Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A F</u>	or the	e 2023 calendar year, or tax year beginning $$ OCT $1,$ 2023	and ending $ \Sigma $	SEP 30, 2024	
	heck if pplicable	C Name of organization		D Employer identific	cation number
	Addre:	se T'RUAH			
Г	Name chang			45-04645	45
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
]Final return	266 WERT 37TH CTDEET CIITTE 803		212-845-	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code	•	G Gross receipts\$	3,561,498.
	Ameno return			H(a) Is this a group re	turn
	Applic tion		3	for subordinates	? Yes X No
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	
<u> </u>	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	7	list. See instructions
<u>J \</u>	Vebsit	te: WWW.TRUAH.ORG		H(c) Group exemptio	n number
<u>K</u> F	orm of	organization: X Corporation Trust Association Other	∟ Year	of formation: 2002 N	1 State of legal domicile; NY
Pa	ırt I	Summary			
	1	Briefly describe the organization's mission or most significant activities: ${f T}$ ' ${f I}$	RUAH: TH	E RABBINIC (CALL FOR
Governance		HUMAN RIGHTS MOBILIZES 2,300 RABBIS AND	CANTORS	S, AND MORE	THAN
rna	2	Check this box if the organization discontinued its operations or dis	sposed of more	than 25% of its net ass	ets.
ĕ	3	Number of voting members of the governing body (Part VI, line 1a)		3	23
	4	Number of independent voting members of the governing body (Part VI, line 1			22
و م		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			24
itie		Total number of volunteers (estimate if necessary)			1000
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.
Revenue				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		3,339,470.	3,432,371.
	9	Program service revenue (Part VIII, line 2g)		32,198.	30,080.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,299.	12,871.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-23,728.	10,486.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12		3,349,239.	3,485,808.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
s	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1		2,349,165.	2,491,746.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
þei		Total fundraising expenses (Part IX, column (D), line 25) 681			
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		805,402.	659,952.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,154,567.	3,151,698.
	19	Revenue less expenses. Subtract line 18 from line 12		194,672.	334,110.
10 X			Ве	ginning of Current Year	End of Year
ets	20	Total assets (Part X, line 16)		1,790,655.	2,024,558.
ASS	21	Total liabilities (Part X, line 26)		605,507.	505,300.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		1,185,148.	1,519,258.
Pa	ırt II	Signature Block			
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying sche	dules and stateme	ents, and to the best of my	knowledge and belief, it is
true	correc	t, and complete∉Declaration of preparer (other than officer) is based on all information o	of which preparer	has any knowledge.	
				08/04/2	.025
Sig		Signature of officer		Date	
Her	е	RABBI JILL JACOBS, CHIEF EXECUTIVE OFFI	CER		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid		MARQUS WHITE MARQUS WHITE	<u> </u>	7/29/25 self-employ	
Prep	arer	Firm's name SAX LLP			1-2950760
Use	Only	Firm's address 389 INTERPACE PARKWAY; STE 3			
		PARSIPPANY, NJ 07054		Phone no. 97	3-472-6250
		RS discuss this return with the preparer shown above? See instructions		<u> </u>	X Yes No

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$

2,231,067.

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Total program service expenses

17300729 795584 27996.0

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Form 990 (2023) T ' RUAH Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	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			
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ŭ		
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			٠,,
	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			ا ۔۔
	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, 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	Х	
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			
-	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			
	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZU		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization asswered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional list the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
			Х	
14a		14a	<u> </u>	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	441.	х	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	_^_	
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			х
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			\ _{3,7}
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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		X
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,"			
	complete Schedule G, Part III	19		Х
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	2 0b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	<u> </u>
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes, " complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а		28a		x
h	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	205		T
Ŭ	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash 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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
00	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?	26		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u> </u>
31	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?	5,		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) 45-0464545

			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	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
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		Х
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		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_	v	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		х
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.		х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
g	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of qualified intellectual property, and the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Ť		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
C	Enter the amount of reserves on hand	-		-
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	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	45		х
	excess parachute payment(s) during the year? If "Yos " soo the instructions and file Form 4720. School Jo N.	15		<u> </u>
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
10	If "Yes," complete Form 4720, Schedule O.	16		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
••	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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

						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	1a	23			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny 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			
				3		_ <u>X</u> _
4	Did the organization make any significant changes to its governing documents since the prior Form 9		filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		<u>X</u>
6	Did the organization have members or stockholders?			6		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	-				
	more members of the governing body?			7a		_X_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st		•			
	persons other than the governing body?			7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	•	ū			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		<u>X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters,	affiliates,			
				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ before	e filing the form?	11a	Х	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	icts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	'es," de	escribe			
	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 approva	l by inc	lependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	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 arrangements	nent wi	th a			
	taxable entity during the year?			16a		<u> </u>
b	If "Yes," $$ did the organization follow a written policy or procedure requiring the organization to evaluate	e its pa	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	'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, FL, GA, HI, I					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990-	T (section 501(c)(3)s	only) a	availab	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	f interest policy, and	financ	cial	
	statements available to the public during the tax year.					
2 0	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	records			
	RABBI JILL JACOBS - 212-845-5201					
	266 WEST 37TH STREET, SUITE 803, NEW YORK, NY 1001	. 8				
	SEE SCHEDULE O FOR FULL LIST OF STATES			Farm	agn.	(2023)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos			200	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of
	week	-	cer an	ndad I	recto	r/trus	tee)	from	from related	other
	(list any	director						the	organizations	compensation
	hours for	or di	æ			ated		organization	(W-2/1099-MISC/	from the
	related	trustee or	truste		<u></u>	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	ional		ploye	t con	١.	1099-NEC)		and related organizations
	line)	ndividual	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DR. SARA LITT	2.00	_	_	٦		- 0				
IMMEDIATE PAST CO-CHAIR		х		x				0.	0.	0.
(2) RABBI WILLIAM PLEVAN	2.00									
CO CHAIR		х		х				0.	0.	0.
(3) RABBI DANIEL ZEMEL	2.00									
CO CHAIR		Х		х				0.	0.	0.
(4) RABBI CLAUDIA KREIMAN	2.00									
SECRETARY		Х		Х				0.	0.	0.
(5) ERIC SLOAN	2.00									
TREASURER		Х		Х				0.	0.	0.
(6) RABBI LESTER BRONSTEIN	2.00									
MEMBER		Х						0.	0.	0.
(7) RABBI KENNETH CHASEN	2.00									
MEMBER		Х						0.	0.	0.
(8) RABBI MICHAEL LEZAK	2.00									
MEMBER		Х						0.	0.	0.
(9) RABBI LAURA ABRASLEY	2.00									
MEMBER		Х						0.	0.	0.
(10) RACHEL FAULKNER	2.00									
MEMBER		Х						0.	0.	0.
(11) HADAR HARRIS	2.00									
MEMBER		Х						0.	0.	0.
(12) RABBI ESTHER LEDERMAN	2.00									
MEMBER		Х						0.	0.	0.
(13) RABBI ALIZA SCHWARTZ	2.00									
MEMBER		Х						0.	0.	0.
(14) RABBI KELLY WHITEHEAD	2.00									
MEMBER		Х						0.	0.	0.
(15) DR. MARC DOLLINGER	2.00									
MEMBER		Х					$ldsymbol{ld}}}}}}$	0.	0.	0.
(16) RABBI SANDRA LAWSON	2.00									
MEMBER		Х					_	0.	0.	0.
(17) RABBI NANCY KASTEN	2.00	_								_
MEMBER		Х						0.	0.	0.
333007 13-31-33										Form 990 (2023)

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Form **990** (2023)

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Form 990 (2023) 1 RUAF									45-0464	343 Page •
Part VII Section A. Officers, Directors		oloy	ees,			ghes	t Co	ompensated Employee	s (continued)	.
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		າ than d	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	is both or/trus	n an	compensation	compensation	amount of
	week	—	Cei aii	luau	lecic	I us	(ee)	from	from related	other
	(list any hours for	recto						the	organizations W-2/1099-MISC/	compensation from the
	related	9 or d	ee ee			sated		organization (W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	nstitutional trustee		99	преп		1099-NEC)	100011120)	and related
	below	dualt	ntiona	_	nploy	st col	 -	10001120)		organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			
(18) DAVID BERHMAN	2.00									
MEMBER		Х						0.	0.	0.
(19) CLAIRE DAVIDSON BRUDER	2.00									
MEMBER		Х						0.	0.	0.
(20) HANNAH ELLENSON	2.00]								
MEMBER		X						0.	0.	0.
(21) RABBI LAUREN HENDERSON	2.00]								
MEMBER		Х						0.	0.	0.
(22) RABBI SHARON MARS	2.00]								
MEMBER		X						0.	0.	0.
(23) RACHEL BEARMAN	2.00									
VICE CHAIR		Х						0.	0.	0.
(24) RABBI JILL JACOBS	40.00]								
CHIEF EXECUTIVE OFFICER		Х		Х				191,000.	0.	23,475.
(25) RACHEL LERNER	40.00]								
CHIEF STRATEGY OFFICER						Х		127,479.	0.	15,675
(26) RONIT SCHLAM	40.00	1								
CHIEF DEVELOPMENT OFFICER						Х		127,048.	0.	22,087.
1b Subtotal								445,527.	0.	61,237.
c Total from continuation sheets to P	art VII, Section A							246,410.	0.	22,604.
d Total (add lines 1b and 1c)								691,937.	0.	83,841.

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

3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		_X_
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		Х

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NEW 520 GSH LLC 125 PARK AVENUE, NEW YORK, NY 10017	OCCUPANCY LEASE	136,954.
THAT PRINTING GUY LLC 3715 BOYD DRIVE, EDGEWATER, MD 21037	PRINTING SERVICES	103,519.

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2023)

27996.01

\$100,000 of compensation from the organization

Form 990 T'RUAH 45-0464545

Form 990_ T'RUAH									45-046	<u>4545 </u>
Part VII Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, a	nd F	ligh	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c	heck	all	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	lo lo				loyee		the organization	organizations (W-2/1099-MISC)	compensation from the
	(list any hours for	direct				demp		(W-2/1099-MISC)	(VV-2/1099-IVIISC)	organization
	related	ee or	stee			nsate		(** 2, 1000 111100)		and related
	organizations	trust	nal tru		оуее	ошре				organizations
	below	Individual trustee or director	Institutional trustee	Jeg.	Key employee	Highest compensated employee	Former			
	line)	Indi	ınst	Officer	Key	Hig	Par			
(27) SHIRA DANAN	40.00									_
CHIEF COMMUNICATIONS OFFIC						Х		123,753.	0.	5,677.
(28) DANIEL DRACHSLER	40.00					l		400 655		
CHIEF OPERATING OFFICER				_		Х		122,657.	0.	16,927.
		_	_	_	-	-	\vdash			
				\vdash			_			
				<u> </u>			<u> </u>			
				\vdash		-	┝			
				\vdash			-			
				\vdash			\vdash			
				_		_	_			
				_		_	_			
		_		_		\vdash	\vdash			
				\vdash	\vdash	\vdash	\vdash			
	•									
Total to Part VII, Section A, line 1c	·····	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u> .	246,410.		22,604.

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Form 990 (2023) T ' RUAH
Part VIII Statement of Revenue

		Check if Schedule O c	onta	ins a respons	se or note to any	line in this Part VIII	<u></u>	<u></u>	
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns		1a					
ran	k	Membership dues		1b					
<u>a</u> <u>a</u>	c	Fundraising events		1c	363,777	•			
it s	c								
B,°	e				246,403				
ÖÖ	f	All other contributions, gifts, g	grant	s, and					
the sta		similar amounts not included	abov	e 1f 2	2,822,191	•			
Contributions, Gifts, Grants and Other Similar Amounts	ç	Noncash contributions included in I	ines 1	1 1.	68,466				
<u>ම් ල</u>	ŀ	Total. Add lines 1a-1f				3,432,371.			
					Business Cod				
9	2 a				_ <u> 900099</u>		18,746. 11,334.		
ξ	k	EDUCATIONAL R	ES(OURCES	900099	11,334.	11,334.		
Program Service Revenue	c	÷			_				
eve	c				_				
ğΨ	e				_				
-	f	J	ever	nue		20.000			
	ç	Total. Add lines 2a-2f				30,080.			
	3	Investment income (includ	-			14 000			14 006
	_					14,086.			14,086.
	4	Income from investment of		•	d proceeds				
	5	Royalties		(i) Real	(ii) Personal				
		Oraca ranta		31,000		_			
	6 a		6a 6b) .	_			
		Less: rental expenses Rental income or (loss)	6c	31,000		_			
	,	Net rental income or (loss)		31,000	· • I	31,000.			31,000.
	7 :	Gross amount from sales of		(i) Securitie	s (ii) Other	32,000			31/0001
	, .	assets other than inventory	7a	()	(4)				
	ŀ	Less: cost or other basis	-						
	_		7b	1,215	5.				
e l			7c		5.				
<u>۾</u>	c	, ,	$\overline{}$			-1,215.			-1,215.
ther Revenue	8 a	Gross income from fundraisin							
ᅙ		including \$363	, 7	77. of					
		contributions reported on	line '	1c). See					
		Part IV, line 18			8a 44,850				
	k	Less: direct expenses			8b 74,475				
	c	, ,			s	-29,625.		ļ	-29,625.
	9 a	Gross income from gaming	-					1	
		Part IV, line 19			9a	_			
	b				9b				
		Net income or (loss) from (-	·					
	10 a	Gross sales of inventory, le							
		and allowances			l0a	_			
		Less: cost of goods sold			10b			 	
\dashv		Net income or (loss) from s	saies	or inventory	Business Cod	e			
န္ဒ	11 a	HONORARIA			900099	9,111.	9,111.		
neo He	ıı a	1			-	7,111	J, 111.		
Miscellaneous Revenue					-				
<u>is</u>	,				_				
Σ	ě	Total. Add lines 11a-11d				9,111.		İ	
	12	Total revenue. See instructio				3,485,808.		0.	14,246.

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Form **990** (2023)

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Form 990 (2023) T'RUAH

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (A) Total expenses (B) **(D)** Fundraising Do not include amounts reported on lines 6b, Program service expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. 224,863. 157,404. 22,486. 44,973. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 797,956. 1,356,241. 96,970. 344,745. Other salaries and wages Pension plan accruals and contributions (include 67,954. 50,712. 3,835 13,407. section 401(k) and 403(b) employer contributions) 257,009. 191,491.Other employee benefits 14,794. 50,724. 9 143,964. 106,876. 8,652. 28,436. Payroll taxes 10 11 Fees for services (nonemployees): Management Legal Accounting 10,028. 10,028. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 58,824. 80,261. 21,437. column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 12,615. 670. 2,359. 9,586. Office expenses 13 Information technology 14 Royalties 15 157,649.9,545. 31,372.116,732. 16 Occupancy 63,911. 42,475. 12,677. 8.759. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 8,712. 7,840. 203. 669. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 101,670. 75.441. 6,072. 20,157. TELEPHONE AND ELECTRONI 95,215. PRINTING AND COPYING 33,754. 2,508. 58,953. 1,212. 70,309. 69,097. PROGRAM EXPENSE 31,426. 2,500. 2,143. 26,783. POSTAGE 28.156. 890. 50. 27.216. All other expenses 2,231, 239,429. Total functional expenses. Add lines 1 through 24e 3,151,698. 067. 681,202. 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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Form 990 (2023)
Part X | Balance Sheet

<u>Par</u>	<u>t X</u>	Balance Sheet			
		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	665,924.	1	639,293
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	733,559
	4	Accounts receivable, net		4	205,849
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
¥	9	Prepaid expenses and deferred charges	10 576	9	67,045
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 0	•		
	b	Less: accumulated depreciation 10b	0.	10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	507,424.	15	378,812
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,790,655.	16	2,024,558
	17	Accounts payable and accrued expenses	115,066.	17	143,877
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ş	22	Loans and other payables to any current or former officer, director,			
ΙĘ		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
ם	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	_		361,423
	26	Total liabilities. Add lines 17 through 25	605,507.	26	505,300
		Organizations that follow FASB ASC 958, check here			
Ses		and complete lines 27, 28, 32, and 33.			4 -44
lan	27	Net assets without donor restrictions		27	1,314,258
Ba	28	Net assets with donor restrictions	260,000.	28	205,000
pur		Organizations that do not follow FASB ASC 958, check here			
Ĩ.		and complete lines 29 through 33.			
0 8	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	1,185,148.	32	1,519,258
	33	Total liabilities and net assets/fund balances	1,790,655.	33	2,024,558

Form **990** (2023)

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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	3,48		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,15		
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>4,1</u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,18	<u>5,1</u>	<u>48.</u>
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	1,51	9,2	58.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				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	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
				990	(2023)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

		T'RU						4	5-0464545
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	See instructions.		
The	organ	ization is not a private found	lation because it is: (I	For lines 1 through 12, cl	neck only	one box.)			
1	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 orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)(ii	ii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	overnmental unit	describe	ed in
		section 170(b)(1)(A)(iv). (0	Complete Part II.)						
6		A federal, state, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that norma	ılly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from the	general p	oublic described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Part	t II.)				
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(i	i x) operate	ed in conju	unction with a la	nd-grant	college
		or university or a non-land-ç	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of th	e college	or
		university:							
10		An organization that norma	illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership	fees, and	d gross receipts from
		activities related to its exen	npt functions, subjec	ct to certain exceptions; a	and (2) no	more than	33 1/3% of its s	support f	rom gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the orgar	nization a	ifter June 30, 1975.
		See section 509(a)(2). (Co	mplete Part III.)						
11	Ш	An organization organized a	and operated exclusi	ively to test for public sat	ety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to carry	out the	purposes of one or
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section :	509(a)(2).	See section 50	9(a)(3). 🤇	Check the box on
		lines 12a through 12d that	• • • • • • • • • • • • • • • • • • • •			•		•	
а			•	•					~ ~
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	ctors or trustees	of the su	ıpporting
		organization. You must c	•						
b			•				•		•
		control or management o	,, ,		ame perso	ns that co	ntrol or manage	the supp	ported
		organization(s). You mus	•		_				
C	:		· · · · · · · · · · · · · · · · · · ·				-	integrate	ed with,
	. —	its supported organizatio	,,,	•	•	=	·		
d			, ,						* *
		that is not functionally int			•		•	n attentiv	/eness
		requirement (see instruct	•	•	-			-	
е	· L						Type I, Type II,	rype III	
	⊏n.t.	functionally integrated, or		nally integrated supporting	ng organiz	ation.			
		er the number of supported on the supported of the following information or the following information of the following information o		nd organization(s)					
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of m	onetary	(vi) Amount of other
		organization		(described on lines 1-10	in your governi	No No	support (see inst	ructions)	support (see instructions)
				above (see instructions))	163	NO			
_									
_									
_							<u> </u>		
Tota	al								

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T'RUAH 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						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1760730.	2525706.	2572335.	3339470.	3399293.	13597534.
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	1760730.	2525706.	2572335.	3339470.	3399293.	13597534.
5	The portion of total contributions						
•	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						688,505.
6	Public support, Subtract line 5 from line 4.						12909029.
	etion B. Total Support				l	l	<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	1760730.	2525706.	2572335.	3339470.		13597534.
	Gross income from interest,	17007300	23237001	23723334	33331700	33332331	133373311
Ü	dividends, payments received on						
	securities loans, rents, royalties,						
		30,028.	30,123.	30,268.	31,922.	45,086.	167,427.
_	and income from similar sources	30,020.	30,123.	30,200.	31,322.	45,000.	107,427.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	6,790.			3,206.		9,996.
	assets (Explain in Part VI.)	0,790.			3,200.		13774957.
11			`				
12						12	180,970.
13	First 5 years. If the Form 990 is for th	=		-			
800	organization, check this box and stor						
	ction C. Computation of Publi			1 (6)			93.71 %
	Public support percentage for 2023 (I					14	
	Public support percentage from 2022					15	
16a	33 1/3% support test - 2023. If the c						37
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2022. If the d						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	· ·					,
	and if the organization meets the fact		*	•		VI how the organiz	zation
	meets the facts-and-circumstances te	•					
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets the	ne facts-and-circum	istances test, che	ck this box and st	t op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16	a, 16b, 17a, or 17b	, check this box a	nd see instructions	3
						Schedule A	(Form 990) 2023

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>				
14	First 5 years. If the Form 990 is for the	ie organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizatio	on,
	ction C. Computation of Publi					Т Т	
	Public support percentage for 2023 (I		=	column (f))		15	<u>%</u>
	Public support percentage from 2022 ction D. Computation of Inves					16	%
			_			147	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from :		* **	on line 14, and line		18	%
198	33 1/3% support tests - 2023. If the						/ IS NOL
1.	more than 33 1/3%, check this box ar	•					
K	33 1/3% support tests - 2022. If the line 18 is not more than 33 1/3%, che	-					
20	Private foundation If the organization			•		-	

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Vas No

Schedule A (Form 990) 2023

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of 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. 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

T'RUAH

- 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).
- 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.)

		. 00	
	1		
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	4a		
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	4c		
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	5b		
	5c		
	6		
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	8		
	9a		
	9b		
	9с		
	10a		<u> </u>
	10b		<u> </u>
Schedule	A (Forn	n 9901	2023

332024 12-21-23

Pa	TO IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	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	tion 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 officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			ĺ
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion 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	tion 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			
<u></u>	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	J .		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			1
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			1
	these activities but for the organization's involvement.	2b	\vdash	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			1
	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			1
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		<u> </u>

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Schedule A (Form 990) 2023

T'RUAH

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi:	zations				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	on 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	on 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-functional	ally integrated	Type III supporting orga	nization (see			
	instructions).	. •		,			

Schedule A (Form 990) 2023

Sche	dule A (Form 990) 2023 T'RUAH TV Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizatione / /		5-0464545 Page 7
		(a)(o) Supporting Orga	nizations _{(continue}	ea)	0
	ion D - Distributions	mnt nurnosos	T	1	Current Year
1 2	Amounts paid to supported organizations to accomplish exe Amounts paid to perform activity that directly furthers exemp			<u> </u>	
_	organizations, in excess of income from activity	or purposes or supported		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		3	
4	Amounts paid to acquire exempt-use assets	53 OF Supported Organizations	,	4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Dart VII)		5	
6	Other distributions (describe in Part VI). See instructions.	OVIGE GERAIS III FAIT VI)		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
Ū	(provide details in Part VI). See instructions.	to organization to responsive		8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023		(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2023 distributable amount				
i_	Carryover from 2018 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7:				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c. Breakdown of line 7:				
8	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

2023
Open to Public

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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:

•	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
	T'RUAH				45-0464545
Pa	art I-A Complete if the org	anization is exempt unde	r section 501(c) o	r is a section 527 or	ganization.
1 2 3	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures	· -	9	8
D.	and I D Commission if the own	onization is evenent unde	recetion FO1(a)(0	,	
_	-	anization is exempt unde			<u> </u>
	Enter the amount of any excise tax				
		, 0		\$	
3	If the organization incurred a sectio				
	a Was a correction made? b If "Yes," describe in Part IV.				Yes No
		anization is exempt unde	r section 501(c).	except section 501(c	:)(3).
_	Enter the amount directly expended				<u>}</u>
2		ization's funds contributed to oth	er organizations for sec and on Form 1120-POL,	etion 527	3
4	Did the filing organization file Form				Yes No
5	Enter the names, addresses, and er made payments. For each organizar contributions received that were propolitical action committee (PAC). If a	tion listed, enter the amount paid omptly and directly delivered to a	from the filing organiza separate political organ	ition's funds. Also enter th nization, such as a separat	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political 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) 2023

Schedule C (Form 990) 2023 T'RUAH 45-0464545 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). if the filing organization checked box A and "limited control" provisions apply. Check (a) Filing (b) Affiliated group **Limits on Lobbying Expenditures** organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: not over \$500,000, 20% of the amount on line 1e. over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. over \$1,500,000 but not over \$17,000,000, \$225,000 plus 5% of the excess over \$1,500,000. over \$17,000,000. \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c. If zero or less, enter -0ighthere is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period** Calendar vear (a) 2020 (b) 2021 (c) 2022 (d) 2023 (e) Total (or fiscal year beginning in) 2a Lobbying nontaxable amount **b** Lobbying ceiling amount (150% of line 2a, column(e))

Schedule C (Form 990) 2023

c Total lobbying expenditures

d Grassroots nontaxable amounte Grassroots ceiling amount (150% of line 2d, column (e))

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 each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		a)	(b)
of the lobbying activity.	Yes	No	Amount
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:			
a Volunteers?	. <u>X</u>		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		976.
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		Х	
g Direct contact with legislators, their staffs, government officials, or a legislative body?			3,355.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		
i Other activities?			5,697.
j Total. Add lines 1c through 1i		<u></u>	10,028.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912	I		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), sec			
	tion 501(c)(b), or sec	tion
501(c)(6).			- V
			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?			
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from			
Part III-B Complete if the organization is exempt under section 501(c)(4), sec			
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere	a "No" OR	(b) Part II	II-A, IINE 3, IS
answered "Yes."			
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of po	litical		
expenses for which the section 527(f) tax was paid).			
a Current year			
b Carryover from last year			
c Total			
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			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	d political		
expenditures next year?		4	
5 Taxable amount of lobbying and political expenditures. See instructions		5	
Part IV Supplemental Information			
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground and a second s	oup list); Part II-	A, lines 1 ar	nd 2 (see
instructions); and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES:			
OUR ORGANIZATION CONDUCTS OUTREACH AND COMMUNITY EDU	CATION	DESIG	NED TO
INCREASE PUBLIC AWARENESS AND UNDERSTANDING OF VARIO	US LEGIS	SLATIVI	3
POLICIES. OUR ACTIVITIES INCLUDE HOSTING INFORMATION	AL SESSI	ONS,	
DISTRIBUTING EDUCATIONAL MATERIALS, AND COLLABORATING	G WITH I	LOCAL (GROUPS
TO PROMOTE T'RUAH'S MISSION AND VALUES, THESE EFFO	RTS SERV	/E TO	
			le C (Form 990) 2023

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

Name of the organization

T'RUAH

Employer identification number 45-0464545

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v		
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	ised only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose c	onferring
Pai			art IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreated		a historically important land area
	Protection of natural habitat	Preservation of a	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	
	day of the tax year.		Held at the End of the Tax Year
а			
b			
C	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included on line 2c acqui		
_	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the d	organization during the tax
	year	amont is legated	
4	Number of states where property subject to conservation eas Does the organization have a written policy regarding the per	<u> </u>	
5	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
J	cian and volunteer hours devoted to morntoning, inspecting,	rialianing of violations, and emoloning consc	sivation casements daming the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	on easements during the year
-	, , , , , , , , , , , , , , , , , , ,		
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h)((4)(B)(i)
		, , ,	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footn		
	organization's accounting for conservation easements.	· ·	
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement an	nd balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in fur	therance of public
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that describes these items	3.
b	If the organization elected, as permitted under FASB ASC 956	8, to report in its revenue statement and ba	alance sheet works of
	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 treat	asures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
<u>b</u>	Assets included in Form 990, Part X		\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2023

45-0464545 Page 2 T'RUAH <u>Schedule D (Form</u> 990) 2023 Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply). Public exhibition Loan or exchange program Scholarly research h Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No **b** If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 10 d Additions during the year 1d Distributions during the year 1e 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10 (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back **1a** Beginning of year balance **b** Contributions Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs f Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment **b** Permanent endowment Term endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the No organization by: (i) Unrelated organizations? (ii) Related organizations? 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment

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

	1 9	, , , , , , , , , , , , , , , , , , ,	,	, ,	
	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				
е	Other				
Tota	I. Add lines 1a through 1e. (Column (d) must equa	Form 990 Part X line 1	Oc. column (B))		0.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 T'RUAH		45	5-0464545 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(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, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	5 000 D 1 N/ H		
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	#Deal
	Description		(b) Book value
(1) RIGHT OF USE ASSETS (2) SECURITY DEPOSIT			350,971. 27,841.
_ , ,			27,841.
(3)			
(4)			
(5)			
<u>(6)</u>			
(7) (8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col	(R))		378,812.
Part X Other Liabilities	, (D))		<u> </u>
Complete if the organization answered "Yes"	on Form 990, Part IV, line	l1e or 11f. See Form 990, Part X, line 25	5.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE OBLIGATION	V .		361,423.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. line 25. col	!. <i>(</i> B))		361,423.

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

Schedule D (Form 990) 2023

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

	dule D (Form 990) 2023 T. RUAH		J404545	Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements	1	3,541,	<u>329.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments]		
b	Donated services and use of facilities 2b 55,521.]		
С	Recoveries of prior year grants]		
d	Other (Describe in Part XIII.)]		
е	Add lines 2a through 2d	2e		<u>521.</u>
3	Subtract line 2e from line 1	3	3,485,	808.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b]		
b	Other (Describe in Part XIII.)	<u> </u>		
С	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,485,	808.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	Returr	า	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements	1	3,207,	<u>219.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities 2a 55,521.]		
b	Prior year adjustments 2b]		
С	Others Leaves			
-	Other losses 2c	J 1		
d	Other (Describe in Part XIII.)			
d e		2e		521.
	Other (Describe in Part XIII.)	2e 3	55, 3,151,	
e	Other (Describe in Part XIII.) Add lines 2a through 2d	-		
е 3	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	-		
e 3 4	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	-		
e 3 4 a	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a	-	3,151,	698. 0.
e 3 4 a b c 5	Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) 4a Add III.	3		698. 0.

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

PART X, LINE 2:

THE ORGANIZATION IS A NON-PROFIT CORPORATION, EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A). U.S. GAAP REQUIRES MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE ORGANIZATION AND RECOGNIZE A TAX LIABILITY IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES.

MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIALS TO COMPLY WITH THE PROVISIONS OF THIS

Schedule D (Form 990) 2023 T'RUAH	45-0464545 Page 5
Schedule D (Form 990) 2023 T 'RUAH Part XIII Supplemental Information (continued)	
GUIDANCE.	

SCHEDULE F (Form 990)

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.

Open to Public

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

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Г' F	RUAH					45-046454	5
Pai	rt I	General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organization answered "Y	es" on
		Form 990, Part IV			•	-	
1	For gra	antmakers. Does	the organization	maintain record	ds to substantiate the amount of its gra	nts and other assistance,	
	the gra	ntees' eligibility fo	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assistance?	Yes No
2	For gra	antmakers. Desc	ribe in Part V the	organization's p	procedures for monitoring the use of its	grants and other assistance outsi	de the
	United	States.					
3					n be duplicated if additional space is n		
	(a)	Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total expenditures
			offices in the region	agents, and	(by type) (such as, fundraising, program services, investments, grants to	is a program service, describe specific type	for and
			in the region	independent contractors	recipients located in the region)	of service(s) in the region	investments
				in the region			in the region
						TRAINING NORTH AMERICAN	
						RABBINICAL STUDENTS	
	RINIS					STUDYING IN ISRAEL TO BE	
RABE	BINICAL	TRAINING			SEE PAGE 5, PART V	HUMAN RIGHTS LEADERS.	107,078.
							
3 a	Subtot	al	0	0			107,078.
		om continuation					, , ,
		to Part I	0	0			0.
c		(add lines 3a					
-	and 3b		0	0			107,078.

LHA 332071 11-29-23

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

Schedule F (Form 990) 2023

T'RUAH

Schedule F (Form 990) 2023

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of valuation (book, FMV, appraisal, other) (h) Description of noncash assistance (g) Amount of noncash assistance exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter cash disbursement Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax (f) Manner of of cash grant (e) Amount (d) Purpose of grant (c) Region Enter total number of other organizations or entities and EIN (if applicable) (b) IRS code section (a) Name of organization Q က

Schedule F (Form 990) 2023

Page 3

T'RUAH

Schedule F (Form 990) 2023 T ' RUAH
Schedule F (Form 990) 2023 T ' RUAH
Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2023
(g) Description of noncash assistance					Schedu
(f) Amount of noncash assistance					_
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2023 T'RUAH 45-0464545 Page 4

Part	IV Foreign Forms		
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 the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may		
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a		
	U.S. Owner (see the 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 the 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 the 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 the 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		
	"Ves " the organization may be required to separately file Form 5713. International Boycott Report (see		

the Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2023

Yes X No

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

2023

Open to Public Inspection

Name of the organization T'RUAH						45-0464	ntification number
	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 1		
required to complete this part				, ,			
 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, Pab If "Yes," list the 10 highest paid individual compensated at least \$5,000 by the 	e Solicitat f Solicitat g Special r oral agreement with any individual art VII) or entity in connection with priduals or entities (fundraisers) pursua	tion of tion of fundra (includ	non-g gover aising of ding of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
List all states in which the organizatio or licensing.			utions	or has been notified	it is e	эхеmpt from reç	gistration
-							

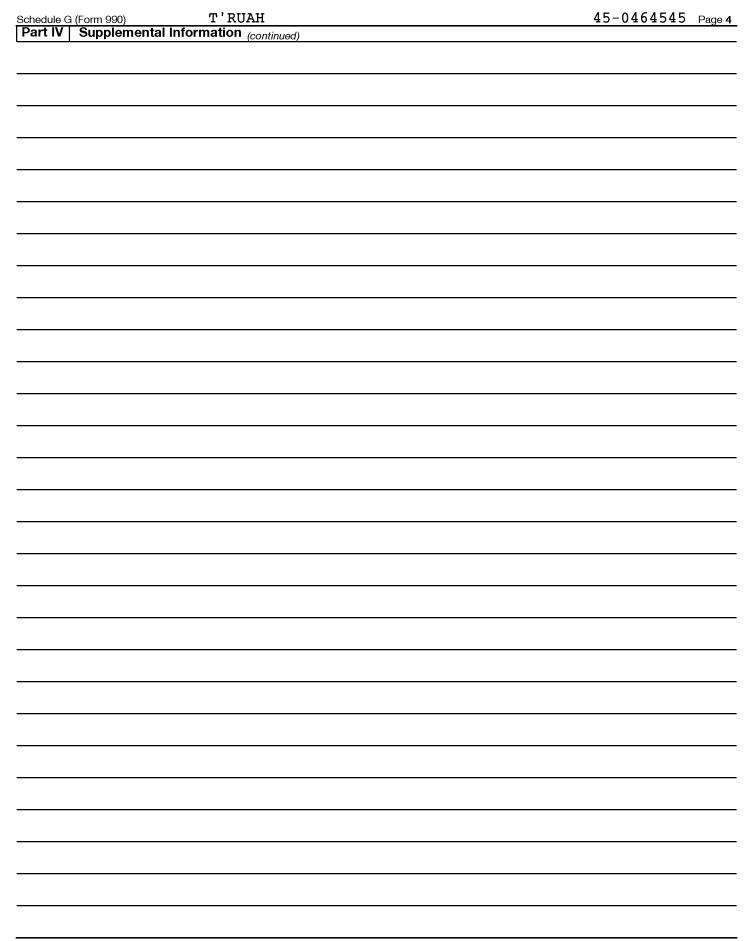
LHA 332081 09-13-23

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

Schedule G (Form 990) 2023

Pa	art II Fundraising Events. Complete if the	organization answered	"Yes" on Form 990, Parl	: IV, line 18, or reported	more than \$15,000
	of fundraising event contributions and gros				s greater than \$5,000.
		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
•	[(event type)	(event type)	(total number)	col. (c))
Revenue	1 Gross receipts	408,627.			408,627.
	2 Less: Contributions	363,777.			363,777.
	3 Gross income (line 1 minus line 2)	44,850.			44,850.
	4 Cash prizes				
	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs	13,869.			13,869.
rect E	7 Food and beverages				
Ē	8 Entertainment				
	9 Other direct expenses	60,606.			60,606.
	10 Direct expense summary. Add lines 4 through				60,606. 74,475. -29,625.
	11 Net income summary. Subtract line 10 from lin				-29,625.
Pa	art III Gaming. Complete if the organization ar	nswered "Yes" on Form	990, Part IV, line 19, or r	eported more than	_
	\$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))
Re	1 Gross revenue				
Expenses	2 Cash prizes				
Ехре	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes % No	Yes % No	Yes % No	
	7 Direct expense summary. Add lines 2 through	5 in column (d)			
	8 Net gaming income summary. Subtract line 7 f	rom line 1, column (d)			
а	Enter the state(s) in which the organization conduct a Is the organization licensed to conduct gaming act b If "No," explain:	ivities in each of these s	states?		Yes No
	Were any of the organization's gaming licenses rev If "Yes," explain:	oked, suspended, or te	rminated during the tax y	ear?	Yes No
33201	082 09-13-23			School	dule G (Form 990) 2023

Sch	edule G (Form 990) 2023 T'RUAH	45-04	64545	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 formed			
	to administer charitable gaming?	[Yes	No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	.	13a	%
	o An outside facility		13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and record			
••	The file file of the decision of the person into property the deganity gaining opening the testing and record			
	Name			
	Address			
15.	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Г	Yes	No
IJ	boes the organization have a contract with a third party from whom the organization receives gaining revenue:		103	
	of "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization	ount.		
L		Julit		
	of gaming revenue retained by the third party \$			
C	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	-		
	retain the state gaming license?	L	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	ı the		
	organization's own exempt activities during the tax year \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Part I	II, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
_				



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.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

T'RUAH

45-0464545

Part I Questions Regarding Compensation

			Yes	No
1a	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.			l
	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			l
	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			l
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>
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.			l
	Compensation committee X Written employment contract			l
	Independent compensation consultant X Compensation survey or study			l
	Form 990 of other organizations X Approval by the board or compensation committee			
,	During the year did any parent listed on Form 000. Part VIII. Section A. line to 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			l
_	organization or a related organization:			х
a	Receive a severance payment or change-of-control payment?	4a		Y X
D	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b 4c		X
C	Participate in or receive payment from an equity-based compensation arrangement?	40		
	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:			l
а	The organization?	5a		Х
b	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			l
	contingent on the net earnings of:			l
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			_ -
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	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		

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

Schedule J (Form 990) 2023

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 W	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) RABBI JILL JACOBS	Ξ	191,00	0	0	8,71	14,758.	214,475.	0
CHIEF EXECUTIVE OFFICER	▣	0.	• 0	0	0	0.	• 0	0.
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	(ii)							
							Schedu	Schedule J (Form 990) 2023

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2023

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.

T'RUAH Employer identification number 45-0464545

Pai	rt I Types of Property						
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determ noncash contribution	-	:s
1	Art - Works of art		items contributed	Tomi 990, Fait VIII, line 19			
2	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	Х	6	68,466.	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 ()						
<u>28</u> 29	Other () Number of Forms 8283 received by the organiz	zation during	the tax year for e	ontributions			
29	for which the organization completed Form 828	•					
	101 Which the organization completed 10111 020	Jo, Fait V, L	onee Acknowledg	ement 29]		Yes	No
30a	During the year, did the organization receive by	/ contributio	n any nronerty ren	orted in Part I lines 1 throug	nh 28 that it	103	110
	must hold for at least 3 years from the date of the						
	exempt purposes for the entire holding period?					,	х
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	oolicy that re	equires the review o	of any nonstandard contribu	tions? 31		Х
	Does the organization hire or use third parties of	-	•	•			
			~		32	<u>. </u>	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 property	for which column (a) is che	cked,		
	describe in Part II.						

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

Schedule M (Form 990) 2023

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.

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

T'RUAH

Employer identification number 45-0464545

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

10,000 AMERICAN AND CANADIAN JEWS TO BRING A MORAL VOICE TO THE MOST

PRESSING ISSUES OF OUR TIME. WE BRING THE WISDOM OF JEWISH TRADITION,

AND THE POWER OF THE JEWISH COMMUNITY TO THE SACRED WORK OF PROTECTING

THE HUMAN RIGHTS AND DIGNITY OF ALL PEOPLE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE SACRED WORK OF PROTECTING THEHUMAN RIGHTS AND DIGNITY OF ALL

PEOPLE.

PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: AND AN END TO MASS INCARCERATION, AS WELL AS FIGHTING FOR RACIAL JUSTICE AND AGAINST ANTISEMITISM AND OTHER BIGOTRIES. WE ORGANIZE U.S. RABBIS TO SUPPORT THE HUMAN RIGHTS OF BOTH ISRAELIS AND PALESTINIANS INCLUDING THROUGH OPPOSING OCCUPATION AND THE EXPANSION OF SETTLEMENTS, AND FIGHTING FOR DEMOCRACY IN ISRAEL.; OTHER WORK INCLUDES TRAINING RABBINICAL STUDENTS TO BE HUMAN RIGHTS LEADERS THROUGH A YEAR-LONG PROGRAM FOR STUDENTS STUDYING IN ISRAEL; TRAINING RABBIS TO BE HUMAN RIGHTS LEADERS THROUGH CONVENINGS. TRAININGS, COMMUNITIES AND ONE-ON-ONE SUPPORT; PRODUCING JEWISH EDUCATIONAL MATERIALS ON HUMAN RIGHTS; CREATING PRAYERS, RITUALS, AND WEEKLY TORAH COMMENTARIES; AND AMPLIFYING THE VOICE OF RABBIS AS HUMAN RIGHTS LEADERS THROUGH OP-EDS, PUBLIC STATEMENTS AND PUBLIC TESTIMONY.

SCHEDULE F ACTIVITIES CONDUCTED IN THE REGION (BY TYPE) (SUCH AS

FUNDRAISING, PROGRAM SERVICES, INVESTMENTS, GRANTS TO RECIPIENTS

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization **Employer identification number** T'RUAH 45-0464545 LOCATED IN THE REGION). WE INTRODUCE RABBINICAL STUDENTS TO HUMAN RIGHTS ISSUES AND LEADERS ON THE GROUND IN ISRAEL AND THE OCCUPIED PALESTINIAN TERRITORIES AND CONDUCT LEARNING AND REFLECTION SESSIONS AIMED AT HELPING STUDENTS DEVELOP THEIR OWN RABBINIC VOICE. FORM 990, PART VI, SECTION B, LINE 11B: THE EXECUTIVE DIRECTOR AND DIRECTORS OF OPERATIONS REVIEW FOR CORRECTNESS. FORM 990, PART VI, SECTION B, LINE 15: BOARD REVIEW FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: CA,FL,GA,HI,IL,MD,MI,MN,MS,NC,NM,NY,WV,OR,PA,RI,SC,TN,VA,WI,MA,NH FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENT AVAILABLE UPON REQUEST. FORM 990, PART XII, LINE 2C: THE ORGANIZATION HAS AN AUDIT COMMITTEE WHICH ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT. THIS PROCESS IS UNCHANGED FROM THE PRIOR YEAR.

Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Elect	ronic filing (e-file). You can electronically file Form 8868 to r	request up	to a 6-month extension of time to	file any of t	the forms	
	below except for Form 8870, Information Return for Transfer					
•	st for Form 8870 must be sent to the IRS in a paper format (s		ctions). For more details on the elec	tronic filinç	g of Form	
8868	visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-p	rofits.				
Cauti	on: If you are going to make an electronic funds withdrawal (o	direct debi	t) with this Form 8868, see Form 84	153-TE and	I Form 8879-T	E for payment
instru	ctions.					
All co	rporations required to file an income tax return other than Fo	rm 990-T (including 1120-C filers), partnership	s, REMIC	s, and trusts	
must	use Form 7004 to request an extension of time to file income	tax returr	าร.			
<u>Part</u>	- Identification					
Туре	Name of exempt organization, employer, or other filer, see instructions.				Taxpayer identification number (TIN)	
Print						
File by due da filing ye return.	T'RUAH 45-0464545					
	Number, street, and room or suite no. If a P.O. box, see instructions.					
instruc						
	NEW YORK, NY 10018					
Enter	the Return Code for the return that this application is for (file	a separat	e application for each return)			01
Application Is For			Application Is For			Return
		Code				Code
Form 990 or Form 990-EZ			Form 4720 (other than individual)	dividual)		
Form 4720 (individual)			Form 5227	•		
Form 990-PF			Form 6069			
Form 990-T (sec. 401(a) or 408(a) trust)			Form 8870			
Form 990-T (trust other than above)			Form 5330 (individual)			
Form 990-T (corporation)			Form 5330 (other than individual)	ndividual)		
Form 1041-A						
time	er you enter your Return Code, complete either Part II or Part to file Form 5330. his application is for an extension of time to file Form 5330, yo Plan Name			only for an	extension of	
	Plan Number					
	Plan Year Ending (MM/DD/YYYY)					
Part II	- Automatic Extension of Time To File for Exempt Organiz	zations (s	ee instructions)			
	e books are in the care of RABBI JILL JACOBS		oo maa dollonoy			
•			SUITE 803 - NEW YO	DRK. N	Y 10018	3
Τe	lephone No. 212-845-5201	•	Fax No.	•		
	he organization does not have an office or place of business	in the Uni				
	his is for a Group Return, enter the organization's four-digit G					
box	If it is for part of the group, check this box	-	ch a list with the names and TINs o			
1		GUST	4 - 4 -		npt organization	
	1					
	the organization named above. The extension is for the organization named above. The extension is for the organization or					
	<u> </u>	. 20 2	23 , and ending	SEP 3	0 .	, 20 2 4
2	the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return					
Change in accounting period						
3a	If this application is for Forms 990-PF, 990-T, 4720, or 6069,	enter the	tentative tax less			
Ou	any nonrefundable credits. See instructions.	OHIOI INO	toritativo tax, 1000	3a	\$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and	04	—	<u> </u>
-	estimated tax payments made. Include any prior year overpa			3b	\$	0.
С	Balance due. Subtract line 3b from line 3a. Include your pay	•		0.5	<u> </u>	