | 12 | 558,971. |  | 558,971. |
| 13 Total. Combine lines 3 through 12 | 13 | 558,971. |  | 558,971. |

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


| Part III | C |
| :---: | :--- |
| $\mathbf{1}$ | Inventory |
| $\mathbf{2}$ | Purchas |
| $\mathbf{3}$ | Cost of I |
| $\mathbf{4}$ | Addition |
| $\mathbf{5}$ | Other co |
| $\mathbf{6}$ | Total. A |
| $\mathbf{7}$ | Inventory |
| $\mathbf{8}$ | Cost of |
| $\mathbf{9}$ | Do the ru |
| Part IV | Re |
| $\mathbf{1}$ | Descript |
|  | A |
|  | B |
|  | C |
| D | $\square$ | Enter method of inventory valuation

1 Inventory at beginning of year


| 1 |  |
| :---: | :--- |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |

9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?
$\square$ Yes $\square$ No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)
1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.
$\begin{array}{lll}\text { A } & \square \\ \text { B } & \square \\ \text { C } & \square \\ \text { D } & \square\end{array}$

2 Rent received or accrued
a From personal property (if the percentage of rent for personal property is more than $10 \%$ but not more than $50 \%$ )
b From real and personal property (if the percentage of rent for personal property exceeds $50 \%$ or if the rent is based on profit or income)
c Total rents received or accrued by property. Add lines 2a and 2 b , columns A through D

| A | B | C | D |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)
4 in lines 2(a) and 2(b) (attach statement)


## 5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)

## Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.
$\begin{array}{ll}\text { A } & \square \\ \text { B } & \square \\ \text { C } & \square \\ \text { D } & \square\end{array}$ $\qquad$
$\qquad$


2 Gross income from or allocable to debt-financed property
3 Deductions directly connected with or allocable to debt-financed property
a Straight line depreciation (attach statement)
b Other deductions (attach statement)
c Total deductions (add lines 3a and 3b, columns A through D)
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)
5 Average adjusted basis of or allocable to debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6


8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)

9 Allocable deductions. Multiply line 3c by line 6



| Part VII | Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach statement) | 4. Set-asides (attach statement) | 5. Total deductions and set-asides (add cols 3 and 4) |
| (1) |  |  |  |  |  |
| (2) |  |  |  |  |  |
| (3) |  |  |  |  |  |
| (4) |  |  |  |  |  |
|  |  | Add amounts in column 2. Enter here and on Part I, line 9, column (A) |  |  | Add amounts in column 5. Enter here and on Part I, line 9, column (B) |
| Totals |  | 0. |  |  | 0 . |


| Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) |  |  |  |
| :---: | :---: | :---: | :---: |
| 1 | Description of exploited activity: |  |  |
| 2 | Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) | 2 |  |
| 3 | Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) | 3 |  |
| 4 | Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 | 4 |  |
| 5 | Gross income from activity that is not unrelated business income | 5 |  |
| 6 | Expenses attributable to income entered on line 5 | 6 |  |
| 7 | Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line <br> 4. Enter here and on Part II, line 12 | 7 |  |

## Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.
A $\square$
B $\square$


C $\square$
D $\square$
Enter amounts for each periodical listed above in the corresponding column.

2 Gross advertising income

| A | B | C | D |
| :---: | :---: | :---: | :---: |
|  |  |  |  |

Add columns A through D. Enter here and on Part I, line 11, column (A)
a
3 Direct advertising costs by periodical
a Add columns A through D. Enter here and on Part I, line 11, column (B)
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8 . For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8
5 Readership costs
6 Circulation income
7 Excess readership costs. If line 6 is less than line 5 , subtract line 6 from line 5 . If line 5 is less than line 6 , enter zero
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7

|  |  |  |  |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 .
Part X Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percentage <br> of time devoted <br> to business | 4. Compensation <br> attributable to <br> unrelated business |
| :--- | :--- | ---: | ---: |
| (1) |  | $\%$ |  |
| (2) |  | $\%$ |  |
| $(3)$ |  | $\%$ |  |
| (4) |  |  |  |

Part XI Supplemental Information (see instructions)

| FORM 990-T (A) OTHER INCOME | STATEMENT 1 |
| :---: | :---: |
| DESCRIPTION | AMOUNT |
| WORKING INTEREST IN OIL AND GAS PROPERTIES | 558,971. |
| TOTAL TO SCHEDULE A, PART I, LINE 12 | 558,971. |
| FORM 990-T (A) OTHER DEDUCTIONS | STATEMENT 2 |
| DESCRIPTION | AMOUNT |
| CONSULTANTS | 80,000. |
| PRODUCTION EXPENSE | 100,575. |
| PROFESSIONAL SERVICES | 54,450. |
| INSURANCE | 42,200. |
| TOTAL TO SCHEDULE A, PART II, LINE 14 | 277,225. |


| FORM $990-\mathrm{T}(\mathrm{A})$ | POST 2017 NOL SCHEDULE |
| :--- | :--- |


SCH A (990-T) SCHEDULE A NOL DETAIL STATEMENT 5

TAXABLE INCOME FROM ALL ENTITIES
158, 638.
THIS ENTITIES PORTION OF TAXABLE INCOME
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS
80\% INCOME LIMITATION
POST-2017 AVAILABLE
LESSER OF POST-2017 NET OPERATING LOSS OR 80\% LIMITATION

597,782.
66,164.
41.71\%

66,164.
52,931.

52, 931 .

SCHEDULE A (Form 990-T)

Department of the Treasury Internal Revenue Service

## Unrelated Business Taxable Income From an Unrelated Trade or Business

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).


E Describe the unrelated trade or business INVESTMENT ACTIVITIES

| Part I Unrelated Trade or Business Income |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: |
| 1a Gross receipts or sales <br> b Less returns and allowances $\qquad$ c Balance | 1c |  |  |  |
| 2 Cost of goods sold (Part III, line 8) | 2 |  |  |  |
| 3 Gross profit. Subtract line 2 from line 1c | 3 |  |  |  |
| 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions | 4a | 1,829,463. |  | 1,829,463. |
| b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) | 4b |  |  |  |
| c Capital loss deduction for trusts | 4c |  |  |  |
| 5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 6 | 5 | -513,241. |  | -513,241. |
| 6 Rent income (Part IV) | 6 |  |  |  |
| 7 Unrelated debt-financed income (Part V) | 7 |  |  |  |
| 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) | 8 |  |  |  |
| 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) | 9 |  |  |  |
| 10 Exploited exempt activity income (Part VIII) | 10 |  |  |  |
| 11 Advertising income (Part IX) | 11 |  |  |  |
| 12 Other income (see instructions; attach statement) | 12 |  |  |  |
| 13 Total. Combine lines 3 through 12 | 13 | 1,316,222. |  | 1,316,222. |

## Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be

 directly connected with the unrelated business income| 1 | Compensation of officers, directors, and trustees (Part X) |  |  | 1 |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 2 | Salaries and wages |  |  | 2 | 905,388. |
| 3 | Repairs and maintenance |  |  | 3 |  |
| 4 | Bad debts |  |  | 4 |  |
| 5 | Interest (attach statement). See instructions |  |  | 5 |  |
| 6 | Taxes and licenses |  |  | 6 | 5,449. |
| 7 | Depreciation (attach Form 4562). See instructions | 7 |  |  |  |
| 8 | Less depreciation claimed in Part III and elsewhere on return | 8 a |  | 8b |  |
| 9 | Depletion |  |  | 9 |  |
| 10 | Contributions to deferred compensation plans |  |  | 10 |  |
| 11 | Employee benefit programs |  |  | 11 | 176,535. |
| 12 | Excess exempt expenses (Part VIII) |  |  | 12 |  |
| 13 | Excess readership costs (Part IX) |  |  | 13 |  |
| 14 | Other deductions (attach statement) <br> SEE STATEMENT |  |  | 14 | 136,376. |
| 15 | Total deductions. Add lines 1 through 14 |  |  | 15 | 1,223,748. |
| 16 | Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) |  |  | 16 | 92,474. |
| 17 |  |  |  | 17 | 73,979. |
|  |  |  |  | 18 | 18,495. |
| LHA | For Paperwork Reduction Act Notice, see instructions. |  |  | ched | 990-T) 2022 |


| Part III | C |
| :---: | :--- |
| $\mathbf{1}$ | Inventory |
| $\mathbf{2}$ | Purchas |
| $\mathbf{3}$ | Cost of I |
| $\mathbf{4}$ | Addition |
| $\mathbf{5}$ | Other co |
| $\mathbf{6}$ | Total. A |
| $\mathbf{7}$ | Inventory |
| $\mathbf{8}$ | Cost of |
| $\mathbf{9}$ | Do the ru |
| Part IV | Re |
| $\mathbf{1}$ | Descript |
|  | A |
|  | B |
|  | C |
| D | $\square$ | Enter method of inventory valuation

1 Inventory at beginning of year


| 1 |  |
| :---: | :--- |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |

9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?
$\square$ Yes $\square$ No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)
Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.
A $\qquad$
C $\square$

## 2 Rent received or accrued

a From personal property (if the percentage of rent for personal property is more than $10 \%$ but not more than $50 \%$ )
b From real and personal property (if the percentage of rent for personal property exceeds $50 \%$ or if the rent is based on profit or income)
c Total rents received or accrued by property. Add lines 2a and 2 b , columns A through D

| A | B | C | D |  |
| ---: | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
|  | 0. |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)
4 in lines 2(a) and 2(b) (attach statement)

| 0. |  |  |
| ---: | ---: | ---: |

## 5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)

## Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.
$\begin{array}{ll}\text { A } & \square \\ \text { B } & \square \\ \text { C } & \square \\ \text { D } & \square\end{array}$ $\qquad$


2 Gross income from or allocable to debt-financed property
3 Deductions directly connected with or allocable to debt-financed property
a Straight line depreciation (attach statement)
b Other deductions (attach statement)
c Total deductions (add lines 3a and 3b, columns A through D)
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)
5 Average adjusted basis of or allocable to debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6


8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)

9 Allocable deductions. Multiply line 3c by line 6


Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)



1 Description of exploited activity:
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7
5 Gross income from activity that is not unrelated business income
6 Expenses attributable to income entered on line 5
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12


Schedule A (Form 990-T) 2022

## Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.
A $\square$
B $\square$


C $\square$
D $\square$
Enter amounts for each periodical listed above in the corresponding column.

2 Gross advertising income

| A | B | C | D |
| :---: | :---: | :---: | :---: |
|  |  |  |  |

Add columns A through D. Enter here and on Part I, line 11, column (A)
a
3 Direct advertising costs by periodical
a Add columns A through D. Enter here and on Part I, line 11, column (B)
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8 . For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8
5 Readership costs
6 Circulation income
7 Excess readership costs. If line 6 is less than line 5 , subtract line 6 from line 5 . If line 5 is less than line 6, enter zero
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7

|  |  |  |  |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13.
Part X Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percentage <br> of time devoted <br> to business | 4. Compensation <br> attributable to <br> unrelated business |
| :--- | :--- | ---: | ---: |
| (1) |  | $\%$ |  |
| (2) |  | $\%$ |  |
| $(3)$ |  | $\%$ |  |
| (4) |  |  |  |

Part XI Supplemental Information (see instructions)

| FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS | STATEMENT |
| :---: | :---: |
| DESCRIPTION | $\begin{array}{cc} \text { NET } & \text { INCOME } \\ \text { OR } & \text { (LOSS }) \end{array}$ |
| 225 FOURTH COMPANY HOLDING LLC - OTHER INCOME (LOSS) | 25,103. |
| B. BROS REALTY LLC - OTHER INCOME (LOSS) | 202,878. |
| ATALAYA ASSET INCOME FUND EVERGREEN LP - OTHER INCOME (LOSS) | -32,593. |
| BAUPOST VALUE, LP-I - OTHER INCOME (LOSS) | 30,493. |
| CCP II PWD-TFK AIV, LP - OTHER INCOME (LOSS) | -3,130. |
| CCP III AIV II, LP - OTHER INCOME (LOSS) | 98. |
| CCP III AIV IV, LP - OTHER INCOME (LOSS) | -1,276. |
| CCP III AIV VI, LP - OTHER INCOME (LOSS) | -25,221. |
| CCP III AIV VII, LP - OTHER INCOME (LOSS) | -13,276. |
| CCP III AIV VIII, LP - OTHER INCOME (LOSS) | -31,231. |
| CCP III AIV IX, LP - OTHER INCOME (LOSS) | 2,322. |
| COLUMBIA CAPITAL EQUITY PARTNERS IV (QP) - OTHER INCOME (LOSS) | 3,706. |
| FOUNDRY GROUP NEXT, LP - OTHER INCOME (LOSS) | 3,057. |
| FOUNDRY GROUP NEXT 2018, LP - OTHER INCOME (LOSS) | -36. |
| KKR ENERGY INCOME AND GROWTH - OTHER INCOME (LOSS) | $-265,829$. |
| LS POWER EQUITY II, LP - OTHER INCOME (LOSS) | -7,894. |
| PINE BROOK CAPITAL PARTNERS II, LP - OTHER INCOME (LOSS) | 32,409. |
| REALTY FINANCIAL PARTNERS VI, LP - OTHER INCOME (LOSS) | -17,243. |
| ROARK CAPITAL PARTNERS IV AIV I-U, L.P. - OTHER INCOME (LOSS) | 34,458. |
| ROARK CAPITAL PARTNERS V (T) LP - OTHER INCOME (LOSS) | -35,075. |
| TOWERBROOK STRUCTURED OPPORTUNITIES FUND II ONSHORE, L.P. |  |
| - OTHER INCOME (LO | 12,555. |
| WARBURG PINCUS FINANCIAL SECTOR (CAYMAN), L.P. - OTHER INCOME (LOSS) | -20,202. |
| CNK FUND III, LP - OTHER INCOME (LOSS) | 11,641. |
| ROARK CAPITAL PARTNERS VI (T) LP - OTHER INCOME (LOSS) | -68,602. |
| TA XIV-A, L.P. - OTHER INCOME (LOSS) | -8,351. |
| VINTAGE FUND OF FUNDS V (ACCESS) LP - OTHER INCOME (LOSS) | 4,698. |
| VINTAGE FUND OF FUNDS VI (ACCESS), LP - OTHER INCOME (LOSS) | -59. |
| CENTERBRIDGE CAPITAL PARTNERS III (CAYMAN III) LP - OTHER |  |
| INCOME (LOSS) | 26,055. |
| CCP III AIV V, LP - OTHER INCOME (LOSS) | -356. |
| NEW YORK JEWISH INSTITUTIONS INVESTMENT FUND, LLC - OTHER INCOME (LOSS) | -372,340. |
| TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5 | -513,241. |


| FORM 990-T (A) | OTHER DEDUCTIONS |
| :--- | ---: | | STATEMENT 7 |
| ---: |
| DESCRIPTION |
| CONSULTANTS |
| TAX FEES |
| TOTAL TO SCHEDULE A, PART II, LINE 14 |



SCH A (990-T)
SCHEDULE A NOL DETAIL
STATEMENT 10

```
TAXABLE INCOME FROM ALL ENTITIES
    158,638.
THIS ENTITIES PORTION OF TAXABLE INCOME
    92,474.
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS
    58.29%
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS 92,474.
80% INCOME LIMITATION 73,979.
POST-2017 AVAILABLE 5,649,103.
LESSER OF POST-2017 NET OPERATING LOSS OR 80% LIMITATION
    73,979.
``` Go to www.irs. gov/Form1120 for instructions and the latest information.
Name

51-0172429

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ................................. \(\square\) Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.
\begin{tabular}{|c|c|c|c|c|c|c|}
\hline \multicolumn{7}{|l|}{Part I \(\quad\) Short-Term Capital Gains and Losses - Assets Held One Year or Less} \\
\hline \multicolumn{2}{|l|}{\begin{tabular}{l}
See instructions for how to figure the amounts to enter on the lines below. \\
This form may be easier to complete if you round off cents to whole dollars.
\end{tabular}} & \begin{tabular}{l}
(d) \\
Proceeds (sales price)
\end{tabular} & \begin{tabular}{l}
(e) \\
Cost (or other basis)
\end{tabular} & (g) Adjustments to or loss from Form(s) Part I, line 2, colum & & (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) \\
\hline \multicolumn{2}{|l|}{1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b} & & & & & \\
\hline \multicolumn{2}{|l|}{1b Totals for all transactions reported on Form(s) 8949 with Box A checked} & & & & & \\
\hline \multicolumn{2}{|l|}{2 Totals for all transactions reported on Form(s) 8949 with Box B checked} & & & & & \\
\hline \multicolumn{2}{|l|}{3 Totals for all transactions reported on Form(s) 8949 with Box C checked} & & & & & 8,429. \\
\hline \multicolumn{3}{|l|}{4 Short-term capital gain from installment sales from Form 6252, line 26 or 37} & & & 4 & \\
\hline \multicolumn{3}{|l|}{5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824} & & & 5 & \\
\hline \multicolumn{3}{|l|}{6 Unused capital loss carryover (attach computation)} & & & 6 & ) \\
\hline \multicolumn{5}{|l|}{7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h} & 7 & 8,429. \\
\hline
\end{tabular}

Part II


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

\section*{Form 8949}

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

51-0172429

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.
Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.
Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or
codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).
You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.
(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
(C) Short-term transactions not reported to you on Form 1099-B
\begin{tabular}{|c|c|c|c|c|c|c|c|}
\hline \multirow[t]{2}{*}{\[
\begin{array}{cc}
1 & \text { (a) } \\
& \text { Description of property } \\
& \text { (Example: } 100 \text { sh. XYZ Co.) }
\end{array}
\]} & \multirow[t]{2}{*}{\begin{tabular}{l}
(b) \\
Date acquired (Mo., day, yr.)
\end{tabular}} & \multirow[t]{2}{*}{\begin{tabular}{l}
(c) \\
Date sold or disposed of (Mo., day, yr.)
\end{tabular}} & \multirow[t]{2}{*}{(d) Proceeds (sales price)} & \multirow[t]{2}{*}{\begin{tabular}{l}
(e) \\
Cost or other basis. See the Note below and see Column (e) in the instructions
\end{tabular}} & \multicolumn{2}{|l|}{Adjustment, if any, to gain or loss. If you enter an amount in column ( g ), enter a code in column (f). See instructions.} & \multirow[t]{2}{*}{\begin{tabular}{|c} 
(h) \\
Gain or (loss). \\
Subtract column (e) \\
from column (d) \& \\
combine the result \\
with column (g)
\end{tabular}} \\
\hline & & & & & \[
\begin{gathered}
\mathbf{( f )} \\
\text { Code(s) }
\end{gathered}
\] & \begin{tabular}{l}
(g) \\
Amount of adjustment
\end{tabular} & \\
\hline BAUPOST VALUE, LP-I & & & & & & & 2,277. \\
\hline \multicolumn{8}{|l|}{TOWERBROOK STRUCTURED} \\
\hline OPPORTUNITIES FUND & & & & & & & 348. \\
\hline TA XIV-A, L.P. & & & & & & & -86. \\
\hline \multicolumn{8}{|l|}{PATIENT SQUARE EQUITY} \\
\hline \multicolumn{2}{|l|}{PARTNERS - A, LP} & & & & & & 3,707. \\
\hline \multicolumn{8}{|l|}{NEW YORK JEWISH} \\
\hline \multirow[t]{2}{*}{INSTITUTIONS INVESTMENT} & & & & & & & 2,183. \\
\hline & & & & & & & \\
\hline \multicolumn{8}{|l|}{\multirow[t]{2}{*}{}} \\
\hline & & & & & & & \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{\multirow[t]{2}{*}{}} \\
\hline & & & & & & & \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
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\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{\multirow[t]{2}{*}{}} \\
\hline & & & & & & & \\
\hline & & & & & & & \\
\hline \multicolumn{8}{|l|}{2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line \(\mathbf{3}\) (if Box \(\mathbf{C}\) above is checked) \(\qquad\)} \\
\hline
\end{tabular}

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column \((\mathrm{g})\) to correct the basis. See Column \((g)\) in the separate instructions for how to figure the amount of the adjustment.
223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1
UNITED JEWISH APPEAL-FEDERATION OF
JEWISH PHILANTHROPIES OF NEW YORK, INC.

Social security number or taxpayer identification no.

51-0172429
Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.
Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.
Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).
You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.
(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (F) Long-term transactions not reported to you on Form 1099-B
 above is checked), or line 10 (if Box F above is checked)

799,732.
Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column \((\mathrm{g})\) to correct the basis. See Column \((\mathrm{g})\) in the separate instructions for how to figure the amount of the adjustment.

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

2022
Department of the Treasury Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form4797 for instructions and the latest information.
JEWISH PHILANTHROPIES OF NEW YORK, INC.
\begin{tabular}{|c|l} 
& \\
\hline \(1 a\) & \\
\hline \(1 b\) & \\
\hline
\end{tabular}
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets

\section*{Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other} Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions)
\begin{tabular}{|c|c|c|c|c|c|c|c|c|}
\hline 2 & \begin{tabular}{l}
(a) Description of property \\
E STATEMENT 11
\end{tabular} & (b) Date acquired (mo., day, yr.) & (c) Date sold (mo., day, yr.) & (d) Gross sales price & (e) Depreciation allowed or allowable since acquisition & \multicolumn{2}{|l|}{(f) Cost or other basis, plus improvements and expense of sale} & (g) Gain or (loss) Subtract (f) from the sum of (d) and (e) \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline 3 & \multicolumn{6}{|l|}{Gain, if any, from Form 4684, line 39} & 3 & \\
\hline 4 & \multicolumn{6}{|l|}{Section 1231 gain from installment sales from Form 6252, line 26 or 37} & 4 & \\
\hline 5 & \multicolumn{6}{|l|}{Section 1231 gain or (loss) from like-kind exchanges from Form 8824} & 5 & \\
\hline 6 & \multicolumn{6}{|l|}{Gain, if any, from line 32, from other than casualty or theft} & 6 & \\
\hline 7 & \multicolumn{6}{|l|}{Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows} & 7 & 1,021,302. \\
\hline & \multicolumn{6}{|l|}{Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9 . Skip lines \(8,9,11\), and 12 below.} & & \\
\hline & \multicolumn{6}{|l|}{Individuals, partners, \(\mathbf{S}\) corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 . If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.} & & \\
\hline & \multicolumn{6}{|l|}{Nonrecaptured net section 1231 losses from prior years. See instructions ....................................................} & 8 & \\
\hline & \multicolumn{6}{|l|}{Subtract line 8 from line 7 . If zero or less, enter -0 . If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions} & 9 & 1,021,302. \\
\hline
\end{tabular}

\section*{Part II Ordinary Gains and Losses (see instructions)}
\(\mathbf{1 0} \quad\) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):


LHA For Paperwork Reduction Act Notice, see separate instructions.
Form 4797 (2022)


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

30 Total gains for all properties. Add property columns A through D, line 24

31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6
\begin{tabular}{|c|l}
\hline 30 & \\
\hline 31 & \\
\hline & \\
32 & \\
\hline
\end{tabular}

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

33 Section 179 expense deduction or depreciation allowable in prior years
34 Recomputed depreciation. See instructions
35 Recapture amount. Subtract line 34 from line 33 . See the instructions for where to report
\begin{tabular}{|l|}
\hline \multicolumn{1}{l|}{} \\
\hline 33 \\
\hline 34 \\
\hline 35 \\
\hline
\end{tabular}
\begin{tabular}{|c|c}
\begin{tabular}{c} 
(a) Section \\
179
\end{tabular} & \begin{tabular}{c} 
(b) Section \\
\(280 \mathrm{~F}(\mathrm{~b})(2)\)
\end{tabular} \\
\hline & \\
\hline & \\
\hline
\end{tabular}
\begin{tabular}{lccccc}
\hline \hline FORM 4797 & PROPERTY HELD MORE THAN ONE YEAR & STATEMENT 11 \\
\hline
\end{tabular} Go to www.irs. gov/Form1120 for instructions and the latest information.
Name

51-0172429

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ................................. \(\square\) Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.
\begin{tabular}{|c|c|c|c|c|c|c|}
\hline \multicolumn{7}{|l|}{Part I \(\quad\) Short-Term Capital Gains and Losses - Assets Held One Year or Less} \\
\hline \multicolumn{2}{|l|}{\begin{tabular}{l}
See instructions for how to figure the amounts to enter on the lines below. \\
This form may be easier to complete if you round off cents to whole dollars.
\end{tabular}} & \begin{tabular}{l}
(d) \\
Proceeds (sales price)
\end{tabular} & \begin{tabular}{l}
(e) \\
Cost (or other basis)
\end{tabular} & (g) Adjustments to or loss from Form(s) Part I, line 2, colum & & (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) \\
\hline \multicolumn{2}{|l|}{1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b} & & & & & \\
\hline \multicolumn{2}{|l|}{1b Totals for all transactions reported on Form(s) 8949 with Box A checked} & & & & & \\
\hline \multicolumn{2}{|l|}{2 Totals for all transactions reported on Form(s) 8949 with Box B checked} & & & & & \\
\hline \multicolumn{2}{|l|}{3 Totals for all transactions reported on Form(s) 8949 with Box C checked} & & & & & 8,429. \\
\hline \multicolumn{3}{|l|}{4 Short-term capital gain from installment sales from Form 6252, line 26 or 37} & & & 4 & \\
\hline \multicolumn{3}{|l|}{5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824} & & & 5 & \\
\hline \multicolumn{3}{|l|}{6 Unused capital loss carryover (attach computation)} & & & 6 & ) \\
\hline \multicolumn{5}{|l|}{7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h} & 7 & 8,429. \\
\hline
\end{tabular}

Part II


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

\section*{Form 8949}

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2022
Attachment 12A
Social security number or taxpayer identification no.

UNITED JEWISH APPEAL-FEDERATION OF
JEWISH PHILANTHROPIES OF NEW YORK, INC.
51-0172429
Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.
Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.
Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or
codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).
You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.
(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
(C) Short-term transactions not reported to you on Form 1099-B
\begin{tabular}{|c|c|c|c|c|c|c|c|}
\hline \multirow[t]{2}{*}{\begin{tabular}{cc}
\hline 1 & (a) \\
& Description of property \\
& (Example: \(100 \mathrm{sh} . \mathrm{XYZ}\) Co.)
\end{tabular}} & \multirow[t]{2}{*}{\begin{tabular}{l}
(b) \\
Date acquired (Mo., day, yr.)
\end{tabular}} & \multirow[t]{2}{*}{\begin{tabular}{l}
(c) \\
Date sold or disposed of (Mo., day, yr.)
\end{tabular}} & \multirow[t]{2}{*}{(d) Proceeds (sales price)} & \multirow[t]{2}{*}{\begin{tabular}{l}
(e) \\
Cost or other basis. See the Note below and see Column (e) in the instructions
\end{tabular}} & \multicolumn{2}{|l|}{Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.} & \multirow[t]{2}{*}{\begin{tabular}{l}
(h) \\
Gain or (loss). \\
Subtract column (e) from column (d) \& combine the result with column (g)
\end{tabular}} \\
\hline & & & & & \[
\begin{array}{|c|}
\hline(\mathbf{f}) \\
\text { Code(s) }
\end{array}
\] & (g) Amount of adjustment & \\
\hline BAUPOST VALUE, LP-I & & & & & & & 2,277. \\
\hline \multicolumn{8}{|l|}{TOWERBROOK STRUCTURED} \\
\hline OPPORTUNITIES FUND & & & & & & & 348. \\
\hline TA XIV-A, L.P. & & & & & & & <86.> \\
\hline \multicolumn{8}{|l|}{PATIENT SQUARE EQUITY} \\
\hline \multicolumn{2}{|l|}{PARTNERS - A, LP} & & & & & & 3,707. \\
\hline \multicolumn{8}{|l|}{NEW YORK JEWISH} \\
\hline INSTITUTIONS INVESTMENT & & & & & & & 2,183. \\
\hline \multicolumn{8}{|l|}{\multirow[t]{2}{*}{}} \\
\hline & & & & & & & \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline & & & & & & & \\
\hline \multicolumn{8}{|l|}{} \\
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\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline \multicolumn{8}{|l|}{} \\
\hline & & & & & & & \\
\hline & & & & & & & \\
\hline \multicolumn{8}{|l|}{2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line \(\mathbf{3}\) (if Box \(\mathbf{C}\) above is checked)} \\
\hline
\end{tabular}

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column \((\mathrm{g})\) to correct the basis. See Column \((\mathrm{g})\) in the separate instructions for how to figure the amount of the adjustment.
223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1
UNITED JEWISH APPEAL-FEDERATION OF
JEWISH PHILANTHROPIES OF NEW YORK, INC.

Social security number or taxpayer identification no.

51-0172429
Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.
Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.
Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).
You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.
(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (F) Long-term transactions not reported to you on Form 1099-B
 above is checked), or line 10 (if Box F above is checked)

799,732.
Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column \((\mathrm{g})\) to correct the basis. See Column \((\mathrm{g})\) in the separate instructions for how to figure the amount of the adjustment.

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

2022
Department of the Treasury Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form4797 for instructions and the latest information.
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JEWISH PHILANTHROPIES OF NEW YORK, INC.

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1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets
\begin{tabular}{c|c} 
& \\
\(1 a\) & \\
\hline & \\
\(1 b\) & \\
\hline
\end{tabular}

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions)
\begin{tabular}{|c|c|c|c|c|c|c|c|c|}
\hline 2
SEE & (a) Description of property STATEMENT 12 & (b) Date acquired (mo., day, yr.) & (c) Date sold (mo., day, yr.) & (d) Gross sales price & (e) Depreciation allowed or allowable since acquisition & \multicolumn{2}{|l|}{(f) Cost or other basis, plus improvements and expense of sale} & (g) Gain or (loss) Subtract (f) from the sum of (d) and (e) \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline 3 & \multicolumn{6}{|l|}{Gain, if any, from Form 4684, line 39} & 3 & \\
\hline 4 & \multicolumn{6}{|l|}{Section 1231 gain from installment sales from Form 6252, line 26 or 37} & 4 & \\
\hline 5 & \multicolumn{6}{|l|}{Section 1231 gain or (loss) from like-kind exchanges from Form 8824} & 5 & \\
\hline 6 & \multicolumn{6}{|l|}{Gain, if any, from line 32, from other than casualty or theft} & 6 & \\
\hline 7 & \multicolumn{6}{|l|}{Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows} & 7 & 1,021,302. \\
\hline & \multicolumn{6}{|l|}{Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9 . Skip lines 8, 9, 11, and 12 below.} & & \\
\hline & \multicolumn{6}{|l|}{Individuals, partners, \(\mathbf{S}\) corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 . If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule \(D\) filed with your return and skip lines \(8,9,11\), and 12 below.} & & \\
\hline 8 N & \multicolumn{6}{|l|}{Nonrecaptured net section 1231 losses from prior years. See instructions} & 8 & \\
\hline & \multicolumn{6}{|l|}{Subtract line 8 from line 7 . If zero or less, enter -0 . If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions} & 9 & 1,021,302. \\
\hline
\end{tabular}

\section*{Part II Ordinary Gains and Losses (see instructions)}

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):



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

30 Total gains for all properties. Add property columns A through D, line 24

31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6
\begin{tabular}{|c|l}
\hline 30 & \\
\hline 31 & \\
\hline & \\
32 & \\
\hline
\end{tabular}

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

33 Section 179 expense deduction or depreciation allowable in prior years
34 Recomputed depreciation. See instructions
35 Recapture amount. Subtract line 34 from line 33 . See the instructions for where to report
\begin{tabular}{|l|}
\hline \multicolumn{1}{l|}{} \\
\hline 33 \\
\hline 34 \\
\hline 35 \\
\hline
\end{tabular}
\begin{tabular}{|c|c}
\begin{tabular}{c} 
(a) Section \\
179
\end{tabular} & \begin{tabular}{c} 
(b) Section \\
\(280 \mathrm{~F}(\mathrm{~b})(2)\)
\end{tabular} \\
\hline & \\
\hline & \\
\hline
\end{tabular}


UNITED JEWISH APPEAL - FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC
YEAR ENDED JUNE 30, 2023
Net Operating Loss Carryover
\begin{tabular}{|c|c|c|c|c|c|}
\hline Trade or Busine & Working Interes & and Gas Pro & & & \\
\hline Tax Period & Original NOL & NOL Utilized Prior Year & NOL Utilized Current Year Or Expired & NOL Carried Forward & Year of Expiration \\
\hline 6/30/2019 & \((86,285)\) & 29,473 & 52,931 & \((3,881)\) & N/A \\
\hline 6/30/2020 & \((286,998)\) & & & \((286,998)\) & N/A \\
\hline 6/30/2021 & \((253,972)\) & & & \((253,972)\) & N/A \\
\hline & & Carryforward & 30/2024 & \((544,851)\) & \\
\hline
\end{tabular}

Trade or Business: Investments in Limited Partnerships
NOL Utilized
Tax Period

6/30/2019 6/30/2020
6/30/2021
6/30/2022
\begin{tabular}{|c|c|c|}
\hline Original NOL & NOL Utilized Prior Year & NOL Utilized Current Year Or Expired \\
\hline \((2,180,789)\) & & 73,979 \\
\hline \((1,415,335)\) & & \\
\hline \((1,105,791)\) & & \\
\hline \((947,188)\) & & \\
\hline
\end{tabular}
\begin{tabular}{rl} 
NOL Carried Forward & \\
\begin{tabular}{rl}
\((2,106,810)\) & Year of Expiration \\
\((1,415,335)\) & N/A \\
\((1,105,791)\) & N/A \\
\((947,188)\) & N/A \\
\hline\((5,575,124)\) &
\end{tabular} \\
\hline
\end{tabular}

United Jewish Appeal-Federation of Jewish Philanthropies

FEDERAL ELECTIONS

DESCRIPTION: DE MINIMIS SAFE HARBOR ELECTION

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

United Jewish Appeal-Federation of Jewish Philanthropies of New York, Inc. ("UJA")
130 East 59th Street
New York, NY 10022-1302
UJA ELECTS THE DE MINIMIS SAFE HARBOR ELECTION UNDER TREAS. REG. SEC.1.263(A)-1(F) FOR THE TAXABLE YEAR ENDED JUNE 30, 2023.

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

FEDERAL ELECTIONS


DESCRIPTION: BOOK CONFORMITY CAPITALIZATION ELECTION

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

United Jewish Appeal-Federation of Jewish Philanthropies of New York, Inc. ( "UJA")
130 East 59th Street
New York, NY 10022-1302
UJA ELECTS THE BOOK CONFIRMITY CAPITALIZATION ELECTION UNDER TREAS. REG. SEC. 1.263(A)-3(N) FOR THE TAXABLE YEAR ENDED JUNE 30, 2023.

Corporate and Real Estate Investment Trust (REIT) Report of Net 965
Tax Liability and Electing REIT Report of 965 Amounts
\(\rightarrow\) Go to www.irs.gov/Form965B for instructions and the latest information.


REITs Electing To Account for Section 965 Amounts Over Time Must Fill Out Part III.
Part I Report of Net 965 Tax Liability and Election To Pay in Installments
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|}
\hline \multirow[t]{2}{*}{} & \multirow[t]{2}{*}{\begin{tabular}{c|} 
(a) \\
Year of \\
Section \\
\(96(a)\) \\
Inclusion or \\
Liability \\
Assumed \\
(see instructions)
\end{tabular}} & \multirow[t]{2}{*}{\[
\begin{gathered}
\text { (b) } \\
\text { Taxpayer's Net Tax Liability } \\
\text { With all } \\
965 \text { Amounts } \\
\text { (see instructions) }
\end{gathered}
\]} & \multirow[t]{2}{*}{```
                (c)
Taxpayer's Net Tax Liability
    Without
    965 Amounts
    (see instructions)
```} & \multirow[t]{2}{*}{(d)
Net 965 Tax Liability
(subtract column (c) (subtract column (c) from column (b))} & \multicolumn{2}{|l|}{\[
\begin{array}{|c}
\text { (e) } \\
\text { Installment } \\
\text { Election } \\
\text { Made }
\end{array}
\]} & \multirow[t]{2}{*}{\begin{tabular}{l}
(f) \\
Net 965 Tax Liability To Be Paid in Full in Year 1 (if column (e) is "No," enter amount from column (d))
\end{tabular}} & \multirow[t]{2}{*}{\begin{tabular}{l}
(g) \\
Net 965 Tax Liability To Be Paid in Installments (if column (e) is "Yes," enter amount from column (d) and see instructions)
\end{tabular}} & \multirow[t]{2}{*}{\begin{tabular}{l}
(h) \\
Net 965 Tax Liability Transferred (Out), Transferred In, or Subsequent Adjustments, if any (see instructions)
\end{tabular}} & \multirow[t]{2}{*}{\begin{tabular}{|c} 
(i) \\
Tax \\
Identification \\
Number \\
of Buyer \\
Transferee or \\
Sellerl \\
Transferor \\
\hline
\end{tabular}} \\
\hline & & & & & Yes & No & & & & \\
\hline 1 & 2017 & 641,151.00 & 222,273.00 & 418,878.00 & X & & 0.00 & 418,878.00 & 0.00 & N/A \\
\hline 2 & 2018 & 0.00 & 0.00 & 0.00 & & X & 0.00 & 0.00 & 0.00 & N/A \\
\hline 3 & 2019 & 0.00 & 0.00 & 0.00 & & X & 0.00 & 0.00 & 0.00 & N/A \\
\hline 4 & 2020 & 0.00 & 0.00 & 0.00 & & X & 0.00 & 0.00 & 0.00 & N/A \\
\hline 5 & 2021 & 0.00 & 0.00 & 0.00 & & X & 0.00 & 0.00 & 0.00 & N/A \\
\hline 6 & 2022 & 0.00 & 0.00 & 0.00 & & X & 0.00 & 0.00 & 0.00 & N/A \\
\hline 7 & & & & & & & & & & \\
\hline 8 & & & & & & & & & & \\
\hline
\end{tabular}

\section*{Part II Record of Amount of Net 965 Tax Liability Paid by the Taxpayer (see instructions)}
\begin{tabular}{|c|c|c|c|c|c|c|}
\hline & \[
\begin{aligned}
& \text { (a) } \\
& \text { Year of Section 965(a) } \\
& \text { Inccusion or } \\
& \text { Liability sssumed } \\
& \text { (see instructions) }
\end{aligned}
\] & \begin{tabular}{l}
(b) \\
Paid for Year 1
\end{tabular} & \[
\begin{aligned}
& \text { (c) } \\
& \text { Paid for Year } 2
\end{aligned}
\] & \begin{tabular}{l}
(d) \\
Paid for Year 3
\end{tabular} & \begin{tabular}{l}
(e) \\
Paid for Year 4
\end{tabular} & \[
\stackrel{(f)}{\text { Paid for Year } 5}
\] \\
\hline 1 & 2017 & 33,510.00 & 33,510.00 & 33,510.00 & 33,510 & 33,510.00 \\
\hline 2 & 2018 & 0.00 & 0.00 & 0.00 & & 0.00 \\
\hline 3 & 2019 & 0.00 & 0.00 & 0.00 & & 0.00 \\
\hline 4 & 2020 & 0.00 & 0.00 & 0.00 & & 0.00 \\
\hline 5 & 2021 & 0.00 & 0.00 & 0.00 & & 0.00 \\
\hline 6 & 2022 & 0.00 & 0.00 & 0.00 & & 0.00 \\
\hline 7 & & & & & & \\
\hline 8 & & & & & & \\
\hline & \begin{tabular}{l}
(g) \\
Paid for Ye
\end{tabular} & \[
\begin{array}{r}
\text { (h } \\
\text { Paid for }
\end{array}
\] & & Remain & Liability ee instructions) & Net 965 (k)
Tax Liability
Paid for the Reporting Year \\
\hline 1 & 62 & & & & 8,496.00 & 62,832.00 \\
\hline 2 & & & & & 0.00 & 0.00 \\
\hline 3 & & & & & 0.00 & 0.00 \\
\hline 4 & & & & & 0.00 & 0.00 \\
\hline 5 & & & & & 0.00 & 0.00 \\
\hline 6 & & & & & 0.00 & 0.00 \\
\hline 7 & & & & & & \\
\hline 8 & & & & & & \\
\hline \multicolumn{4}{|l|}{Totals . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .} & ... \({ }^{-}\) & 8,496.00 & 62,832.00 \\
\hline
\end{tabular}
\begin{tabular}{|c|c|c|c|c|c|c|}
\hline & \begin{tabular}{l}
(a) \\
Tax Year of \\
Section 965 (a) Inclusion and Section 965(c) Deduction
\end{tabular} & \begin{tabular}{l}
(b) \\
Amount Elected To Be Accounted for Over Time
\end{tabular} & \begin{tabular}{l}
(c) \\
Portion Accounted for in Year 1
\end{tabular} & \begin{tabular}{l}
(d) \\
Portion Accounted for in Year 2
\end{tabular} & \begin{tabular}{l}
(e) \\
Portion Accounted for in Year 3
\end{tabular} & (f) Portion Accounted for in Year 4 \\
\hline 1a & 2017 Section 965(a) Inclusion & & & & & \\
\hline 1b & 2017 Section 965(c) Deduction & & & & & \\
\hline 2a & 2018 Section 965(a) Inclusion & & & & & \\
\hline 2b & 2018 Section 965(c) Deduction & & & & & \\
\hline 3a & 2019 Section 965(a) Inclusion & & & & & \\
\hline 3b & 2019 Section 965(c) Deduction & & & & & \\
\hline 4a & 2020 Section 965(a) Inclusion & & & & & \\
\hline 4b & 2020 Section 965(c) Deduction & & & & & \\
\hline & \begin{tabular}{l}
(g) \\
Portion Accounted for in Year 5
\end{tabular} & \begin{tabular}{l}
(h) \\
Portion Accounted for in Year 6
\end{tabular} & \begin{tabular}{l}
(i) \\
Portion Accounted for in Year 7
\end{tabular} & \[
\begin{aligned}
& \text { (j) } \\
& \text { Portion Accounted for in } \\
& \text { Year } 8
\end{aligned}
\] & (k) Amount Remaining To Be Accounted for & \begin{tabular}{l}
(I) \\
Portion Accounted for in This Reporting Year
\end{tabular} \\
\hline 1a & & & & & & \\
\hline 1b & & & & & & \\
\hline 2a & & & & & & \\
\hline 2b & & & & & & \\
\hline 3a & & & & & & \\
\hline 3b & & & & & & \\
\hline 4a & & & & & & \\
\hline 4b & & & & & & \\
\hline Tota & Is . . . . & . . . . . . . . . . . & . & . . . . . . . . . & 0.00 & 0.00 \\
\hline \multicolumn{7}{|l|}{If more lines are needed for any Parts on this form, attach additional sheets.} \\
\hline
\end{tabular}


\section*{Section II - Adjusted Taxable Income}
\begin{tabular}{|c|c|c|c|c|c|}
\hline \multicolumn{6}{|c|}{Tentative Taxable Income} \\
\hline 6 & \multicolumn{4}{|l|}{Tentative taxable income. See instructions . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 6} & 155,465.00 \\
\hline \multicolumn{6}{|c|}{Additions (adjustments to be made if amounts are taken into account on line 6)} \\
\hline 7 & Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions . . . . . . . . . . . & 7 & & & \\
\hline 8 & Any business interest expense not from a pass-through entity. See instructions & 8 & 87,962.00 & & \\
\hline 9 & Amount of any net operating loss deduction under section 172 & 9 & & & \\
\hline 10 & Amount of any qualified business income deduction allowed under section 199A & 10 & & & \\
\hline 11 & Reserved for future use. & 11 & & & \\
\hline 12 & Amount of any loss or deduction items from a pass-through entity. See instructions. & 12 & 1,354,517.00 & & \\
\hline 13 & Other additions. See instructions. & 13 & 916,812.00 & & \\
\hline 14 & Total current year partner's excess taxable income (Schedule A, line 44, column (f)) & 14 & 3,607,391.00 & & \\
\hline 15 & Total current year \(S\) corporation shareholder's excess taxable income (Schedule B, line 46, column (c)) & 15 & & & \\
\hline 16 & Total. Add lines 7 through 15 . . . . . . . . . . . . . . . . . . . . . & & . . . . & 16 & 5,966,682.00 \\
\hline
\end{tabular}

\section*{Reductions (adjustments to be made if amounts are taken into account on line 6)}


\section*{Section III - Business Interest Income}


\section*{Section IV - 163(j) Limitation Calculations}

\section*{Limitation on Business Interest Expense}


\section*{Excess Business Interest Income}

37 Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter \(-0-\).).

\section*{Part III S Corporation Pass-Through Items}

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.
\begin{tabular}{|c|c|c|c|}
\hline \multicolumn{4}{|c|}{Excess Taxable Income} \\
\hline 38 & Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) & 38 & \\
\hline 39 & Subtract line 38 from line 26. (If zero or less, enter -0-.). & 39 & \\
\hline 40 & Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) & 40 & \\
\hline 41 & Excess taxable income. Multiply line 40 by line 22. & 41 & \\
\hline
\end{tabular}

\section*{Excess Business Interest Income}


\section*{SCHEDULE A Summary of Partner's Section 163(j) Excess Items}

Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I.
\begin{tabular}{|c|c|c|c|c|c|c|c|c|}
\hline \multirow[b]{2}{*}{(a) Name of partnership} & \multirow[b]{2}{*}{(b) EIN} & \multicolumn{3}{|c|}{Excess Business Interest Expense} & \multirow[t]{2}{*}{(f) Current year excess taxable income} & \multirow[t]{2}{*}{(g) Current year excess business interest income} & \multirow[t]{2}{*}{(h) Excess business interest expense treated as paid or accrued (see instructions)} & \multirow[t]{2}{*}{(i) Current year excess business interest expense carryforward (see instructions)} \\
\hline & & (c) Current year (see instructions) & \[
\begin{aligned}
& \text { (d) Prior year } \\
& \text { carryforward } \\
& \text { (see instructions) }
\end{aligned}
\] & \begin{tabular}{l}
(e) Total \\
((c) plus (d))
\end{tabular} & & & & \\
\hline 43 SEE STATEMENT 1 & & 0.00 & 0.00 & 0.00 & 3,607,391.00 & 4,117,282.00 & 0.00 & 0.00 \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & & & \\
\hline 44 Total & & & & & 3,607,391.00 & 4,117,282.00 & & \\
\hline
\end{tabular}

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

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule \(B\) before completing Part I.
\begin{tabular}{ll|l|l|l}
\hline (a) Name of \(S\) corporation & (b) EIN & \begin{tabular}{c} 
(c) Current year excess \\
taxable income
\end{tabular} \\
\hline 45 & & & \\
\hline
\end{tabular}
\begin{tabular}{|c|c|c|c|c|c|c|c|c|}
\hline SCHEDULE A & \multicolumn{8}{|l|}{Summary of Partner's Section 163(j) Excess Items} \\
\hline \multicolumn{9}{|l|}{Any taxpayer that owns an interest in a partnership subject to \(\delta 163(j)\) should complete Schedule A before completing Part l.} \\
\hline \multirow[t]{2}{*}{(a) Name of partnership} & \multirow[b]{2}{*}{(b) EIN} & \multicolumn{3}{|c|}{Excess business Interest Expense} & \multirow[t]{2}{*}{(f) Current year excess taxable income} & \multirow[t]{2}{*}{(g) Current year excess business interest income} & \multirow[t]{2}{*}{(h) Excess business interest expense treated as paid or accrued (lesser of (e) or (f) plus (g))} & \multirow[t]{2}{*}{(i) Current year excess business interest expense carryover ((e) minus (h))} \\
\hline & & (c) Current year & (d) Prior year carryover & (e) Total ( (c) plus (d)) & & & & \\
\hline 43 ATALAYA ASSET INCOME FUND EVERGREEN LP & 87-3063695 & & & & & 214,935 & & - \\
\hline B. BROS REALTY & 20-0860290 & & & & 1,664,033 & & & - \\
\hline BAUPOST VALUE, LP-I & 04-3506440 & & & & 632,770 & 124,123 & & - \\
\hline CCP III CAYMAN & 98-1229956 & & & & & & & - \\
\hline CCP III AIV IV, LP & 47-3258246 & & & & & & - & - \\
\hline CCP III AIV V, LP & 81-4932198 & & & & & & & - \\
\hline CCP III AIV VI, LP & 81-3995892 & & & & & & & - \\
\hline FOUNDRY GROUP NEXT, LP & 81-2277556 & & & & & & & - \\
\hline NEW YORK JEWISH INSTITUTIONS INVESTMENT FUND, LLC & 87-3040261 & & & & 1,243,052 & 3,778,224 & & - \\
\hline KKR ENERGY INCOME AND GROWTH & 68-0683554 & & & & & & - & - \\
\hline LS POWER EQUITY II, LP & 20-5721263 & & & & & & & - \\
\hline PINE BROOK CAPITAL PARTNERS II, LP & 37-1699332 & & & & & & - & - \\
\hline ROARK CAPITAL PARTNERS IV AIV I-U, LP & 81-2828481 & & & & 65,984 & & & - \\
\hline ROARK CAPITAL PARTNERS V (T), LP & **-***1234 & & & & & & - & - \\
\hline ROARK CAPITAL PARTNERS VI (T) LP & 98-1577468 & & & & 1,552 & & - & - \\
\hline TA XIV-A LP & 98-1593338 & & & & & & & - \\
\hline TOWERBROOK STRUCTURED OPPORTUNITIES FUND II (ONSHORE), L.P. & 98-1414551 & & & & & & - & - \\
\hline VINTAGE FUND OF FUNDS V (ACCESS), LP & 98-1431108 & & & & & & & - \\
\hline WARBURG PINCUS FINANCIAL SECTOR (CAYMAN), L.P. & 98-1379177 & & & & & & - & - \\
\hline & & & & & & & & - \\
\hline & & & & & & & - & - \\
\hline & & & & & & & & - \\
\hline & & & & & & & - & - \\
\hline & & & & & & & - & - \\
\hline & & & & & & & & \\
\hline & & & & & & & - & - \\
\hline 44 Total . . . . . . & & & & & 3,607,391 & 4,117,282 & & \\
\hline \multicolumn{9}{|l|}{SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income} \\
\hline \multicolumn{4}{|l|}{(a) Name of S corporation} & (b) EIN & \multicolumn{2}{|l|}{(c) Current year excess taxable income} & \multicolumn{2}{|l|}{(d) Current year excess business interest income} \\
\hline \multicolumn{9}{|l|}{\multirow[t]{2}{*}{45}} \\
\hline & & & & & & & & \\
\hline \multicolumn{9}{|l|}{\multirow[t]{2}{*}{}} \\
\hline & & & & & & & & \\
\hline \multicolumn{9}{|l|}{\multirow[t]{2}{*}{}} \\
\hline & & & & & & & & \\
\hline 46 Total . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . & & & & & & - & & - \\
\hline
\end{tabular}
(Rev. December 2020)
Department of the Treasury Department of the Treasury
Internal Revenue Service Tax on Base Erosion Payments of Taxpayers With Substantial Gross Receipts
, \(\mathbf{2 0} 22\), and ending \(06 / 30\)
\(>\) Go to www.irs.gov/Form8991 for instructions and the latest information.
\(>\) See instructions.
\begin{tabular}{ll} 
Name \\
UNITED JEWISH APPEAL - FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC. & Employer identification number \\
\(51-0172429\) \\
\hline
\end{tabular}

\section*{Part I Applicable Taxpayer Determination}

Check box if this form is being filed by a taxpayer with which another taxpayer has been aggregated under Regs. section 1.59A-2(c). If the above box is checked, attach a statement listing the names and EINs of all separate taxpayers taken into account in the determination of "1 person" under Regs. section 1.59A-2(c).


For Paperwork Reduction Act Notice, see separate instructions.
Form 8991 (Rev. 12-2020)

Part II Modified Taxable Income (MTI)

\begin{tabular}{|c|c|c|c|c|c|c|c|}
\hline Does the taxpayer elect to use financial statements per Regs. allocable to a foreign corporation's effectively connected income? & \begin{tabular}{l} 
ction \begin{tabular}{l} 
1.59A-3(b)(4) \\
Yes \\
\hline
\end{tabular}\(\quad\) No \\
\hline
\end{tabular} & for purpo & of calculating & rest expense & & all applicable bo s (c), (d), and (e) & \\
\hline & (a-1) & (a-2) & (b-1) & (b-2) & (c) & (d) & (e) \\
\hline Type of Base Erosion Payments & Aggregate Group's Base Erosion Payments & Aggregate Group's Base Erosion Tax Benefits & Taxpayer's Base Erosion Payments & Taxpayer's Base Erosion Tax Benefits & Any 25\% Owner of the Taxpayer & Person Related Under Sections 267 (b) or 707(b)(1) to the Taxpayer or Any 25\% Owner of the Taxpayer & Any Person Related Within the Meaning of Section 482 to the Taxpayer \\
\hline 1 Reserved for future use & & & & & & & \\
\hline 2 Reserved for future use & & & & & & & \\
\hline 3 Purchase or creations of property rights for intangibles (patents, trademarks, etc.). & & & & & & & \\
\hline 4 Rents, royalties, and license fees . & & & & & & & \\
\hline 5a Compensation/consideration paid for services NOT excepted by Regs. section 1.59A-3(b)(3)(i) & & & & & & & \\
\hline b Compensation/consideration paid for services excepted by Regs. section 1.59A-3(b)(3)(i) . . . . . . . . . . \$ & & & & & & & \\
\hline 6 Interest expense & & & & & & & \\
\hline 7 Payments for the purchase of tangible personal property & & & & & & & \\
\hline 8 Premiums and/or other considerations paid or accrued for insurance and reinsurance as covered by Regs. section 1.59A-3(b) (1)(iii). & & & & & & & \\
\hline
\end{tabular}
\begin{tabular}{|c|c|c|c|c|c|c|c|}
\hline \multirow[t]{2}{*}{} & & & & & & all applicable bo s (c), (d), and (e) & \\
\hline & (a-1) & (a-2) & (b-1) & (b-2) & (c) & (d) & (e) \\
\hline Type of Base Erosion Payments & Aggregate Group's Base Erosion Payments & Aggregate Group's Base Erosion Tax Benefits & Taxpayer's Base Erosion Payments & Taxpayer's Base Erosion Tax Benefits & Any 25\% Owner of the Taxpayer & Person Related Under Sections 267 (b) or 707(b)(1) to the Taxpayer or Any 25\% Owner of the Taxpayer & Any Person Related Within the Meaning of Section 482 to the Taxpayer \\
\hline \multirow[t]{3}{*}{\begin{tabular}{l}
9a Nonqualified derivative payments . . . . . . . . . . . . . . . . . \\
b Qualified derivative payments excepted by Regs. section 1.59A-6(b) . . . . . . . . . . . . . . . . \$ \(\qquad\) \\
10 Payments reducing gross receipts made to surrogate foreign corporation
\end{tabular}} & & & & & & & \\
\hline & & & & & & & \\
\hline & & & & & & & \\
\hline \multirow[t]{3}{*}{\begin{tabular}{l}
11 Other payments - specify. \\
12 Combine lines 3 through 11 \\
13 Base erosion tax benefits related to payments reported on lines 3 through 11, on which tax is imposed by section 871 or 881 , with respect to which tax has been withheld under section 1441 or 1442 at \(30 \%\) statutory withholding tax rate
\end{tabular}} & & & & & & & \\
\hline & NONE & NONE & NONE & NONE & & & \\
\hline & & & & & & & \\
\hline 14 Portion of base erosion tax benefits reported on lines 3 through 11 , on which tax is imposed by section 871 or 881 , with respect to which tax has been withheld under section 1441 or 1442 at reduced withholding rate pursuant to income tax treaty. Multiply ratio of percentage withheld divided by \(30 \%\) times tax benefit. See instructions. & & NONE & & NONE & & & \\
\hline 15 Total base erosion tax benefits. Subtract the sum of line 13 and line 14 from line 12. Enter the amount from column (a-2) in Part I, line 2a. Enter the amount from column (b-2) in Part II, line 3b. . . . & & NONE & & NONE & & & \\
\hline
\end{tabular}
(a)
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|}
\hline & \begin{tabular}{l}
(a) \\
Description of item or property to which the deduction relates
\end{tabular} & Date on which, or period in which, the waived deduction was paid or accrued & Provision of Code and regulations, as applicable, that allows the deduction for which this election relates & Line number on the controlled group member tax return where the deduction is reported & Name of foreign related party that is or will be the recipient of the payment that generates the deduction & Taxpayer Identification Number of foreign related party & Country of organization of the foreign related party & Amount of deduction claimed for the tax year with respect to the item or property & Amount of deduction being waived for the tax year with respect to the item or property \\
\hline 1 & & & & & & & & & \\
\hline 2 & & & & & & & & & \\
\hline 3 & & & & & & & & & \\
\hline 4 & & & & & & & & & \\
\hline 5 & & & & & & & & & \\
\hline 6 & & & & & & & & & \\
\hline 7 & & & & & & & & & \\
\hline 8 & & & & & & & & & \\
\hline 9 & & & & & & & & & \\
\hline 10 & & & & & & & & & \\
\hline 11 & & & & & & & & & \\
\hline 12 & & & & & & & & & \\
\hline 13 & & & & & & & & & \\
\hline 14 & Totals from attachment, if necessary & & & & & & - • • • • & & \\
\hline 15 & Total deductions waived per Regula & section 1.5 & 3(c)(6)(i). A & he amounts & column (i). & er the result & e and on P & I, line 2i . & \\
\hline
\end{tabular}

\section*{Schedule C \(\quad\) Credits Reducing Regular Tax Liability in Computing Base Erosion Minimum Tax Amount (BEMTA)}

Part I Credits Allowed Against Regular Tax (see instructions)
1 Total credits allowed in current year. See instructions
2 Credits for increasing research activities from line 1c of all Parts III of Form 3800
3 Total allowed credit for increasing research activities for current year. Enter the amount of research credit reported in Form 3800, Part II, line 38. See instructions
\begin{tabular}{|c|c|c|}
\hline \multirow[b]{2}{*}{2} & 1 & \\
\hline & & \\
\hline \multicolumn{3}{|l|}{ount of research} \\
\hline & 3 & \\
\hline & 4 & \\
\hline & 5 & \\
\hline & 6 & \\
\hline Enter here and & 7 & \\
\hline
\end{tabular}

4 Enter smaller of Schedule C, Part II, line 11 or Part III, line 16
5 Limitation of applicable section 38 credits. Multiply line 4 by \(80 \%\) ( 0.80 )
6 Adjustments to allowed credits. Add lines 3 and 5
7 Credits allowed against regular tax in computing BEMTA. Subtract line 6 from line 1. Enter here and on Form 8991, line 4b

\section*{Part II Applicable Section 38 Credits}
(Only complete Parts II and III if you have allowed applicable section 38 credits.)
8 Low-income housing credit from lines 1d and 4d of all Parts III of Form 3800
9 Renewable electricity production credit but only to extent of the renewable electricity under section 45(a) from lines 1 f and 4 e of all Parts III of Form 3800
10 Investment credit but only to extent of energy credit property under section 48 from line 4a of all Parts III of Form 3800.



\section*{Part III BEMTA Determined Without Adjustment for Applicable Section 38 Credits}

12 Base erosion minimum tax (Form 8991, line 5c)
\begin{tabular}{|l|l}
\hline 12 & \\
\hline 13 & \\
\hline 14 & \\
\hline 15 & \\
\hline 16 & \\
\hline
\end{tabular}

UNITED JEWISH APPEAL- FEDERATION OF JEWISH PHILANTHROPIES OF NEW YORK, INC.
51-0172429
JUNE 30, 2023

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

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

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

