# EXTENDED TO NOVEMBER 15, 2022

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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 F	or the	2021 calendar year, or tax year beginning and	ending					
<b>B</b> c	heck if oplicable	C Name of organization		D Employer identifie	cation number			
Г	Addres							
	Name change			20-34062	11			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r			
	Final return/	5551 BALBOA BOULEVARD		818-501-	1836			
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 870,583.				
	Amend return	ENCINO, CA 91310		H(a) Is this a group re				
	Application	F Name and address of principal officer: DERENA ZEISE OBERSI	EIN	for subordinates	? Yes X No			
	pendin	SAME AS C ABOVE		H(b) Are all subordinates included? Yes No				
		mpt status: X 501(c)(3)	or 527	If "No," attach a	list. See instructions			
		e: ► WWW.JWW.ORG		H(c) Group exemptio				
		organization: X Corporation	<b>L</b> Year	of formation: 2005 N	1 State of legal domicile: CA			
Pa		Summary	711 T.TOD	TD MARGIT TO	7.37			
ø		Briefly describe the organization's mission or most significant activities: <u>JEWIS</u>						
anc	-	EXPRESSION OF JUDAISM IN ACTION, BRINGING						
rern		Check this box  if the organization discontinued its operations or dispos		1 1	sets.			
Š		Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)			20			
જ		Fotal number of individuals employed in calendar year 2021 (Part V, line 1a)			7			
ţie		Fotal number of violunteers (estimate if necessary)			0			
Activities & Governance		Fotal unrelated business revenue from Part VIII, column (C), line 12			0.			
Ă		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
				Prior Year	Current Year			
•	8 (	Contributions and grants (Part VIII, line 1h)		916,166.	868,233.			
nue		Program service revenue (Part VIII, line 2g)		0.	0.			
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,776.	217.			
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		123,300.	0.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,041,242.	868,450.			
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		103,008.	116,406.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
Se		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		604,968.	617,173.			
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
ă		Fotal fundraising expenses (Part IX, column (D), line 25)		0.40 1.00	010 262			
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		249,198.	218,363.			
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		957,174. 84,068.	951,942. -83,492.			
s	19	Revenue less expenses. Subtract line 18 from line 12						
Net Assets or Fund Balances	20.	Fatal accepts (Part V. line 16)		ginning of Current Year 1,248,265.	End of Year 1,231,471.			
Asse Bala	20 <sup>-</sup> 21 <sup>-</sup>	Fotal assets (Part X, line 16) Fotal liabilities (Part X, line 26)		178,825.	116,423.			
Vet/ und	22	Net assets or fund balances. Subtract line 21 from line 20		1,069,440.	1,115,048.			
	rt II	Signature Block			2/223/0100			
Unde	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is			
		, and complete. Declaration of preparer (other than officer) is based on all information of wh			,			
		<b>\</b>						
Sigr	ւ	Signature of officer		Date				
Her	е	SERENA ZEISE OBERSTEIN, EXECUTIVE DIRE	CTOR					
		Type or print name and title						
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN			
Paid	1	NAZ AFSHAR		11-15-2022   if self-employ				
Prep	1	Firm's name GURSEY   SCHNEIDER LLP // U	Firm's EIN ▶	95-3309779				
Use	Only	Firm's address 1888 CENTURY PARK E, #900			0 550 0060			
		LOS ANGELES, CA 90067		Phone no. 31	0-552-0960			
May	the IR	S discuss this return with the preparer shown above? See instructions			X Yes No			

) (Revenue \$

Other program services (Describe on Schedule O.)

Total program service expenses

including grants of \$

664,708.

# Form 990 (2021) JEWISH WORLD WATCH Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	110		
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		1
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
ч	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е		11e		X
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	116		
•	the organization's separate of consolidated infancial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	, ,	12a	Х	
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
b		12b		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	B. 11	14a		X
14a b		170		<del> </del>
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	<del>''-''</del>	<del></del>	
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	"		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17		10		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		X
12	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<del>  ''</del>		1
18		18	Х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	<b>⊢</b> °	- 22	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		x
20-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	04		X
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		$\Gamma \nabla$

Form 990 (2021) JEWISH WORLD WATCH
Part IV Checklist of Required Schedules (continued)

			Yes	No
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	22		Х
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	23		Х
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	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		X
b	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	25b		Х
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	26		X
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	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?     F   Contract   Con	00-		х
<b>L</b>	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	,	28c		х
29	"Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
-	Schedule N, Part II	32		х
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	33		х
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	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	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	35b		
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	36		Х
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	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			$\square$
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

Form 990 (2021)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No						
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		7.7							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			7						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4-		X						
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country	4a								
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-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).									
а	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								
С	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									
е	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 7g		X						
g										
_	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			Х						
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	8								
а	Did the appropriate angle and to the distribution and a second and the distributions and an application 40000	9a		Х						
b	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X						
10	Section 501(c)(7) organizations. Enter:	0.0								
а	Initiation fees and capital contributions included on Part VIII, line 12									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
h	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the									
b	organization is licensed to issue qualified health plans									
c	Enter the amount of reserves on hand									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х						
	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		Х						
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any									
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									

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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

Sec	tion A. Governing Body and Management			21
000	tion 7. Governing body and Management		Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year 20		103	140
	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  1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	-		
2	afficient diseases to the control of	2		х
2	Did the organization delegate control over management duties customarily performed by or under the direct supervision			-25
3				х
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		
7a		_		
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	l		.,
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		37	
а		8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		1	I
			Yes	_
	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on 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	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on 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?	16a		X
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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
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)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request X 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, an	d finan	cial	
	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			
	JAN SNIDER - (818)501-1836			
	5551 BALBOA BLVD, ENCINO, CA 91316			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organiza  (A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(da		Pos	itior	l than o		Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	son i	s both	n an	compensation	compensation	amount of
	week	-	cer an	d a d	a director/trustee)			from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	96 Or C	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	al tru:		oyee	n bei		1099-NEC)		and related
	below	vidual	Institutional trustee	ser	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	lust	Officer	Key	High	Former			
(1) SERENA ZEISE OBERSTEIN	30.00	-								
EXECUTIVE DIRECTOR				X				130,000.	0.	0.
(2) DIANA BUCKHANTZ	5.00									
CO-CHAIRWOMAN		Х		X				0.	0.	0.
(3) JANE Z. COHEN	5.00	ļ								
CO-CHAIRWOMAN	1 00	Х		Х				0.	0.	0.
(4) DANIEL HEYMAN	1.00								•	•
TREASURER	1 00	Х		Х				0.	0.	0.
(5) VAUGHAN MEYER	1.00	.,							_	0
SECRETARY	1 00	Х		Х				0.	0.	0.
(6) DIANE KABAT	1.00	<b>.</b> ,							0	0
DIRECTOR (7) JANICE KAMENIR REZNIK	1.00	Х						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(8) JIM ZUKIN	1.00	Δ						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(9) JOHN FISHEL	1.00							0.	0.	0.
DIRECTOR	1.00	х						0.	0.	0.
(10) STUART GABRIEL	1.00							•	•	•
DIRECTOR	1100	х						0.	0.	0.
(11) SUSAN SALTZ	1.00	ļ —							•	•
DIRECTOR		х						0.	0.	0.
(12) TAMAR BENZAKEN KOOSED	1.00								-	-
DIRECTOR		Х						0.	0.	0.
(13) ZEV YAROSLAVSKY	1.00									
DIRECTOR		Х						0.	0.	0.
(14) CARRIE CHASSIN	1.00									
DIRECTOR		Х						0.	0.	0.
		1								
										Form <b>990</b> (2021

ı aı	Section A. Officers, Directors, Trus	itees, Key Em	<u>oloy</u>	ees,	anc	<u>jiH t</u>	ghes	st C	ompensated Employee	s (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average	Position (do not check more than one						Reportable	Reportable			imated	
		hours per	box	, unle	ss per	rson i	is both	n an	compensation	compensation	n	amo	ount of	
		week	offi	cer ar	nd a d	irecto	or/trus	tee)	from	from related	l t	c	ther	
		(list any	ector						the	organization	s	comp	ensation	า
		hours for	Individual trustee or director				ped		organization	(W-2/1099-MIS	3C/	fro	m the	
		related	tee o	nstee			ensat		(W-2/1099-MISC/	1099-NEC)		orga	nization	
		organizations	Itrus	Institutional trustee		Key employee	Highest compensated employee		1099-NEC)			and	related	
		below	vidus	itutio	rec	empl	hest (	Former				orgar	nizations	}
		line)	In di	lust	Officer	Key	High	윤			$\longrightarrow$			_
			1											
			-											
														_
			-											
														_
											$\rightarrow$			_
			1											
			1											
	Culatatal		<u> </u>						130,000.		0.		0	١.
	Subtotal								0.		0.			<u>.</u>
	Total from continuation sheets to Part V								130,000.		0.			<u> </u>
	Total (add lines 1b and 1c)								•					•
2	Total number of individuals (including but r	iot limited to th	ose	liste	ed an	oove	e) wh	o re	eceived more than \$100,	000 of reportable	)			1
	compensation from the organization		—									Ι,	Yes N	-
•	Did the average ties liet and former officer	al: a.k.a ka.k	1		1			. la : a.			Г		Tes IN	_
3	Did the organization list any <b>former</b> officer	•		•		•		_	•	•	- 1			7
	line 1a? If "Yes," complete Schedule J for s											3	X	_
4	For any individual listed on line 1a, is the su	•							•	•				,
	and related organizations greater than \$15			•							}	4	X	_
5	Did any person listed on line 1a receive or											_		7
Sec	rendered to the organization? If "Yes." contion B. Independent Contractors	nplete Schedul	e J fo	or su	ıch ı	oers	on				<u></u>	5	X	_
1	Complete this table for your five highest co	mpensated inc	 depe	nde	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	 oensat	ion fror	m	_
	the organization. Report compensation for	the calendar y	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
	(A)				_				(B)		_	(C)		
	Name and business	address	NC	ІИС	<u> </u>				Description of s	ervices		ompen	sation	_
								_						_
								_						
2	Total number of independent contractors (i \$100,000 of compensation from the organi		ot lin	nite	d to	thos ۲	se lis	ted	above) who received mo	ore than				
	\$100,000 of compensation from the organi	2411011										_	00 (	

20-3406211

Form 990 (2021) JEWISH
Part VIII Statement of Revenue

			Check if Schedule O	conta	ains a r	esponse	or note to any lin	e in this Part VIII			
							<b>,</b>	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
									function revenue	business revenue	sections 512 - 514
S S	1		Federated campaigns			1a					
ant	•					1b					
9			Membership dues Fundraising events			1c	66,129.				
Ţţ,						1d	00,123.				
Contributions, Gifts, Grants and Other Similar Amounts			Related organizations								
Sir			Government grants (contri			1e					
utio		f	All other contributions, gifts,			4.	802,104.				
들됨			similar amounts not included		Г	1f	002,104.				
out		9	Noncash contributions included in		_	1g  \$		060 222			
O g		n	Total. Add lines 1a-1f					868,233.			
							Business Code				
<u>e</u>	2	a									
er v		b									
n S		С									
ran Sev		d									
Program Service Revenue		е									
≖			All other program service								
		g	Total. Add lines 2a-2f								
	3	3	Investment income (include	-							
			other similar amounts)					217.			217.
	4	ŀ	Income from investment of	f tax	-exemp	ot bond p	roceeds				
	5	,	Royalties	. <u></u>			<u></u>				
					(i)	Real	(ii) Personal				
	6	a	Gross rents	6a							
		b	Less: rental expenses	6b							
		С	Rental income or (loss)	6с							
		d	Net rental income or (loss)								
	7	a	Gross amount from sales of		(i) Se	curities	(ii) Other				
			assets other than inventory	7a							
		b	Less: cost or other basis								
ē			and sales expenses	7b							
en		С		7c							
ş			Net gain or (loss)								
her Revenue	8		Gross income from fundraising								
oth	_				<u> 29.</u>						
			contributions reported on			I					
			Part IV, line 18		•	I	2,133.				
		b	Less: direct expenses								
			Net income or (loss) from				<b></b>	0.			
	9		Gross income from gamin								
	,	_	Part IV, line 19	_							
		h	Less: direct expenses								
			Net income or (loss) from				<b>•</b>				
	10		Gross sales of inventory, I								
		· u	and allowances								
		h	Less: cost of goods sold								
			Net income or (loss) from								
-		U	וווטוון (1999) ווטווו	Jaies	J UI IIIV	oniory	Business Code				
ns	44	_					Duomicos Code				
e e	. 1	a									
Miscellaneous Revenue		b									
Sce		C	All other reverses								
Ξ			All other revenue								
	۰.		Total. Add lines 11a-11d					868,450.	0.	0.	217.
	12	:	Total revenue. See instruction	IIIS			<b>&gt;</b>	1 000,400.	1 0.	J •	<u> </u>

#### 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).

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			ipiete colultiti (A).	
	· 1	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	116,406.	116,406.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	135,634.	95,301.	7,302.	33,031.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	418,378.	327,632.	71,592.	19,154.
8	Pension plan accruals and contributions (include	-	-	-	-
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	18,134.	13,844.	2,582.	1,708.
10	Payroll taxes	45,027.	34,374.	6,412.	1,708. 4,241.
11	Fees for services (nonemployees):	,	,		•
	Management				
b	Legal				
	Accounting	36,825.		36,825.	
	Lobbying	,		•	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	5,969.	4,557.	850.	562.
13	Office expenses	3,329.	2,541.	474.	314.
14	Information technology	12,915.	9,859.	1,839.	1,217.
15	Royalties		2,722.		
16	Occupancy	19,817.	15,128.	2,822.	1,867.
17	Travel				
18	Payments of travel or entertainment expenses				
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,605.	1,225.	229.	151.
23	Insurance	6,317.	4,823.	900.	594.
24	Other expenses. Itemize expenses not covered	3,0=70	-, == 3 .		
	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 0.)				
а	CONTRACT SERVICES	43,291.	3,818.	9,048.	30,425.
b	PRINTING & PUBLICATIONS	33,850.	8,463.	2,0200	25,387.
2	BANK CHARGES	10,727.	2,2000	10,727.	
d	MISCELLANEOUS	9,799.	7,482.	1,394.	923.
	All other expenses	33,919.	19,255.	2,865.	11,799.
25	Total functional expenses. Add lines 1 through 24e	951,942.	664,708.	155,861.	131,373.
<u>25</u> 26	Joint costs. Complete this line only if the organization	221244	001,7000		
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	11 TOHOWING COT 30-2 (NGC 300-120)				Form <b>990</b> (2021)

Form 990 (2021)
Part X Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			313,383.	1	416,554.
	2	Savings and temporary cash investments			715,006.	2	687,779.
	3	Pledges and grants receivable, net			205,430.	3	100,625.
	4	Accounts receivable, net				4	8,965.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su	bstantial co	ntributor, or 35%			
		controlled entity or family member of any of t	hese persor	ns		5	
	6	Loans and other receivables from other disqu	ualified perso				
		under section 4958(f)(1)), and persons descri		6			
ιχ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges			4,357.	9	4,063.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		41,654.			
	b	Less: accumulated depreciation		34,119.	4,139.	10c	7,535.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, lir			12		
	13	Investments - program-related. See Part IV, li			13		
	14	Intangible assets	l l		14		
	15	Other assets. See Part IV, line 11	5,950.	15	5,950.		
	16	Total assets. Add lines 1 through 15 (must e			1,248,265.	16	1,231,471.
	17	Accounts payable and accrued expenses			44,429.	17	44,379.
	18	Grants payable	134,396.	18	72,044.		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	te Part IV of	Schedule D		21	
S	22	Loans and other payables to any current or fe	ormer office	r, director,			
Liabilities		trustee, key employee, creator or founder, su	bstantial co	ntributor, or 35%			
iabi		controlled entity or family member of any of t	hese persor	ns		22	
	23	Secured mortgages and notes payable to un	related third	parties		23	
	24	Unsecured notes and loans payable to unrela	ated third pa	ırties		24	
	25	Other liabilities (including federal income tax,	payables to	related third			
		parties, and other liabilities not included on li	nes 17-24). (	Complete Part X			
		of Schedule D				25	
	26				178,825.	26	116,423.
"		Organizations that follow FASB ASC 958, or	check here	► X			
ces		and complete lines 27, 28, 32, and 33.			254 245		4 04 5 060
ılan	27	Net assets without donor restrictions			954,947.	27	1,015,263.
l Ba	28	Net assets with donor restrictions			114,493.	28	99,785.
nuc		Organizations that do not follow FASB ASC	C 958, chec	k here 🕨 📖			
ř		and complete lines 29 through 33.					
ts o	29	Capital stock or trust principal, or current fun			29		
sset	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			1 060 115	31	4 44 = 242
Se.	32	Total net assets or fund balances		l l	1,069,440.	32	1,115,048.
	33	Total liabilities and net assets/fund balances			1,248,265.	33	1,231,471.

Form **990** (2021)

Pai	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI				X				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>50.</u>				
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u> </u>	<u>42.</u>				
3	Revenue less expenses. Subtract line 2 from line 1	3	-8 1,06		<u>92.</u>				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))								
5	Net unrealized gains (losses) on investments								
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain on Schedule O)	9	12	9,1	00.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	1,11	5,0	48.				
Pai	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X				
	If "Yes," 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:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b	X					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,							
	consolidated basis, or both:								
	X Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" 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?		2c	X					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit							
	Act and OMB Circular A-133?		За		<u> </u>				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi								
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b						
			Form	990	(2021)				

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

## **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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

**Employer identification number** Name of the organization JEWISH WORLD WATCH 20-3406211 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990) 2021	JEWISH WOR	LD WATCH			20-340	6211 Page 2
Part II Support Schedule for	-		•		170(b)(1)(A)(vi	)
(Complete only if you checket fails to qualify under the test				n failed to qualify u	ınder Part III. If the	organization
	is listed below, plea	se complete Part I	II.)			
Section A. Public Support	T					
Calendar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and						
membership fees received. (Do not	1202504	1420202	1 4 4 1 2 0 2	016 166	0.00 000	F067470
include any "unusual grants.")	1202594.	1439283.	1441202.	916,166.	868,233.	5867478.
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge	1202594.	1439283.	1441202.	916,166.	868,233.	5867478.
<ul><li>4 Total. Add lines 1 through 3</li><li>5 The portion of total contributions</li></ul>	1202374.	1437203.	1441202.	J10,100.	000,233.	30074701
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)						650,040.
6 Public support. Subtract line 5 from line 4.						5217438.
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	1202594.	1439283.	1441202.	916,166.	868,233.	5867478.
8 Gross income from interest,				-	-	
dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources	225.	1,488.	3,431.	1,776.	217.	7,137.
9 Net income from unrelated business						
activities, whether or not the						
business is regularly carried on						
10 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
<b>11 Total support.</b> Add lines 7 through 10						5874615.
40 One and the form of the second state of the second					امدا	

12	Gross receipts from related activities, etc. (see instructions)	12	
13	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 5	01(c)	(3)
	organization, check this box and stop here		<b>&gt;</b>
Se	ction C. Computation of Public Support Percentage		
14	Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	88.81 %
15	Public support percentage from 2020 Schedule A, Part II, line 14	15	89.13 %
16a	a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or m	ore, c	heck this box and
	stop here. The organization qualifies as a publicly supported organization		<b>▶</b> X
k	33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	or m	ore, check this box
	and stop here. The organization qualifies as a publicly supported organization		<b>&gt;</b> □
17a	10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, a	and lir	ne 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 ho	w the organization
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<b>&gt;</b> □
k	10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or	l7a, a	and line 15 is 10% or
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain i	n Par	t VI how the
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	zation	· <b>&gt;</b>
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box a	nd se	e instructions

### 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) organizati	on,
	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2021 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2020	·				16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	<b>)21</b> (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18	Investment income percentage from					18	%
19	a 33 1/3% support tests - 2021. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization quali	fies as a publicly s	supported organiza	ition	<b>&gt;</b>
k	33 1/3% support tests - 2020. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	<b>op here.</b> The orga	nization qualifies a	as a publicly suppo	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	structions	

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," 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.
- 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 "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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 "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," 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.
- 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 "Yes," 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 "Yes," provide detail in Part VI.
- 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 "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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 "Yes," answer line 10b below.
  - **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.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Par	art IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provi	ide		
	detail in Part VI.	11c		
Sect	ction B. Type I Supporting Organizations	<u> </u>		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membershi	p of one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization	n's officers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated a supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	mong the		
	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		
Sect	ction C. Type II Supporting Organizations			
	71 11 5 5		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
	or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control</i>			
	or management of the supporting organization was vested in the same persons that controlled or managed			
		1		
Sect	the supported organization(s). ction D. All Type III Supporting Organizations			<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	tav		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	ian		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
		•		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in <b>Part VI</b> how			
	, ,	2		
	the organization maintained a close and continuous working relationship with the supported organization(s).  By reason of the relationship described on 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 <b>Part VI</b> the role the organization's			
	· · · · · · · · · · · · · · · · · · ·	3		
Sect	supported organizations played in this regard. ction E. Type III Functionally Integrated Supporting Organizations			I
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	e instructions)		
· a				
b				
c		tal entity (see instruction	16)	
	Activities Test. Answer lines 2a and 2b below.	ar critity (see instruction	Yes	No
				110
	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.	2a		
	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.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
	of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

SCHE	dule A (Form 990) 2021 GEWISH WORLD WATCH			TO JECUZII Page 6
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ıg Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust or	Nov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus-		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	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)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2021

emergency temporary reduction (see instructions).

instructions).

1 Amounts paid to supported organizations to accomplish exempt purposes

organizations, in excess of income from activity

Amounts paid to perform activity that directly furthers exempt purposes of supported

Section D - Distributions

Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 9 Distributable amount for 2021 from Section C, line 6 Line 8 amount divided by line 9 amount 10 10 (i) (ii) Distributable Underdistributions Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2021 Amount for 2021 Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2021 a From 2016 **b** From 2017 c From 2018 **d** From 2019 e From 2020 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2021 distributable amount i Carryover from 2016 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2021 from Section D, line 7: **a** Applied to underdistributions of prior years **b** Applied to 2021 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2022. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2017 **b** Excess from 2018 c Excess from 2019 d Excess from 2020 e Excess from 2021

Schedule A (Form 990) 2021

132028 01-04-22 Schedule A (Form 990) 2021

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

JEWISH WORLD WATCH

**Employer identification number** 20-3406211

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ar Funds or Ad	counts. Complete if the
	,,	(a) Donor advised fun	ds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in	donor advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	lvisors in writing that grant ful	nds can be used c	only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other	er purpose confer	ring
	impermissible private benefit?			
Pai	t II Conservation Easements. Complete if the organic	anization answered "Yes" on	Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreating	ion or education) 🔲 Pre	servation of a histo	orically important land area
	Protection of natural habitat	Pre	servation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contribution	in the form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic structure			2c
d	Number of conservation easements included in (c) acquired af	· ·		
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or termin	ated by the organ	ization during the tax
	year ▶			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period		andling of	
	violations, and enforcement of the conservation easements it l			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enf	orcing conservation	on easements during the year
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcin	ig conservation ea	sements during the year
	<b>&gt;</b> \$			
8	Does each conservation easement reported on line 2(d) above	•	. , . , . ,	" — —
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footnotes and include, if applicable, the text of the footnotes are also as a second control of the f	ote to the organization's finan	icial statements th	at describes the
Dai	organization's accounting for conservation easements.  t III Organizations Maintaining Collections of	Art Historical Treasur	as or Other 9	Similar Accete
ı aı	Complete if the organization answered "Yes" on Form 9	•	es, or other c	miniai Assets.
10	If the organization elected, as permitted under FASB ASC 958		atatament and hal	anno aboat warks
Ia	of art, historical treasures, or other similar assets held for publ	·		
	•	•		ice of public
h	service, provide in Part XIII the text of the footnote to its finance.			a shoot works of
b	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public or provide the following amounts relating to those items:	eanibilion, education, or rese	arcii iii iurtrierance	or public service,
	provide the following amounts relating to these items:			<b>•</b> •
	(i) Revenue included on Form 990, Part VIII, line 1			
^		auraa ar athar aimilar accata		
2	If the organization received or held works of art, historical trea-			provide
_	the following amounts required to be reported under FASB AS			<b>•</b> •
a	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			<b>▶</b> \$

Par	t III Organizations Maintaining C	collections of Ar	t, Histo	orical Tre	easures, or	Other S	Similar As	sets	(continue	ed)	
3	Using the organization's acquisition, access	on, and other record	s, check	any of the t	following that	make sign	ificant use o	f its			
	collection items (check all that apply):										
а	a Public exhibition d Loan or exchange program										
b	Scholarly research	е	(	Other							
С	Preservation for future generations										
4	Provide a description of the organization's control	ollections and explair	n how the	ey further th	ne organizatio	n's exempt	t purpose in	Part XII	íl.		
5	During the year, did the organization solicit of	or receive donations of	of art, his	torical treas	sures, or other	r similar as	sets				
	to be sold to raise funds rather than to be m	aintained as part of th	ne organ	ization's co	llection?			,	Yes		No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered "	Yes" on Fo	orm 990, Pai	t IV, line	e 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for c	ontribution	s or other ass	ets not inc	luded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
								Α	Mount		
С	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F						?	🔲 ,	Yes		No
b	If "Yes," explain the arrangement in Part XIII.	. Check here if the ex	planation	n has been	provided on F	art XIII .					
Par	t V Endowment Funds. Complete	if the organization an	swered '	"Yes" on Fo	orm 990, Part	IV, line 10.					
		(a) Current year	<b>(b)</b> P	rior year	(c) Two years	s back (d)	<b>)</b> Three years	back (	<b>e)</b> Four ye	ears ba	ck
1a	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur		e (line 1g	, column (a	)) held as:	•					
а	Board designated or quasi-endowment	•	%	,	,,						
b	Permanent endowment	%	_								
		%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endowment funds not in the posse	•	tion that	are held ar	nd administere	ed for the o	organization				
	by:	· ·							Y	es N	lo
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	ed on Sc	hedule R?					3b		
4	Describe in Part XIII the intended uses of the									•	
Par	t VI   Land, Buildings, and Equipm										
	Complete if the organization answere	d "Yes" on Form 990	, Part IV,	, line 11a. S	See Form 990,	Part X, line	e 10.				
	Description of property	(a) Cost or o	ther	(b) Cost	t or other	(c) Acci	umulated	(0	d) Book v	/alue	
		basis (investr		٠,	(other)		eciation	``	-		
1a	Land										
	Buildings										_
	Leasehold improvements			1	8,128.	1	8,128.			C	).
	Equipment		İ		8,525.		5,991.		2	, 534	<u>.</u>
	Other				5,001.		-			,001	
	Add lines 1s through 1s (O. ) (d)		., ,	(D) // /				1	7	535	_

Schedule D (Form 990) 2021 JEWISH WORLD	WATCH	20	-3406211 Page
Part VII Investments - Other Securities.	Faura 000 David IV lines	14b Coo Farm 000 Bort V line 10	
Complete if the organization answered "Yes" o  (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d of year market value
N. E. C. L. L. C. C.	(b) Book value	(c) Method of Valuation. Cost of en	u-oi-year market value
Financial derivatives			
Closely held equity interests			
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ ☐			
	n Form 000 Dort IV line	11a Cas Farm 000 Part V line 12	
Complete if the organization answered "Yes" o			d =6=
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	
(a) D	escription		(b) Book value
(1)			_
(2)			
(3)			_
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	<b>&gt;</b>	
Part X Other Liabilities.	_		
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			

(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

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. Total revenue, gains, and other support per audited financial statements 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments 2a Donated services and use of facilities 2b Recoveries of prior year grants 2c 129,100. Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 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. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2c c Other losses d Other (Describe in Part XIII.) 2d Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) 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 XI, 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 XI, LINE 2D - OTHER ADJUSTMENTS: PPP LOAN FORGIVENESS

## SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

# **Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

2021
Open to Public Inspection

Name of the organization

Employer identification number

JEV	WISH WORLD WA				20-340621	
Pa	rt I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organization answered "Y	es" on
	Form 990, Part IV	/, line 14b.				
1				ds to substantiate the amount of its gra		
	the grantees' eligibility for	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assistance? X	Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	e organization's p	procedures for monitoring the use of its	grants and other assistance outsi	de the
3		ne following Part	I, line 3 table ca	n be duplicated if additional space is n	eeded.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
3 a	Subtotal	0	0			0.
	Total from continuation sheets to Part I	0	0			0.
С	Totals (add lines 3a	0	0			0.

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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	I (c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			HIAS PERMAGARDENING					
		EASTERN CHAD	(SEEDS OF SURVIVAL)	31,005.	СНЕСК	0.		
			COME CULL DREN ON					
			COTE - CHILDREN ON THE EDGE - COVID-19					
		BANGLADESH	RESPONSE	21 154.	WIRE TRANSFER	0.		
			COTE - CHILDREN ON					
			THE EDGE - DIGITAL					
		BANGLADESH	EDUCATION	20,000.	WIRE TRANSFER	0.		
		DEMOGRATIC						
		DEMOCRATIC REPUBLIC OF THE	ACTION KIVU / CONGO					
		CONGO	PEACE SCH - COVID-19	20,000.	WIRE TRANSFER	0.		
				,				
		DEMOCRATIC						
			BVES - COVID-19					
		CONGO	EMERGENCY GRANT	14,700.	WIRE TRANSFER	0.		
		DEMOCRATIC						
			AFRICA NEW DAY / SONS					
		CONGO	OF CONGO	9,548.	WIRE TRANSFER	0.		
				,				
2 Enter total number of			rocognized as charities by the f					

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			
^	Enter total growth or of all an appropriations or only		_	

**3** Enter total number of other organizations or entities

			ites. Complete i	f the organization answered "Yes"	on Form 990, Part	IV, line 16.	
Part III can be duplicated if a	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Page 4

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	X 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	X 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	X 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	X 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	X 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	X No

Schedule F (Form 990) 2021

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:
JWW OUTLINES SPECIFIC REPORTING REQUIREMENTS AND DATES TO MONITOR THE
GRANTEES USE OF THE FUNDS, TO ENSURE THAT THE PROJECT IS PROGRESSING AS
SCHEDULED, AND TO BE MADE AWARE OF ANY ISSUES OR CHALLENGES THAT MAY HAVE
PRESENTED THEMSELVES. THE DISBURSEMENTS ARE TIED TO THE RECEIPT AND
REVIEW OF A REPORT PRIOR TO DISBURSING FUNDS. FINAL REPORTS ARE REQUIRED
BEFORE NEW OR CONTINUING FUNDING TO A GRANTEE WILL BE CONSIDERED FOR THE
NEXT GRANT CYCLE.

# SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization Employer identification number JEWISH WORLD WATCH 20-3406211 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С g In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990) 2021 JEWISH WORLD WATCH Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-F7 lines 1 and 6h. List events with gross receipts greater than \$5,000

		or furidialsing event contributions and gr	033 111001110 0111 01111 030	EZ, III CO T GITG OD: Elot C		to greater than \$0,000.	
			(a) Event #1 IMPACT IN ACTION	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through	
4			(event type)	(event type)	(total number)	col. <b>(c)</b> )	
Revenue	1	Gross receipts	68,262.			68,262.	
	2	Less: Contributions	66,129.			66,129.	
	3	Gross income (line 1 minus line 2)	2,133.			2,133.	
	4	Cash prizes					
	5	Noncash prizes					
benses	6	Rent/facility costs					
Direct Expenses	7	Food and beverages					
Δ	8	Entertainment					
	9	Other direct expenses				2,133.	
	l .	Direct expense summary. Add lines 4 throug				2,133.	
Pa	11 rt	Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organization		. 000 Dort IV line 10 or r		0.	
1 6		\$15,000 on Form 990-EZ, line 6a.	answered res on Form	1990, Part IV, line 19, or r	eported more than		
		\$10,000 0111 01111 000 EE, III10 00.		(b) Pull tabs/instant		(d) Total gaming (add	
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)	
eve							
_ш	1	Gross revenue					
es	2	Cash prizes					
Direct Expenses	3	Noncash prizes					
Direct	4	Rent/facility costs					
	5	Other direct expenses					
			Yes %	Yes %	Yes %		
	6	Volunteer labor	No	No	No		
	7 Direct expense summary. Add lines 2 through 5 in column (d)						
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)		<b>&gt;</b>		
9 Enter the state(s) in which the organization conducts gaming activities:  a Is the organization licensed to conduct gaming activities in each of these states?  Yes							
						. L Yes No	
b	If "	No," explain:					
		ere any of the organization's gaming licenses r Yes," explain:		,	rear?	Yes No	
_							
	_						

Sch	ledule G (Form 990) 2021 JEWISH WORLD WATCH 20-	340021	LI Page 3
11	Does the organization conduct gaming activities with nonmembers?	Ye	s 🔲 No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Ye	s 🔲 No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility	13a	%
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		s No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
C	c If "Yes," enter name and address of the third party:		
	Name		
	Address >		
16	Gaming manager information:		
	Name		
	Gaming manager compensation  \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Ye	s No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	•	
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	art III, lines	9, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		

Schedule G	i (Form 990)	JEWISH WORLD	WATCH	20-3406211	Page 4
Part IV	(Form 990) Supplemental Infor	mation (continued)			

### **SCHEDULE 0** (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

JEWISH WORLD WATCH

**Employer identification number** 20-3406211

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SURVIVORS OF MASS ATROCITIES AROUND THE GLOBE AND SEEKING TO INSPIRE
PEOPLE OF ALL FAITHS AND CULTURES TO JOIN THE ONGOING FIGHT AGAINST
GENOCIDE.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
**(CONTINUED FROM PAGE 2)
THE ESSENTIAL TASK FOR JEWISH WORLD WATCH, WHOSE MISSION IS TO PREVENT
GENOCIDE AND ADVOCATE FOR POLITICAL ACTION TO MAKE THIS POSSIBLE, IS TO
HELP JEWS AND NON-JEWS UNDERSTAND THAT THE UNIVERSE OF OBLIGATION MUST
EXTEND BEYOND THE SELF, THE FAMILY AND THOSE WHO WE IDENTIFY AS "US,"
TO INCLUDE THOSE WHO WE CLASSIFY AS "THEM."
JEWISH WORLD WATCH IS THE ONLY JEWISH ORGANIZATION NATIONALLY DEVOTED
EXCLUSIVELY TO THE CRITICAL WORK OF CULTIVATING AWARENESS AND ADVOCACY
AROUND GLOBAL MASS ATROCITIES AND THE PREVENTION OF GENOCIDE. WE SERVE
AS A CONVENER WITHIN THE JEWISH COMMUNITY AND AN AMBASSADOR IN
COMMUNITIES FREQUENTLY UNFAMILIAR WITH JEWISH TRADITIONS AND VALUES. IN
PURSUIT OF THE ASPIRATIONAL VISION TO END GENOCIDE AND MASS ATROCITIES,
JWW SEEKS TO ELEVATE THE PERCEPTION THAT THE PROBLEMS STEMMING FROM
TARGETED HATRED AND DISCRIMINATION BELONG TO EVERYONE WITH A
CONCOMITANT DUTY TO SPEAK OUT AND TAKE ACTION.

Schedule O (Form 990) 2021 Page 2

Name of the organization

JEWISH WORLD WATCH

Employer identification number
20-3406211

APPROACH INVOLVING ADVOCACY, EDUCATION AND GLOBAL EMPOWERMENT PROJECTS.

ADVOCACY EFFORTS INCLUDE REACHING OUT AND BUILDING LONG-TERM

RELATIONSHIPS WITH ELECTED OFFICIALS VIA EMAIL, PETITION AND INDIVIDUAL

MEETINGS. WE ALSO ORGANIZE AND PARTICIPATE IN PUBLIC DEMONSTRATIONS TO

RAISE AWARENESS AROUND KEY ISSUES.

KEY TO OUR ADVOCACY STRATEGY IS PARTNERING WITH DIASPORA COMMUNITIES

FROM CONFLICT-AFFECTED AREAS TO AMPLIFY THEIR VOICES AND EXPAND OUR OWN

KNOWLEDGE. DIASPORA MEMBERS WHO HAVE BEEN DIRECTLY AFFECTED BY GENOCIDE

OR MASS ATROCITY PROVIDE PERSONAL AND COMPELLING INFORMATION ABOUT THE

EFFECTS OF GENOCIDE ON THEM HERE AND ON THEIR FAMILIES IN CONFLICT

AREAS WORLDWIDE.

JWW TRAINS OUR COMMUNITY IN ADVOCACY BEST PRACTICES AND COMPELS THEM TO

TAKE ACTION. THROUGHOUT THE YEAR, WE ENCOURAGE OUR CONSTITUENCY TO

ENGAGE DIRECTLY AND EASILY WITH THEIR REPRESENTATIVES ON TIMELY AND
IMPORTANT LEGISLATIVE AND POLICY ISSUES.

OPPORTUNITIES TO EDUCATE AND INSPIRE OUR COMMUNITY. AMONG OUR MANY

EFFORTS, WE HAVE INVESTED HEAVILY IN WORKING WITH YOUTH TO ENSURE NOT

ONLY THAT THE LESSONS LEARNED FROM THE HOLOCAUST ARE NOT FORGOTTEN, BUT

ALSO TO EMPOWER YOUTH TO DISCOVER THE RELEVANCY OF THAT HISTORY TODAY,

TEACHING THEM HOW TO BECOME EXEMPLARY LEADERS WHO EMBRACE THEIR

OBLIGATIONS TO THE GLOBAL COMMUNITY IN OUR INCREASINGLY INTERCONNECTED

PLANET.

Schedule O (Form 990) 2021 Page 2

Name of the organization **Employer identification number** 20-3406211

JEWISH WORLD WATCH

#### GLOBAL IMPACT:

-RAPID RESPONSE MISSIONS IN THE CONGO : JEWISH WORLD WATCH IS WORKING IN COORDINATION WITH 2018 NOBEL PEACE PRIZE LAUREATE DR. DENIS MUKWEGE TO BRING RAPID RESPONSE MEDICAL MISSIONS TO REMOTE AREAS OF THE DEMOCRATIC REPUBLIC OF THE CONGO UNREACHABLE BY TRADITIONAL AID. THESE MISSIONS PROVIDE HOLISTIC MEDICAL CARE, PSYCHOSOCIAL ASSISTANCE AND COLLECT EVIDENCE TO BOLSTER LEGAL EFFORTS AGAINST PERPETRATORS.

-SECURING THE RELEASE OF CHILD SOLDIERS : IN THE CONGO, JWW IS HELPING TO SECURE THE RELEASE OF BOYS AND GIRLS FROM ARMED GROUPS, MANY OF WHOM ARE BEING USED AS CHILD SOLDIERS AND SEX SLAVES. OUR AMAZING PARTNERS RISK THEIR OWN LIVES TO NEGOTIATE THE RELEASE OF THESE CHILDREN. ONCE THE CHILDREN REACH THE SAFETY OF OUR PARTNERS' FACILITIES, EACH CHILD RECEIVES PSYCHOSOCIAL ASSISTANCE AND HELP IN TRYING TO REUNITE WITH HIS OR HER FAMILY.

-A SCHOOL DEVELOPING FUTURE LEADERS : THE CONGO PEACE SCHOOL PROVIDES PEACE-RELATED EDUCATION FOR CHILDREN UNABLE TO AFFORD SCHOOL FEES, TAKING THEM OFF THE STREETS, OUT OF THE MINES, AND INTO CLASSROOMS. THE SCHOOL TEACHES ORGANIC ANIMAL HUSBANDRY AND FARMING PRACTICES TO ITS STUDENTS AND THE SURROUNDING COMMUNITY, ENHANCING SOCIAL COHESION IN A COMMUNITY OTHERWISE RIVEN WITH STRIFE AND VIOLENCE. EDUCATION IS A POWERFUL TOOL FOR GLOBAL CHANGE.

-COVID-19 EMERGENCY RESPONSE IN THE DRC: IN THE DRC, CHILDREN, MANY OF THEM ORPHANS, DEPEND ON SCHOOLS FOR THEIR ONLY MEAL EACH DAY. WITH THE COUNTRY SHUT DOWN DUE TO COVID-19 CONCERNS, FINANCIAL SUPPORT IS THE ONLY THING KEEPING SCHOOL KITCHENS OPEN AND SAVING THESE CHILDREN FROM

Schedule O (Form 990) 2021 Page **2** 

Name of the organization

JEWISH WORLD WATCH

Employer identification number 20-3406211

STARVATION. IN ADDITION TO PROVIDING FOOD AT THE CONGO PEACE SCHOOL,

WITHOUT WHICH THESE CHILDREN WOULD MOST CERTAINLY STARVE, OUR PARTNER

IS FORMING A TASK FORCE TO REACH OUT TO LAST-MILE COMMUNITIES TO TEACH

THEM ABOUT COVID-19, PROVIDE THEM WITH FOOD SUPPLIES, HYGIENE MATERIALS

AND HANDMADE MASKS.

-BRINGING EDUCATION TO ROHINGYA CHILDREN: JWW IS OFFERING DIGITAL

EDUCATION PROGRAMS IN 75 SCHOOLS WITHIN THE ROHINGYA REFUGEE CAMPS IN

COX'S BAZAR, BANGLADESH. THIS AWARD-WINNING INNOVATIVE EFFORT WILL

ENABLE THE CHILDREN TO LEARN IN THEIR OWN LANGUAGE, SOMETHING ROHINGYA

REFUGEE CHILDREN ARE UNABLE TO DO IN OTHER SCHOOLS IN THE CAMPS.

-COVID-19 RESPONSE FOR ROHINGYA SURVIVORS: THE CRAMPED CAMP CONDITIONS

MAKE SANITIZATION AND SOCIAL DISTANCING NEARLY IMPOSSIBLE. THROUGH OUR

SUPPORT, OUR PARTNERS ARE WORKING INSIDE THE CAMPS PROVIDING REFUGEES

ACCURATE COVID-19 HEALTH INFORMATION IN THE ROHINGYA NATIVE DIALECT. WE

ALSO CONTINUE TO DISTRIBUTE EMERGENCY SUPPLIES INCLUDING FOOD, MASKS

AND LOCALLY MADE SOAP TO THE MOST VULNERABLE ROHINGYA IN THE CAMPS.

-PERMA-GARDENING FOR DARFURI REFUGEES: TO ADDRESS FOOD INSECURITY

ISSUES IN THE DARFURI REFUGEE CAMPS IN CHAD, JWW SUPPORTS TRAINING

DARFURI SURVIVORS BY TRAINING THEM TO FEED THEIR FAMILIES SUSTAINABLY

WITH A SMALL PLOT OF DRY LAND AND ESSENTIAL TOOLS. THE PROGRAM HAS

TRAINED NEARLY 1,000 GARDNERS, IMPROVING FOOD SECURITY AND FINANCIAL

STABILITY WHILE BENEFITING MORE THAN 3,000 COMMUNITY MEMBERS.

-MEDICAL SUPPLY SHIPMENTS TO SYRIA: JWW HAS SHIPPED LIFE-SAVING
MEDICAL AID TO THE HARDEST HIT AREAS OF THE CONFLICT INSIDE SYRIA

<u>Schedule O (Form 990) 2021</u> Page **2** 

Name of the organization

JEWISH WORLD WATCH

Employer identification number 20-3406211

WHERE THEY ARE NEEDED MOST, AND WHERE MOST LARGE ORGANIZATIONS CANNOT

GO. SUPPLIES WERE DISTRIBUTED TO 28 HOSPITALS IN THE IDLIB AND ALEPPO

PROVINCES. THESE SHIPMENTS INCLUDED PERSONAL PROTECTIVE EQUIPMENT THAT

WILL HELP FIGHT THE SPREAD OF COVID-19.

FORM 990, PART VI, SECTION B, LINE 11B:

THE TREASURER AND PRESIDENT REVIEW THE FORM 990 BEFORE PRESENTING IT TO THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL BEFORE FILING.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION:

PRIMARY STRATEGIES TO ACHIEVE OUR MISSION INCLUDE:

EDUCATION: JWW RAISES AWARENESS OF ONGOING MASS ATROCITIES AROUND THE
WORLD, AND HELPS COMMUNITIES AND INDIVIDUALS LEARN WHAT THEY CAN DO TO GET
INVOLVED. THROUGH OUR VARIOUS EDUCATIONAL PROGRAMS, WE CREATE A BETTER
INFORMED COMMUNITY READY TO TAKE ACTION. ONE EXAMPLE IS OUR TEEN AMBASSADOR
PROGRAM (TAP). TAP IS A SERIES OF SOCIAL JUSTICE WORKSHOPS FOCUSING ON
LEADERSHIP AND PERSONAL DEVELOPMENT THROUGH OUT-OF-THE-BOX THINKING GAMES,
FILM CLIPS, GROUP DISCUSSION, SKILL-BUILDING EXERCISES, TEAM-BUILDING
ACTIVITIES AND OPPORTUNITIES TO LEARN FROM EXPERTS IN THE FIELD.

ADVOCACY: JWW WORKS WITH ELECTED OFFICIALS AND LEADERS IN GOVERNMENT TO

RECOMMEND AND SUPPORT CONCRETE POLICY CHANGES THAT WILL AID THE U.S.

GOVERNMENT IN PREVENTING AND RESPONDING TO GENOCIDE AND MASS ATROCITIES. WE

DO THIS THROUGH DIRECT ENGAGEMENT WITH MEMBERS OF CONGRESS AND THE

ADMINISTRATION, THE STATE DEPARTMENT, USAID, AND OTHERS. WE CREATE AND

CULTIVATE GRASSROOTS EFFORTS THROUGH PETITIONS, LETTER WRITING AND SOCIAL

Schedule O (Form 990) 2021 Page 2

Name of the organization

JEWISH WORLD WATCH

Employer identification number 20-3406211

MEDIA CAMPAIGNS, AND WORK WITH A VARIETY OF COALITION PARTNERS.

PROJECTS: RAPID RESPONSE MISSIONS IN THE CONGO, SECURING THE RELEASE OF

CHILD SOLDIERS, A SCHOOL DEVELOPING FUTURE LEADERS, COVID-19 EMERGENCY

RESPONSE IN THE DRC, BRINGING EDUCATION TO ROHINGYA CHILDREN, COVID-19

RESPONSE FOR ROHINGYA SURVIVORS, PERMA-GARDENING FOR DARFURI REFUGEES,

MEDICAL SUPPLY SHIPMENTS TO SYRIA

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY IS CIRCULATED TO ALL BOARD MEMBERS ANNUALLY

AND REQUIRES A SIGNATURE OF APPROVAL.

FORM 990, PART VI, SECTION B, LINE 15:

THE PROCESS FOR DETERMINING COMPENSATION OF THE EXECUTIVE DIRECTOR AND KEY

EMPLOYEES INCLUDE A REVIEW, DISCUSSION AND APPROVAL BY THE BOARD OF

DIRECTORS WHO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE

COMPENSATION ARRANGEMENT. THE PROCESS IS WHOLLY INDEPENDENT OF THE PERSON

BEING COMPENSATED. THE BOARD OF DIRECTORS MAKES COMPENSATION DECISIONS BY

LOOKING AT COMPARABILITY DATA, THE SKILLS AND EXPERTISE OF THE EXECUTIVE

AND THE PERFORMANCE IN MEETING GOALS AND EXPECTATIONS.

FORM 990, PART VI, SECTION C, LINE 18:

JEWISH WORLD WATCH MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON THE JWW WEBSITE, JWW.ORG, AS WELL AS UPON REQUEST. GOVERNING DOCUMENTS AND CONFLICT OF INTERST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

JEWISH WORLD WATCH MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC

Schedule O (Form 990) 2021 Page **2** 

Name of the organization  JEWISH WORLD WATCH	Employer identification number $20-3406211$	
ON THE JWW WEBSITE, JWW.ORG, AS WELL AS UPON REQUEST. GOV	ERNING DOCUMENTS	
AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUES	T.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
PPP LOAN FORGIVENESS	129,100.	