

TAX RETURN FILING INSTRUCTIONS

** FORM 990 PUBLIC DISCLOSURE COPY **

FOR THE YEAR ENDING

DECEMBER 31, 2021

Prepared for	J STREET EDUCATION FUND, INC. PO BOX 66073 WASHINGTON, DC 20035
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

** PUBLIC DISCLOSURE COPY **

Form **991**

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

Inspection

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.

Open to Public

Α	For the	e 2021 calendar year, or tax year beginning and	ending	_	
В	Check if applicabl	C Name of organization		D Employer identif	ication number
Г	Addre	J STREET EDUCATION FUND, INC.			
	Name chang			20-27775	57
L	Initial return Final return	Number and street (or P.O. box if mail is not delivered to street address) PO BOX 66073	Room/suite	E Telephone number 202-596-	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	7,970,470.
	Amend	washington, DC 20035		H(a) Is this a group r	
	Applic	F Name and address of principal officer: JEREMY BEN-AMI		for subordinates	
	pendir	SAME AS C ABOVE		H(b) Are all subordinates i	·····- —
$\overline{\Gamma}$	Tax-exe	empt status: X 501(c)(3) 501(c) () ((insert no.) 4947(a)(1)	or 527	1	list. See instructions
		e: ► WWW.JSTREET.ORG		H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year		M State of legal domicile: NY
	art I	Summary			<u> </u>
_	1	Briefly describe the organization's mission or most significant activities: SEE	PART I	II, LINE 1.	
Governance					
rna	2	Check this box if the organization discontinued its operations or dispo	sed of more	e than 25% of its net a	ssets.
Š		Number of voting members of the governing body (Part VI, line 1a)		ı	5
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			5
Š		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			0
ij		Total number of volunteers (estimate if necessary)			3400
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.
⋖		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
		· · ·		Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		6,167,898.	7,349,119.
Revenue		Program service revenue (Part VIII, line 2g)		0.	597,661.
eve		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		9,591.	7,423.
8		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-15,853.	-18,827.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,161,636.	7,935,376.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		241,595.	369,920.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ý	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,673,298.	3,929,177.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
g	b	Total fundraising expenses (Part IX, column (D), line 25) 892,6	58.		
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,503,788.	1,785,547.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,418,681.	6,084,644.
		Revenue less expenses. Subtract line 18 from line 12		742,955.	1,850,732.
<u> </u>		·	Ве	ginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)		3,031,080.	4,115,738.
ASS	21	Total liabilities (Part X, line 26)		1,281,046.	514,972.
	22	Net assets or fund balances. Subtract line 21 from line 20		1,750,034.	3,600,766.
P	art II	Signature Block			
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of m	ny knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wi	hich preparer	has any knowledge.	
Sig	ın	Signature of officer		Date	
Не	re	JEREMY BEN-AMI, PRESIDENT			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature/		Date Check	PTIN
Pai	d	RICHARD J. LOCASTRO, CPA / Cichael J. Loca	Mo	11/14/22 if self-employ	_{yed} P00288314
Pre	parer	Firm's name ► GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N			
		BETHESDA, MD 20814-2930		Phone no. (3	
Ma	v the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No

Pa	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>
1	Briefly describe the organization's mission:	(7. 3. T
	TO PROVIDE EDUCATION WITH RESPECT TO THE NEED FOR BOLD AMERIC	
	LEADERSHIP TO HELP ACHIEVE A PEACEFUL, VIABLE AND JUST RESOLU	TION TO
	THE ISRAELI-PALESTINIAN CONFLICT.	
_		
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
_	If "Yes," describe these new services on Schedule O.	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes 🕰 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	l expenses, and
	revenue, if any, for each program service reported.	F07 661
4a	(Code:) (Expenses \$ 4,682,223. including grants of \$ 369,920.) (Revenue \$	597,661.
	PROVIDED EDUCATION WITH RESPECT TO THE NEED FOR BOLD AMERICAN	
	LEADERSHIP TO REACH A PEACEFUL, VIABLE AND JUST RESOLUTION TO	THE
	ISRAELI-PALESTINIAN CONFLICT BY ORGANIZING WITHIN THE LOCAL	ON
	COMMUNITIES, MOBILIZING RABBINIC LEADERS, EMPOWERING STUDENTS	
	UNIVERSITY CAMPUSES, PLANNING EDUCATIONAL TRIPS FOR MEMBERS C TO THE REGION AND HOSTING AN ANNUAL NATIONAL CONFERENCE.	r CONGRESS
	TO THE REGION AND HOSTING AN ANNUAL NATIONAL CONFERENCE.	
41-		
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
+0	(Code:) (Expenses \$,
4d	Other program services (Describe on Schedule O.)	
Tu	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 4,682,223.	
	, ,	Form 990 (2021)

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	X	
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		37	
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
0	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		x
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	0		
9	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, VIII, 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,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		Х	
	Schedule D, Parts XI and XII	12a	Λ	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13	-25	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	 -
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	. 14		
~	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			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			17
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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	ا م		X
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		$\Gamma \nabla$

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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		1.00	
	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			х
24.5	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
2 4 a	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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		<u> </u>
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			٠,,
	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	054		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		
20	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		х
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		Х
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? If			٠,,
	"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		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		X
35.5	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	554		† <u></u>
-	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?		3,7	
Da	Note: All Form 990 filers are required to complete Schedule 0 t V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
rai				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		163	140
b				
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

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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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a		_		7.7
	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	۵.		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in expose of \$75 made partly as a contribution and partly for goods and carvings provided to the payor?	7-	х	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b	- 22	
С	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders N/A 11a			
р	Gross income from other sources. (Do not net amounts due or paid to other sources against			
10-	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?	100		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		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? N/A	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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	5		
	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	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	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:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
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		l	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
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?			
а	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			77
	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, IL, MA, NY	_,		
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	/) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	and fina	ncial	
	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			
	DANIEL YU - (202)204-8001 PO BOX 66073, WASHINGTON, DC 20036			
	IO DOM UUUIJ, WARIIINGION, DC 40030			

132006 12-09-21

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

X

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.

X Check this box if neither the organization r	(B)			(((D)	(E)	(F)
Name and title	Average	١		Pos	ition			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	than is bot	h an	compensation	compensation	amount of
	week	_	cer an	d a d	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	g.			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	truste		e e	suadi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual trı	ional		ploye	t com		1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) ALAN D. SOLOMONT	3.00	느	=	0	~	王壱	프			
CHAIR		Х		х				0.	0.	0.
(2) KENNETH BOB	3.00									
TREASURER		x		x				0.	0.	0.
(3) VICTOR A. KOVNER	3.00	Ё								
DIRECTOR		х						0.	0.	0.
(4) CAROL WINOGRAD	3.00							-		
DIRECTOR		х						0.	0.	0.
(5) MORTON HALPERIN	3.00									
CHAIR EMERITUS		Х						0.	0.	0.
(6) JEREMY BEN-AMI	27.00									
PRESIDENT (SEE SCHEDULE O)				х				0.	0.	0.
(7) DANIEL YU	27.00									
VP, FIN & ADMIN (SEE SCHEDULE O)				Х				0.	0.	0.
		ł								
				\vdash						
		ł								
	1	ı			ı	ı	ı	I	i	

(A)	(B)			•	C)			(D)	(E)			(F)	
Name and title	Average	(do		Posi heck			one	Reportable	Reportable		Est	timate	b
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	า		ount c	of
	week (list any	\vdash	00. u.		T	1	T	from	from related			other	.:
	hours for	director						the organization	organizations (W-2/1099-MIS			oensat om the	
	related	e or 0	stee			satec		(W-2/1099-MISC/	1099-NEC)	0,		anizatio	
	organizations	truste	al trus		yee	mper		1099-NEC)	,			l relate	
	below	Individual trustee or	Institutional trustee	er	Key employee	est co loyee	Jer	'			orga	nizatio	ns
	line)	Indiv	Instil	Officer	Keye	Highest compensated employee	Former						
1b Subtotal						<u> </u>	▶	0.		0.			0.
c Total from continuation sheets to Par								0.		0.			0.
d Total (add lines 1b and 1c)								0.		0.			0.
2 Total number of individuals (including bu								eceived more than \$100	0.000 of reportable	 e			
compensation from the organization						-,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				0
												Yes	No
Did the organization list any former offic			•	•	•	•	•		-				v
line 1a? If "Yes," complete Schedule J fo								h			3		X
For any individual listed on line 1a, is the and related organizations greater than \$	•							-	•		4		Х
5 Did any person listed on line 1a receive													
rendered to the organization? If "Yes," or					•						5		Х
ection B. Independent Contractors													
Complete this table for your five highest										pens	ation fi	rom	
the organization. Report compensation	for the calendar y	ear	endi	ng v	vith	or w	ithir T		year.				
(A) Name and busine	ess address	NO	INC	Ξ				(B) Description of s	ervices	С	(C omper		ı
Total number of independent contractor\$100,000 of compensation from the org		ot li	mite	d to		se li:	sted	above) who received m	nore than				
\$ 100,000 or compensation from the org	arnzation										Гокт (200	

Pa	rt V	<u> </u>	Statement of Reve	enue					
			Check if Schedule O cor	ntains a response	or note to any lir	ne in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	2	b c d e f g h a b c d e	Membership dues Fundraising events	tutions) ants, and ove fees 1a-1f fees 15 fees 15 fees 15 fees 15 fees 16 fees	276,114. 669,500. 403,505. 298,830. Business Code 900099	7,349,119. 597,661.	597,661.		Seculotis 512 - 514
			Total. Add lines 2a-2f		<u> </u>	597,661.			
	3 4 5		Investment income (including other similar amounts)	g dividends, intere	est, and roceeds	7,423.			7,423.
	6	a b	Gross rents 6 Less: rental expenses 6 Rental income or (loss) 6	(i) Real	(ii) Personal				
		d a	Net rental income or (loss) Gross amount from sales of assets other than inventory 7.	(i) Securities	(ii) Other				
Revenue		С	Less: cost or other basis and sales expenses 7 Gain or (loss) 7 Net gain or (loss) 7	'c					
Other	8	а	Gross income from fundraising including \$ 276, contributions reported on lin Part IV, line 18	events (not 114 • of ne 1c). See 8a	20,836. 35,094.				
			Less: direct expenses Net income or (loss) from fur			-14,258.			-14,258.
	9	а	Gross income from gaming a Part IV, line 19	activities. See 9a	P	14,230.			14,230.
			Less: direct expenses						
	10	а	Net income or (loss) from gal Gross sales of inventory, less and allowances	s returns 10a					
			Less: cost of goods sold						
			Net income or (loss) from sal	OF ITIVELITORY	Business Code				
Miscellaneous Revenue	11		FOREIGN EXCHAN	GE LOSS	900099	-4,569.			-4,569.
ella		b c							
lisc. Re			All other revenue						
2			Total. Add lines 11a-11d		>	-4,569.			
-	12		Total revenue. See instructions		•	7,935,376.	597,661.	0.	-11,404.

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).

amounts reported on lines 6b,		(B)	(C)	(D)
10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
other assistance to domestic organizations				
ic governments. See Part IV, line 21				
d other assistance to domestic				
s. See Part IV, line 22				
d other assistance to foreign				
ons, foreign governments, and foreign	260 020	260 020		
s. See Part IV, lines 15 and 16	369,920.	369,920.		
aid to or for members				
ation of current officers, directors,	345,152.	168,678.	128,280.	48,194
and key employees	343,132.	100,070.	120,200.	40,134
on not included above to disqualified				
defined under section 4958(f)(1)) and				
scribed in section 4958(c)(3)(B)	2,926,195.	2,201,797.	171,516.	552,882
ries and wages	4,940,133.	4,401,131.	1/1,310.	JJ4,004
n accruals and contributions (include	81,727.	61,811.	4,130.	15,786
(k) and 403(b) employer contributions)	315,292.	239,931.	11,648.	63,713
oloyee benefits	260,811.	191,934.	22,053.	46,824
es	200,011.	171,754.	22,033.	40,024
ervices (nonemployees):				
ent	68,796.		68,796.	
	26,419.		26,419.	
g	20,410.		20,410.	
l fundraising services. See Part IV, line 17				
t management feesne 11g amount exceeds 10% of line 25,				
amount, list line 11g expenses on Sch O.)	63,535.	63,535.		
g and promotion	4,970.	4,970.		
enses	99,694.	74,277.	8,638.	16,779
n technology	43,798.	31,901.	3,813.	8,084
	2077500	32,3323	3,0231	0,001
у	329,478.	239,981.	28,686.	60,811
y	178,850.	163,244.	1,789.	13,817
of travel or entertainment expenses			= 7 / 00 0	
leral, state, or local public officials				
es, conventions, and meetings	727,045.	719,467.		7,578
es, conventions, and meetings	, 0 _ 3 0	, _ , , ,		.,
to affiliates				
on, depletion, and amortization				
on, depletion, and amortization	23,401.	17,045.	2,037.	4,319
ises. Itemize expenses not covered	., = . = .	.,	, , , ,	-,
miscellaneous expenses on line 24e. If				
ount exceeds 10% of line 25, column (A),				
IRAN DIPLOMACY	77.269.	77.269.		
DEVELOPMENT			4,180.	8,861
ANT FEES		,	=,====	42,926
		17,217.		/ 0
xpenses			27,778.	2,084
				892,658
Complete this line only if the organization	, , , , , , , , ,	, - ,	,	- /
, , ,				
IR DE ANT ACT xpens onal 6 Comp	VELOPMENT FEES - SEC VOICES ses expenses. Add lines 1 through 24e	AN DIPLOMACY EVELOPMENT FEES - SEC VOICES ses expenses. Add lines 1 through 24e plete this line only if the organization and (B) joint costs from a combined aign and fundraising solicitation.	TAN DIPLOMACY 77,269. 77,269.	TAN DIPLOMACY 77,269. 77,269.

Part X Balance Sheet

		balance Sneet				
		Check if Schedule O contains a response or	note to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		2,027,623.	1	2,099,852.
	2	Savings and temporary cash investments		610,010.	2	1,702,683.
	3	Pledges and grants receivable, net		344,033.	3	245,854.
	4	Accounts receivable, net		322,000	4	210,0010
	5	Loans and other receivables from any currer				
	3	trustee, key employee, creator or founder, su				
		controlled entity or family member of any of			5	
	6	Loans and other receivables from other disq				
	U	under section 4958(f)(1)), and persons descr			6	
_s	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges		49,158.	9	67,349.
		Land, buildings, and equipment: cost or other		23 / 23 0 0	-	0,70150
	ioa	basis. Complete Part VI of Schedule D				
	h	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities	•		11	
	12	Investments - publicly traded securities			12	
	13				13	
	14	Investments - program-related. See Part IV, li			14	
	15	Intangible assets		256.	15	0.
	16	Total assets. Add lines 1 through 15 (must e		3,031,080.	16	4,115,738.
-	17	Accounts payable and accrued expenses		198,344.	17	158,746.
	18	Grants payable	230,0110	18		
	19	Deferred revenue		52,700.	19	96,736.
	20	Tax-exempt bond liabilities		0=7.000	20	207.000
	21	Escrow or custodial account liability. Comple			21	
₆	22	Loans and other payables to any current or f				
Liabilities		trustee, key employee, creator or founder, su				
ig		controlled entity or family member of any of			22	
Ë	23	Secured mortgages and notes payable to un			23	
	24	Unsecured notes and loans payable to unrel		669,500.	24	0.
	25	Other liabilities (including federal income tax,		000,000		
		parties, and other liabilities not included on li	• •			
		of Schedule D	nee 17 2 ij. Gemplete i dit X	360,502.	25	259,490.
	26	Total liabilities. Add lines 17 through 25		1,281,046.	26	514,972.
		Organizations that follow FASB ASC 958,				
Ses		and complete lines 27, 28, 32, and 33.				
ano	27			1,615,383.	27	3,336,318.
Bal	28	Net assets with donor restrictions		134,651.	28	264,448.
pu		Organizations that do not follow FASB AS				•
교		and complete lines 29 through 33.				
S OF	29	Capital stock or trust principal, or current fur	nds		29	
set	30	Paid-in or capital surplus, or land, building, o			30	
Š	31	Retained earnings, endowment, accumulate			31	
4	-			1 750 004	$\overline{}$	2 600 566
Net Assets or Fund Balances	32	Total net assets or fund balances		1,750,034.	32	3,600,766.

Form	1990 (2021) U SIREEI EDUCATION FUND, INC.	40-4	4111331	Pa	ıge I∠
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,93		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,08		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,85		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,75	0,0	34.
5	Net unrealized gains (losses) on investments	5			
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,60	0,7	66.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Щ
				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				l
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	d 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 separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis X 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			l	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	it		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audi	t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3h	l	1

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

Open to Public Inspection

Employer identification number

Name of the organization J STREET EDUCATION FUND, INC. 20-2777557 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 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.) 8 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 university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box 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. 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 III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support	7.		,			
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	, ,	` '	` '	` ,	, ,	.,
	membership fees received. (Do not						
	include any "unusual grants.")	5,993,237.	6,611,637.	7,292,040.	6,167,898.	7,349,119.	33,413,931.
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						
4	Total. Add lines 1 through 3	5,993,237.	6,611,637.	7,292,040.	6,167,898.	7,349,119.	33,413,931.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						CE2 777
_	column (f)						653,777.
	Public support. Subtract line 5 from line 4.						32,760,154.
		/-\ 0017	(h) 0010	(-) 0010	(4) 0000	(-) 0001	(f) Tatal
	ndar year (or fiscal year beginning in)	(a) 2017 5,993,237.	(b) 2018 6,611,637.	(c) 2019 7,292,040.	(d) 2020 6,167,898.	(e) 2021 7,349,119.	(f) Total 33,413,931.
	Amounts from line 4	3,333,237.	0,011,037.	7,232,040.	0,107,030.	7,340,110.	33,413,331.
0	, and the second						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources	73.	102.	7,812.	9,591.	7,423.	25,001.
a	Net income from unrelated business			,,0220	3,3321	,,1231	23,0021
·	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.)	20.	5,244.	5.	-2,603.	-4,569.	-1,903.
11	Total support. Add lines 7 through 10						33,437,029.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 3	,172,876.
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third, f	ourth, or fifth tax y	ear as a section 5	501(c)(3)	
_	organization, check this box and stop						<u></u> ▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2021 (14	97.98 %
	Public support percentage from 2020					15	96.66 %
16a	16a 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 more, check this box and						
_	stop here. The organization qualifies as a publicly supported organization						
b	b 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 more, check this box						
4-	and stop here. The organization qual						
1/a	17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,						
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
J.	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or						
0		_					10% OF
	more, and if the organization meets the				-		▶□
12	organization meets the facts-and-circ Private foundation. If the organization		-	•			
18	riivate iouiiuatioli. II the organizatio	in ala noi check a	DON OIT III IE 13, 102	a, 100, 11a, 01 1/0	, GIICUN IIIIS DUX A	110 200 1112111111111111111111111111111	·

Schedule A (Form 990) 2021

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.)

Sec	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	(a) 2017	(b) 2010	(6) 2019	(u) 2020	(e) 2021	(i) iotai
•	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
2	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						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	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						
C	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🖊	(a) 2017	(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						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	: 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						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	e organization's f	irst second third	fourth or fifth tax	vear as a section	I 501(c)(3) organizat	ion
••		· ·			•	. , . ,	▶ □
Sec	ction C. Computation of Publi						
	Public support percentage for 2021 (li			column (f))		15	%
	Public support percentage for 2021 (iii					16	
	ction D. Computation of Inves					1 10 1	70
17						17	%
18	Investment income percentage from 2					18	
	33 1/3% support tests - 2021. If the						
196	more than 33 1/3%, check this box ar						17 13 1101
L	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
20	i intato roundationi il tile organization	i ala not onech a		a, or rob, oriect t	THE DOT WHO SEE III	J. 40110113	

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		
3с		
4-		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
00		
9c		
10a		
10b		

Par	rt IV Supporting Organizations (continued)			
	, (common,		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	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, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations	•		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of	one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's or			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one superganization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amore			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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 Part VI the role the organization's			
Sac	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		<u> </u>
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see ins	twations\		
1		tructions).		
a b				
c		ntity (see instructio	ns)	
2	Activities Test. Answer lines 2a and 2b below.	inty (See mistractio	Yes	No
a			103	140
ŭ	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		
b				
-	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		
3	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		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

132025 01-04-22

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2021	J	STREET	EDUCATION	FUND,	INC.	20-2777557	Page 6
Part V Type III Non-Function	ona	illy Integra	ted 509(a)(3) Su	pporting	Organizations		

1	Check here if the organization satisfied the Integral Part Test as a qualifying All other Type III non-functionally integrated supporting organizations must	•		Part VI). See instructions.
Sect	ion A - Adjusted Net Income	st complete	(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			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990) 2021

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
а	From 2016			
b	From 2017			
c	From 2018			
d	From 2019			
е	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			
С	Excess from 2019			
d	Excess from 2020			
е	Excess from 2021			

Schedule A (Form 990) 2021

Schedule B (Form 990)

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

2021

Schedule B (Form 990) (2021)

Employer identification number

J STREET EDUCATION FUND, INC. 20-2777557							
Organization type (check o	Organization type (check one):						
Filers of:	Section:						
Form 990 or 990-EZ	$oxed{X}$ 501(c)($oxed{3}$) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
, ,	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ıle. See instructions.					
General Rule							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor						
Special Rules							
sections 509(a)(1) a contributor, during	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from						
literary, or education	contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \bigsim \frac{1}{2} \f							
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).							

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

J STREET EDUCATION FUND, INC.

20-2777557

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 669,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 200,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

J STREET EDUCATION FUND, INC.

20-2777557

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Employer identification number

Name of organization

20-2777557 J STREET EDUCATION FUND, INC. Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

Name of org	anization	tions. Complete Fait III.		Empl	oyer identification number
		T EDUCATION FUNI			20-2777557
Part I-A	Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527 o	rganization.
2 Politica	I campaign activity expendit	zation's direct and indirect politi cures ign activities		▶ \$	
Part I-B	Complete if the org	ganization is exempt un	der section 501(c)	(3).	
1 Enter th	ne amount of any excise tax	incurred by the organization ur	nder section 4955	▶\$	
		incurred by organization manage			
3 If the or	rganization incurred a sectio	n 4955 tax, did it file Form 4720	O for this year?		Yes No
4a Was a	correction made?				Yes No
	" describe in Part IV.				
Part I-C	Complete if the org	ganization is exempt un	der section 501(c),	<u> </u>	, , ,
		d by the filing organization for s	•		
	0 0	ization's funds contributed to c	•	_	
		s. Add lines 1 and 2. Enter here			
line 17k)			▶\$	
		1120-POL for this year?			
made p	payments. For each organiza utions received that were pr	nployer identification number (E tion listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	aid from the filing organize a separate political org	zation's funds. Also enter th anization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2021

LHA

132041 11-03-21

		UCATION FUN			777557 Page 2
Part II-A Complete if the org	ganization is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	ection under
section 501(h)).					
	-	iliated group (and list ir	n Part IV each affiliated	group member's nam	e, address, EIN,
	re of excess lobbying	. ,			
B Check ► ☐ if the filing organiza	ition checked box A a	nd "limited control" pro	ovisions apply.	() =:::	# > A certs
	ts on Lobbying Expe ditures" means amo	nditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion	(grassroots lobbying)		0.	
b Total lobbying expenditures to infl	uence a legislative bo	dy (direct lobbying)		0.	
c Total lobbying expenditures (add I	ines 1a and 1b)			0.	
d Other exempt purpose expenditur				6,084,644.	
e Total exempt purpose expenditure	es (add lines 1c and 1	d)		6,084,644.	
f Lobbying nontaxable amount. Ent	er the amount from th	e following table in bot	h columns.	454,232.	
If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
				440 550	
g Grassroots nontaxable amount (er	nter 25% of line 1f)			113,558.	
h Subtract line 1g from line 1a. If zer				0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than ze		,		Г	
reporting section 4911 tax for this				L	Yes No
(Some organizations t	hat made a section 5 See the separ	ate instructions for li	have to complete all nes 2a through 2f.)	of the five columns b	elow.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	511,955.	522,474.	420,934.	454,232.	1,909,595.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,864,393.
c Total lobbying expenditures					
d Grassroots nontaxable amount	127,989.	130,619.	105,234.	113,558.	477,400.
e Grassroots ceiling amount (150% of line 2d, column (e))					716,100.

Schedule C (Form 990) 2021

f Grassroots lobbying expenditures

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(k	o)
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	pp F01/o)/	(E) or oc	otion	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	CUON	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
rai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part		e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politi expenses for which the section 527(f) tax was paid).	cal			
а	Current year		2a		
	Carryover from last year				
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	oolitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	-A, lines 1	and 2 (See	
instru	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				

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

J STREET EDUCATION FUND, INC.

Employer identification number 20-2777557

Par	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		or Accounts. Complete if the
	organization answered fes on Form 990, Part IV, III	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Deliver delivered relivere	(2) (2) (2) (2) (2) (2) (2) (2)
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	L	ad funds
3	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
Ü	for charitable purposes and not for the benefit of the donor of		
	• •		
Par		ganization answered "Yes" on Form 990. Pa	
1	Purpose(s) of conservation easements held by the organizat		
·	Preservation of land for public use (for example, recrea		historically important land area
	Protection of natural habitat		certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str		
	Number of conservation easements included in (c) acquired		
	listed in the National Register		I I
3	Number of conservation easements modified, transferred, re		
	year▶	,	
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservati	on easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footi	note to the organization's financial stateme	nts that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections o		her Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pul	· · · · · · · · · · · · · · · · · · ·	•
	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		gain, provide
	the following amounts required to be reported under FASB A		
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2021

132051 10-28-21

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equa	al Form 990 Part X colur	mn (B) line 10c)		0.

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 J STREET EDV	UCATION FUND	. INC. 20	0-2777557 _{Page} :
Part VII Investments - Other Securities.		,	z = / / GG / Tage C
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1) Financial derivatives		.,	
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	>	
Part X Other Liabilities.			•
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 2	? 5.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DUE TO J STREET			259,490
(3)			

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DUE TO J STREET	259,490.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	259,490.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 J STREET EDUCATION F	UND, INC.		20-2	2///55/ Page 4
Part XI Reconciliation of Revenue per Audited Financia		Revenue per R	Return	1.
Complete if the organization answered "Yes" on Form 990, Part				7 070 470
1 Total revenue, gains, and other support per audited financial statemen	ts		1	7,970,470.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a			
a Net unrealized gains (losses) on investmentsb Donated services and use of facilities			-	
c Recoveries of prior year grants			-	
d Other (Describe in Part XIII.)		35,094.	-	
e Add lines 2a through 2d			2e	35,094.
3 Subtract line 2e from line 1			3	7,935,376.
4 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	4a			
b Other (Describe in Part XIII.)				
c Add lines 4a and 4b			4c	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	7,935,376.
Part XII Reconciliation of Expenses per Audited Financia	al Statements With	Expenses per	Retu	rn.
Complete if the organization answered "Yes" on Form 990, Part	t IV, line 12a.			
1 Total expenses and losses per audited financial statements			1	6,119,738.
2 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			
c Other losses		25 004		
d Other (Describe in Part XIII.)		35,094.		25 004
e Add lines 2a through 2d			2e	35,094.
3 Subtract line 2e from line 1			3	6,084,644.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
a Investment expenses not included on Form 990, Part VIII, line 7b			-	
b Other (Describe in Part XIII.)			1	0.
 c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, 			4c	6,084,644.
Part XIII Supplemental Information.	mie 10.)		<u> </u>	
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	and 4: Part IV. lines 1b	and 2b: Part V. line	4: Part	X. line 2: Part XI.
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to prov			.,	, , <u>-,</u> . <u>-,</u>
	,			
PART X, LINE 2:				
FOR THE YEAR ENDED DECEMBER 31, 2021,	JSEF HAS DOC	UMENTED IT	'S	
CONSIDERATION OF FASB ASC 740-10, INCO	ME TAXES, TH	AT PROVIDE	S G	JIDANCE FOR
DEDODETIC INCEDESTING IN INCOME ESTA	DEME:			0 MARROTAT
REPORTING UNCERTAINTY IN INCOME TAXES	AND HAS DETE	RMINED THA	T. M) MATERIAL
INCERMAIN MAY DOCTMIONS ON THE BOD BY	MITED DECOCNIT	TITON OD DI	COL	OCUDE TH
UNCERTAIN TAX POSITIONS QUALIFY FOR EI	THER RECOGNIT	TION OR DI	ВСП	JSUKE IN
THE FINANCIAL STATEMENTS.				
THE FINANCIAL STATEMENTS.				
PART XI, LINE 2D - OTHER ADJUSTMENTS:				
FUNDRAISING EVENT EXPENSES REPORTED AS	EXPENSE ON '	THE		35,094.
				·
FINANCIAL STATEMENTS AND NETTED AGAINS	T REVENUE ON	FORM 990,		
PART VIII, LINE 8C.				

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.

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the organization

Employer identification number

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

(a) Region	(b) Number of		an be duplicated if additional space is a (d) Activities conducted in the region		(f) Total
(, 3	offices	l employees	(by type) (such as, fundraising, pro-	is a program service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to		for and
		contractors	recipients located in the region)	of service(s) in the region	investments in the region
		in the region			ar are region
MIDDLE EAST AND				OUTREACH AND EDUCATIONAL	
	,	,			262 005
NORTH AFRICA		3	PROGRAM SERVICES	TRAVEL	262,095.
MIDDLE EAST AND			GRANTS TO RECIPIENTS		
NORTH AFRICA	0	0	LOCATED IN REGION		369,920.
3 a Subtotal	1	3			632,015
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a		_			
and 3b)	1	3			632,015.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2021

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)	(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)
			OUTREACH AND EDUCATION	364,920.	WIRE	0.		
2 Enter total number of			recognized as charities by the					

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

b and the provided a section of (O)(O) equivalency letter

Part III Grants and Other Assistand Part III can be duplicated if a			ates. Complete i	f the organization answered "Yes" o	on Form 990, Par	t IV, line 16.	
(a) Type of grant or assistance	(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)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	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: THE GRANTEE WAS REQUIRED TO SUBMIT MONTHLY DETAIL AND BANK RECONCILIATIONS THAT SHOWED THE EXPENDITURES MADE FROM GRANT MONEY DURING THAT MONTH.

Schedule F (Form 990) 2021

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 J STREET EDUCATION FUND, INC. 20-2777557 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. Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants ☐ Phone solicitations In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 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 (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 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.

132081 10-21-21

Schedule G (Form 990) 2021

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gr			events with gross receip	ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			CHICAGO			(add col. (a) through
				DC EVENT	3	col. (c))
e			(event type)	(event type)	(total number)	. "
Revenue	1	Gross receipts	119,467.	51,029.	126,454.	296,950.
	2	Less: Contributions	104,967.	51,029.	120,118.	276,114.
	3	Gross income (line 1 minus line 2)	14,500.		6,336.	20,836.
	4	Cash prizes				
S	5	Noncash prizes	188.		3,136.	3,324.
pense	6	Rent/facility costs	17,584.		557.	18,141.
Direct Expenses	7	Food and beverages				
	8	Entertainment	^ ^==	2,500. 686.	2,500. 668.	10,000. 3,629.
	9	Other direct expenses				35,029.
	10	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li				-14,258.
Pa	irt l					
		\$15,000 on Form 990-EZ, line 6a.		, , ,	•	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
3eve						
_	1	Gross revenue				
	_	Cook prince				
ses	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 No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
					_	
_	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
9	Ent	ter the state(s) in which the organization condu	ucts gaming activities:			
		he organization licensed to conduct gaming a	-	states?		Yes No
b	lf "	No," explain:				
10a	14.		SVOKOG EURDONADA OR to	vet adt pairib bateaime	vear?	└── Yes └── No
L		ere any of the organization's gaming licenses re		~	•	
b		re any of the organization's gaming licenses re Yes," explain:		~	•	
b				~	•	

Schedule G (Form 990) 2021

132082 10-21-21

Schedule G (Form 990) 2021 U SIREET EDUCATION FUND, INC.	20-2111331 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity for	
to administer charitable gaming?	
13 Indicate the percentage of gaming activity conducted in:	
	120
a The organization's facility	
b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books are	nd records:
Name	
Address >	
45. Does the experimetion have a contract with a third party from when the experimetion receives assign according	ue? Yes No
15a Does the organization have a contract with a third party from whom the organization receives gaming reven	ue? Les Live
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the second seco	the amount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
Name ▶	
Name >	
A.1.1	
Address	
16 Gaming manager information:	
Name	
Gaming manager compensation ▶ \$	
Garning manager compensation > 5	
Description of services provided	
Director/officer Employee Independent contractor	
47 Mandatan distributions	
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?	L Yes L No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations of	or spent in the
organization's own exempt activities during the tax year ▶ \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii)	and (v); and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
<u> </u>	

Schedule G (Form 1900) J STREET EDUCATION FUND, INC. 20-2777557 Page 4 Part IV Supplemental Information (continued)	Schedule G	(Form 990)	J STREET	EDUCATION	FUND,	INC.	20-2777557 Page 4
	Part IV	Supplemental Info	rmation (continue	d)			
					· · · · · ·		
	-						
	-						

SCHEDULE J (Form 990)

Compensation Information

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

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

J STREET EDUCATION FUND, INC. Employer identification number 20-2777557

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year did any parson listed on Form 000 Part VIII. Section A line 1s, with respect to the filing			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
9		4a		х
h	Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

		(B) Breakdown of V	V-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
(A) Name and Title	(A) Name and Title		(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(ii)								
	(i)								
	(ii)								

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
J STREET EDUCATION FUND RELIES ON J STREET (AN ORGANIZATION UNRELATED FOR
FORM 990 REPORTING PURPOSES), WHICH USES THE FORM 990 OF OTHER
ORGANIZATIONS, COMPARABLE DATA, AND APPROVAL BY THE BOARD OR COMPENSATION
COMMITTEE TO SET THE COMPENSATION FOR ITS EMPLOYEES.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

J STREET EDUCATION FUND, INC. **Employer identification number** 20-2777557

Pai	rt I Types of Property							
		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de	etermini	na	
		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contribu			s
1	Art - Works of art		Items continuated	r om ood, r art viii, iine rg				
2	Art - Works of art Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	14	298,830	FMV			
10	Securities - Closely held stock			, , , , , , , , , , , , , , , , , , , ,				
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization and the second state of Forms 8283		-				0	
	for which the organization completed Form 828	33, Part V, L	Jonee Acknowledg	jement 29				Na
200	During the year, did the organization receive by	, contributio	on any proporty ro	ported in Bart L lines 1 three	igh 29, that it		Yes	No
SUA	must hold for at least three years from the date							
	exempt purposes for the entire holding period?		•	•		30a		Х
h	If "Yes," describe the arrangement in Part II.					304		
31	Does the organization have a gift acceptance p	oolicy that r	equires the review	of any nonstandard contrib	utions?	31	х	
	Does the organization hire or use third parties of					 		
	contributions?			· ·	•	32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is ch	ecked,			
	describe in Part II.	()	71 1 1	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			

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SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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.

2021
Open to Public Inspection

Name of the organization

J STREET EDUCATION FUND, INC.

Employer identification number 20-2777557

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

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE PRESIDENT, THE CHIEF FINANCIAL OFFICER, AND THE AUDIT COMMITTEE OF THE BOARD. A PUBLIC DISCLOSURE COPY WAS SENT TO THE ENTIRE BOARD PRIOR TO FILING.

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

THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY ALL BOARD MEMBERS

AT A FULL BOARD MEETING. IF A POTENTIAL OR REAL CONFLICT ARISES, IT IS

RESOLVED BY NON-INTERESTED BOARD MEMBERS IN THE BEST INTERESTS OF THE

ORGANIZATION. UPON BEING HIRED, ALL EMPLOYEES ARE REQUIRED TO READ AND SIGN

THE CONFLICT OF INTEREST POLICY INCLUDED IN THE EMPLOYEE'S MANUAL. IN THE

EVENT AN EMPLOYEE BELIEVES A CONFLICT OF INTEREST MAY EXIST, THE EMPLOYEE

MUST INFORM THE PRESIDENT OF J STREET. THE PRESIDENT WILL DECIDE WHAT STEPS

TO TAKE TO EVALUATE THE SITUATION AND TO INVESTIGATE ALTERNATIVES TO ANY

TRANSACTION OR ARRANGEMENT THAT APPEARS TO PRESENT A CONFLICT.

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

THE PRESIDENT'S COMPENSATION IS DETERMINED BY A J STREET (AN ORGANIZATION UNRELATED FOR FORM 990 REPORTING PURPOSES). J STREET IS A NON-PROFIT ORGANIZATION THAT USES COMPARABLE DATA AND IS APPROVED BY THE BOARD AS PART OF THE OVERALL ANNUAL BUDGET REVIEW. THE MOST RECENT COMPENSATION REVIEW WAS COMPLETED IN MARCH 2019.

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

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021

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

Name of the organization

J STREET EDUCATION FUND, INC.

Employer identification number 20-2777557

STATEMENTS ARE GENERALLY NOT AVAILABLE; INDIVIDUAL REQUESTS ARE CONSIDERED ON THEIR MERITS.

FORM 990, PART VII, SECTION A: PAYROLL REPORTING

J STREET EDUCATION FUND IS A NONPROFIT CORPORATION EXEMPT FROM FEDERAL

INCOME TAX UNDER INTERNAL REVENUE CODE (IRC) SECTION 501(C)(3); J

STREET IS A NONPROFIT CORPORATION EXEMPT UNDER IRC SECTION 501(C)(4).

THE TWO ORGANIZATIONS DO NOT MEET THE REQUIREMENTS TO BE REPORTED AS

"RELATED ORGANIZATIONS" PURSUANT TO FORM 990 REPORTING.

J STREET SHARES STAFF AND CERTAIN OTHER EXPENSES WITH THE EDUCATION

FUND PURSUANT TO A WRITTEN COST-SHARING AGREEMENT. J STREET SERVES AS

THE PAYROLL REPORTING AGENT FOR THE TWO ENTITIES, WITH ALL EMPLOYEES

PAID BY J STREET. UNDER THE COST-SHARING AGREEMENT, J STREET EMPLOYEES

CONDUCT ACTIVITIES ON BEHALF OF THE EDUCATION FUND, AND THE EDUCATION

FUND PROMPTLY REIMBURSES J STREET FOR ALL ASSOCIATED EXPENSES,

INCLUDING THE ALLOCABLE SHARE OF EMPLOYMENT TAXES.

THE COMPENSATION REPORTED IN FORM 990, PART VII, SECTION A IS ZERO, AS

ALL COMPENSATION WAS ISSUED BY THE 501(C)(4). THE PORTION OF OFFICER

COMPENSATION REIMBURSED BY THE 501(C)(3) TO THE 501(C)(4) FOR TIME

SPENT ON 501(C)(3) ACTIVITY IS AS FOLLOWS:

	HOURS/	WEEK	ALLOCATED	COMPENSATIO	ON & BENEF	ITS
NAME	(C)(3)	(C)(4)	(C)(3)COMP	(C)(4)COMP	(C)(3)BEN	(C)(4)BEN
JEREMY BEN-AMI	27	13	223,117	109,894	17,851	8,792
DANIEL YU	27	13	88,029	43,358	16,154	7,956