PUBLIC DISCLOSURE COPY

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ARMANINO ADVISORY LLC

PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. C0147451
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.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2023 calendar year, or tax year beginning and ending

	heck if	C Name of organization	D Employer identification number				
	Addre						
	Name	B	95-169	91012			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	E Telephone	numbe	er		
	Final return	6505 WILSHIRE BLVD SUITE 200		,	(323) 7		
	termin ated		G Gross receipts	\$	39,567,108.		
	Ameno				H(a) Is this a g		
	Applic	F Name and address of principal officer: JEFFREY CARR					s? Yes X No
	pendir				ncluded? Yes No		
ΙT	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947	(a)(1) or	527	1 ' '		a list. See instructions
	/ebsit				H(c) Group ex		
K F	orm of	organization: X Corporation Trust Association Other	L	_ Year	of formation: 193		M State of legal domicile: CA
	rt I	Summary					
	1	Briefly describe the organization's mission or most significant activities: JV	S SOCAL (OFFER	S HOPE AND		
Governance		OPPORTUNITY TO OUR DIVERSE COMMUNITY THROUGH JOB (CONTIN					
la L	2	Check this box if the organization discontinued its operations or o	disposed of	more	than 25% of its	net as	sets.
ĕ	3	Number of voting members of the governing body (Part VI, line 1a)				. 3	28
	4	Number of independent voting members of the governing body (Part VI, line					28
8	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)				. 5	1194
)ţį	6	Total number of volunteers (estimate if necessary)				6	28
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12					0.
_		Net unrelated business taxable income from Form 990-T, Part I, line 11					0.
					Prior Year		Current Year
۵	8	Contributions and grants (Part VIII, line 1h)			26,651	,740.	35,621,438.
ğ	9	Program service revenue (Part VIII, line 2g)		0.	5,239.		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			252	,906.	3,216,998.
۳	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		. L	350	,908.	437,376.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line	12)		27,255	,554.	39,281,051.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			848	,500.	811,300.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	•			
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5	,300.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.			
<u>p</u>		Total fundraising expenses (Part IX, column (D), line 25)1,	042,607.				
ıû	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			10,804	,214.	12,168,310.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			28,266	,014.	32,370,746.
		Revenue less expenses. Subtract line 18 from line 12			-1,010	,460.	6,910,305.
Net Assets or Fund Balances				Ве	ginning of Curren		End of Year
sets	20	Total assets (Part X, line 16)			29,647	,911.	33,639,228.
tAS MB	21	Total liabilities (Part X, line 26)			12,491	,949.	10,606,056.
ᆁ	22	Net assets or fund balances. Subtract line 21 from line 20			17,155	,962.	23,033,172.
	rt II	Signature Block					
	-	lties of perjury, I declare that I have examined this return, including accompanying sch					y knowledge and belief, it is
true,	correc	rt, and complete. Declaration of preparer (other than officer) is based on all information	n of which pr	eparer	has any knowledg	e.	
		Cianatura of officer			Data		
Sign		Signature of officer			Date		
Here	•	JEFFREY CARR, CEO					
		Type or print name and title		Tr	Date	Chasl. F	DTINI
D		Print/Type preparer's name Preparer's signature				Check [if	PTIN
Paid		KATY BROWN KATY BROWN		μ(self-emplo	
Prep		Firm's name ARMANINO ADVISORY LLC			Firm's	<u> EIN</u>	94-6214841
Use	ипіў	Firm's address 11766 WILSHIRE BLVD 9TH FLOOR				21/	1_478_4140
Mari	the I	LOS ANGELES, CA 90025			Phone	110.510	X Ves No.

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Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: JVS SOCAL IS A CALIFORNIA NONSECTARIAN NONPROFIT SERVING NEARLY 30,000	
	CLIENTS PER YEAR OFFERING HOPE AND OPPORTUNITY TO A DIVERSE COMMUNITY	
	THROUGH JOB TRAINING, MENTORING AND EDUCATION, COMBINED WITH EXPERT	
	CAREER GUIDANCE AND EMPLOYER PARTNERSHIPS, (CONTINUE ON SCH O)	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2	, , , , , , , , , , , , , , , , , , , ,	Yes X No
	prior Form 990 or 990-EZ?	res no
•	If "Yes," describe these new services on Schedule O.	V. V.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	YesNo
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total ex	penses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$12,971,847. including grants of \$) (Revenue \$	5,239.
	WORKFORCE DEVELOPMENT	
	WORKFORCE DEVELOPMENT INCLUDES SEVERAL FEDERALLY FUNDED AMERICA'S JOB	
	CENTERS OF CA THAT SERVE BOTH JOB SEEKERS AND LOCAL EMPLOYERS, OFFERING	
	JOB FAIRS, CANDIDATE RECRUITMENT AND SCREENING. PROGRAMS FOR JOB	
	SEEKERS INCLUDE: JOB READINESS WORKSHOPS AND COACHING IN THE AREAS OF	
	CONPREHENSIVE JOB SEARCH AND EMPLOYMENT SERVICES TO ASSIST INDIVIDUALS	
	WITH APPROPRIATE JOB TRAINING FOCUSED ON HIGH GROWTH CAREER PATHWAYS.	
	JVS SOCAL CENTERS PROVIDE SERVICES FOR ALL JOB SEEKERS, INCLUDING	
	ADULTS AND YOUTH WITH BARRIERS TO EMPLOYMENT. JVS SOCAL ALSO OPERATES	
	JVS SOCAL VETERAN SERVICES THAT ASSISTS VETERANS WITH JOB DEVELOPMENT,	
	JOB PLACEMENT, AND TEMPORARY HOUSING, AND WRAP AROUND SERVICES.	
4b	(Code:) (Expenses \$ 6 , 470 , 912. including grants of \$) (Revenue \$)
	WELFARE TO WORK	
	WELFARE TO WORK PROGRAMS ASSIST THOUSANDS OF CLIENTS TRANSITIONING FROM	
	WELFARE TO WORK THROUGH LOS ANGELES COUNTY'S GAIN PROGRAM. THIS PROGRAM	
	OFFER FULL-SERVICE CASE MANAGEMENT UNDER THE SUPERVISION OF LOS ANGELES	
	COUNTY. OFFICES ARE LOCATED IN CHATSWORTH, PALMDALE, SANTA CLARITA AND	
	GLENDALE.	
	(Code:) (Expenses \$ 1 , 415 , 469 including grants of \$) (Revenue \$	
4c	(Code:) (Expenses \$1,415,469. including grants of \$) (Revenue \$) JVS_WORKS	
	- TO WOLKE	
	TRAINING SERVICES INCLUDE BOTH SOFT SKILLS AND TECHNICAL SKILLS	
	TRAINING THAT FOSTER GROWTH AND JOB READINESS IN INDIVIDUALS SEEKING	
	NEW CAREER OPPORTUNITIES. THESE PROGRAMS PROVIDE CUSTOMIZED JOB	
	TRAINING, JOB PLACEMENT ASSISTANCE AND ONGOING COACHING FOR CAREERS IN	
	THE HEALTHCARE, BUILDING MAINTENANCE, AND FINANCIAL SERVICES SECTORS.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 3,037,528. including grants of \$ 811,300.) (Revenue \$)
4e	Total program service expenses 23,895,756.	
		Form 990 (2023)

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Form 990 (2023) JVS SOCAL 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	i i		
Ŭ	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	Ť		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7		-		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	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	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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			
13		18	х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	10		\vdash
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
00-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
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		X

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Part IV Checklist of Required Schedules (contin	nued)
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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	Х	<u> </u>
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>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04.		
م	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			v
L	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
·	"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	24		x
25.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	Jua		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Pai	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	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	Х	i

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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) 95-1691012

			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 2a1194								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х					
b	f "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O								
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)?								
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year	+		v					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>х</u>					
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8							
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	l °							
а	Did the appropriate averagination made and touchts distributions and averaging 40000	9a							
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:	0.5							
а	Initiation fees and capital contributions included on Part VIII, line 12								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders								
	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	4							
	Enter the amount of reserves on hand								
	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		<u> </u>					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1		17					
	excess parachute payment(s) during the year?	15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.			v					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
47	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	47							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17							
	n res, complete fulli 0003.								

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 28									
	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										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
_	officer, director, trustee, or key employee?									
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	2								
Ū	of officers, directors, trustees, or key employees to a management company or other person?	3		х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х						
6		6		х						
7a	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
1 a	more members of the governing body?	7a		х						
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	r a								
b		7b		х						
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.0								
8		0-	Х							
a	The governing body?	8a	X							
a	Each committee with authority to act on behalf of the governing body?	8b	Λ							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		х						
Sac	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Λ						
000	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	Na						
10-	Did the expenientian have lead shorters branches as effiliated?	10a	res	No X						
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	iua								
b		10b								
110	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	1 Ia								
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
12a		12b	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	120								
С		12c	х							
12	on Schedule O how this was done Did the organization have a written whistleblower policy?	13	X							
13		14	х							
14	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14								
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
_		15a	Х							
	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15b	X							
J	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	100								
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
104	taxable entity during the year?	16a		Х						
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	ioa								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure	100								
17	List the states with which a copy of this Form 990 is required to be filed CA									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only) a	availat	ole						
	for public inspection. Indicate how you made these available. Check all that apply.	Cy, .								
	Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial							
.5	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records									
_5	JEFFREY CARR - (323)761-8888									
	6505 WILSHIRE BLVD., SUITE 200, LOS ANGELES,, CA 90048									

Form 990 (2023) JVS SOCAL 95-1691012 Page **7**

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) Name and title	(B) Average hours per week	(do box		Pos heck ss per	c) ition more rson i	than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) JEFFREY CARR	40.00							205 555		25.046
CEO	40.00			Х		<u> </u>		307,777.	0.	35,216.
(2) MARGARITE BUITRAGO	40.00	1		1,,				200 616	_	21 742
CURRENT CFO (3) NEAL MENDELSOHN	40.00			Х		-		299,616.	0.	31,742.
CSO (THRU 12/23)	40.00	1		X				286,361.	0.	30 000
(4) ALAN LEVEY	40.00			^				200,301.	0.	30,000.
FORMER CEO (THRU 07/23)	40.00	1		x				283,888.	0.	28,039.
(5) TED FELDMAN	40.00							200,000.	· ·	20,000:
CAO		1		x				277,614.	0.	24,146.
(6) RANDY LAPIN	40.00									
SENIOR VP OF PHILANTHROPY		1				x		187,628.	0.	7,550.
(7) KIM FEDRICK	40.00							,		
VP - PROGRAMS		1				x		176,292.	0.	7,392.
(8) SEAN THIBAULT	40.00									
SENIOR VP OF MARKETING		1				х		178,260.	0.	1,800.
(9) DIONNE DAY	40.00									
FORMER CFO (THRU 06/23)				Х				159,409.	0.	4,135.
(10) JOSEPHINE SANTIAGO	40.00									
PROGRAM DIRECTOR						Х		149,332.	0.	7,713.
(11) JOHN GUTIERREZ	40.00	1								
DIRECTOR OF AJCC AND VETERANS						Х		137,270.	0.	3,683.
(12) RONNY BENSIMON	10.00	1								
CHAIR		Х		Х				0.	0.	0.
(13) SHARON DARNOV	10.00	1								
SECRETARY		Х	_	Х		┞	_	0.	0.	0.
(14) MICAH DEKOFSKY	10.00	1								
TREASURER		Х		Х				0.	0.	0.
(15) ADAM ABRAMOWITZ	5.00	ł <u>.</u>							_	_
DIRECTOR	5.00	Х				-		0.	0.	0.
(16) JOEL BERMAN	5.00	↓							_	_
DIRECTOR (17) FILEEN COCKEY FRACCULA	E 00	Х	-	-		\vdash	-	0.	0.	0.
(17) EILEEN COSKEY FRACCHIA DIRECTOR	5.00	х						0.	0.	^
DIRECTOR		^	<u> </u>				<u> </u>	1 0.	<u> </u>	0. Earm 990 (2022)

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Form 990 (2023) JVS SOCAL									95-169101	2 Page o
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t Co	pmpensated Employee	s (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one				one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	erson is both an director/trustee)		n an	compensation	compensation	amount of
	week (list any					1711 43		from	from related	other
	hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	9e or (stee			nsated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	Institutional trustee		yee	Highest compensated employee		1099-NEC)		and related
	below	ridual	tutior	Ja Ja	Key employee	est co loyee	Jer.			organizations
	line)	Indiv	Insti	Officer	Key 6	High emp	Former			
(18) LELAND FELSENTHAL	5.00									
DIRECTOR		Х						0.	0.	0.
(19) SAMANTHA HAUGH	5.00									
DIRECTOR		Х						0.	0.	0.
(20) JIM HAUSBERG	5.00									
DIRECTOR		Х						0.	0.	0.
(21) CHARLIE HILL	5.00									
DIRECTOR		Х						0.	0.	0.
(22) MARIO HOLTEN	5.00									
DIRECTOR		Х						0.	0.	0.
(23) JONATHAN A. KARP	5.00									
DIRECTOR		Х						0.	0.	0.
(24) LAUREN KURZWEIL	5.00									
DIRECTOR		Х						0.	0.	0.
(25) JEFFREY PAUL	5.00									
DIRECTOR		Х						0.	0.	0.
(26) MATTHEW PAUL	5.00									
DIRECTOR		Х						0.	0.	0.
1b Subtotal								2,443,447.	0.	181,416.
c Total from continuation sheets to Part VI	I, Section A							0.	0.	0.
d Total (add lines 1b and 1c)	· · · · · · · · · · · · · · · · · · ·	<u></u> .	<u></u>	<u></u>	····			2,443,447.	0.	181,416.

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

Programment of 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

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

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 X

Section B. Independent Contractors

16251029 701245 CUS000025047

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
RANDSTAD	Becomption of dorvices	Compensation
		404 505
10111 RICHMOND AVE #100, HOUSTON, TX 77042	CONSULTING	424,527.
HI-DESERT TRUCK DRIVING SCHOOL		
42739 5TH STREET EAST, LANCASTER, CA 93535	DRIVING CLASSES	373,871.
ROBERT HALF		
PO BOX 743295, LOS ANGELES, CA 90074	ACCOUNTING SERVICE	337,253.
CFO'S DOMAIN, LLC		
1401 21ST ST, STE R, SACRAMENTO, CA 95811	CONSULTING	322,400.
OPSEC SPECIALIZED PROTECTION, 4462		
DIVISION ST, SUITE A, LANCASTER, CA 93535	PPE & SECURITY SERVICE	196,986.
2 Total number of independent contractors (including but not limited	to those listed above) who received more than	
\$100,000 of compensation from the organization	12	
AND DADE WITH GEORGE AND A COMPANY MATERIAL GUIDENG		000

SEE PART VII, SECTION A CONTINUATION SHEETS

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Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average		Position (check all that app					Reportable	Reportable compensation	Estimated
	hours	(cl				app	ly)	compensation		amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) ROBERT C. PEARMAN	5.00									
DIRECTOR		Х						0.	0.	0
(28) DAVID PELAIA	5.00									
DIRECTOR		Х						0.	0.	0
(29) JAN PERRY	5.00									
DIRECTOR		Х						0.	0.	0
(30) RICK POWELL	5.00									
DIRECTOR		х						0.	0.	0
(31) CHIP W. ROBERTSON	5.00									
DIRECTOR		Х						0.	0.	0
(32) THOMAS SCHIFF	5.00									
DIRECTOR		Х						0.	0.	0
(33) SABRINA SHADI	5.00									
DIRECTOR		Х						0.	0.	0
(34) HARRIS SMITH	10.00									
DIRECTOR		Х						0.	0.	0
(35) CESAR TRUJILLO	5.00	-								
DIRECTOR		Х						0.	0.	0
(36) PETER TU	5.00									
DIRECTOR		Х						0.	0.	0
(37) YELENA VAYNER DIRECTOR	5.00	.,							0	0
(38) TIM WILSON	5.00	Х						0.	0.	0
OIRECTOR	5.00	x						0.	0.	0
(39) DAVID WIMMER	5.00	Λ						0.	0.	0
DIRECTOR	3.00	Х						0.	0.	0
								· ·	••	
		1								
		1								
		1								
		1								
		-								

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Form 990 (2023)

Part VIII Statement of Revenue

		Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
						function revenue	business revenue	sections 512 - 514
SS	1	a Federated campaigns	1a	3,984.				
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	1b	7757				
S S		c Fundraising events	1c	2,149,709.				
fts,		d Related organizations	1d					
ij gi				23,635,667.				
ons,		e Government grants (contributions)	1e	23,033,007.				
utic		f All other contributions, gifts, grants, and	1 1	9,832,078.				
ĕ		similar amounts not included above	1f	336,199.				
ont		g Noncash contributions included in lines 1a-1f	1g \$	330,133.	25 621 420			
O g		h Total. Add lines 1a-1f		B	35,621,438.			
		DDOGDAN EEEG		Business Code	F 020	F 020		
ce	2	a PROGRAM FEES		611600	5,239.	5,239.		
ervi	ı	b						
S	•	c						
ran Sev		d						
Program Service Revenue	(e						
<u>-</u>	1	f All other program service revenue						
		g Total. Add lines 2a-2f			5,239.			
	3	Investment income (including divide	nds, intere	st, and				
		other similar amounts)			431,025.			431,025.
	4	Income from investment of tax-exem						
	5	Royalties						
			i) Real	(ii) Personal				
	6	a Gross rents 6a	137,376.					
		b Less: rental expenses 6b	0.					
			137,376.					
		d Not rental income or (loss)			437,376.			437,376.
		` ' 	ecurities	(ii) Other	·			
	-		785,973.					
		b Less: cost or other basis	<u> </u>					
Φ		and sales expenses	0.					
her Revenue			785,973.					
ě		d Net gain or (loss)			2,785,973.			2,785,973.
푸		a Gross income from fundraising events (r						
Oth	0	including \$ 2,149,709.						
١		contributions reported on line 1c). S	-					
		'	I .	286,057.				
		Part IV, line 18 b Less: direct expenses		286,057.				
				,	0.			
		c Net income or (loss) from fundraisinga Gross income from gaming activities			3.			
	9	9 9	I .					
		Part IV, line 19						
		b Less: direct expenses						
		c Net income or (loss) from gaming ac						
	10	a Gross sales of inventory, less returns						
		and allowances						
		b Less: cost of goods sold		•				
\rightarrow		c Net income or (loss) from sales of in	ventory					
က္				Business Code				
Miscellaneous Revenue	11	a						
lan	I	b						
cell Sev		c						
Ais		d All other revenue						
		e Total. Add lines 11a-11d						
	12	Total revenue. See instructions	<u></u>		39,281,051.	5,239.	0.	3,654,374.

332009 12-21-23

Form 990 (2023) JVS SOCAL 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	

Check if Schedule O contains a responsion not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22	811,300.	811,300.		
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors,				
trustees, and key employees	1,767,943.	79,090.	1,609,763.	79,090
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	11 -00 -00		2 2 4 2 2 2 2	
7 Other salaries and wages	14,593,599.	11,692,312.	2,346,725.	554,562
8 Pension plan accruals and contributions (include		207 662	435 565	40.05
section 401(k) and 403(b) employer contributions)	444,400.	297,669.	135,767.	10,964
9 Other employee benefits	1,260,840.	1,191,616.	9,093.	60,131
10 Payroll taxes	1,324,354.	1,136,261.	135,833.	52,260
11 Fees for services (nonemployees):				
a Management	106 761	10.405	106 510	7.53
b Legal	126,761.	19,486.	106,512.	763
c Accounting	93,750.	11,634.	81,353.	763
d Lobbying				
e Professional fundraising services. See Part IV, line 17	15 001	2.452	12 500	
f Investment management fees	15,981.	2,453.	13,528.	
g Other. (If line 11g amount exceeds 10% of line 25,	1 667 650	260 140	1 277 741	20 760
column (A), amount, list line 11g expenses on Sch 0.)	1,667,650.	260,149.	1,377,741.	29,760
12 Advertising and promotion	237,533.	138,508.	38,836.	60,189 9,516
13 Office expenses	880,101.	503,701.	366,884.	9,516
14 Information technology				
15 Royalties	2 225 015	1 045 525	420 250	60.031
16 Occupancy	2,335,815.	1,845,525.	430,259.	60,031
17 Travel				
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	201 451	110,771.	104 005	F 70F
19 Conferences, conventions, and meetings	301,451.	110,771.	184,885.	5,795
20 Interest				
21 Payments to affiliates	19,862.	1,289.	18,573.	
22 Depreciation, depletion, and amortization	261,719.	31,388.	223,650.	6,681
23 Insurance	201,719.	31,300.	223,030.	0,001
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
a PROGRAM MATERIALS & FEE	4,298,551.	3,945,950.	287,303.	65,298
b TUITION	1,769,889.	1,769,889.		•
c MISC EXPENSES	146,470.	46,161.	65,678.	34,631
d FUNDRAISING EXPENSES	12,777.	604.		12,173
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	32,370,746.	23,895,756.	7,432,383.	1,042,607
26 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

Part /	^	Check if Schedule O contains a response or	note to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	7,718.	1	0.		
:	2	Savings and temporary cash investments	3,418,413.	2	2,331,187.		
;		Pledges and grants receivable, net			3,835,326.	3	5,366,535.
4		Accounts receivable, net			279,734.	4	183,430.
!		Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	bstantial o	contributor, or 35%			
		controlled entity or family member of any of t	hese pers	ons		5	
(6	Loans and other receivables from other disqu	ualified per	rsons (as defined			
		under section 4958(f)(1)), and persons descri	bed in sec	tion 4958(c)(3)(B)		6	
္ဟု ်	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ž ş		Prepaid expenses and deferred charges			340,657.	9	500,473.
10		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,370,374.			
	b	Less: accumulated depreciation	10b	1,330,171.	43,899.	10c	40,203.
11	1	Investments - publicly traded securities			13,654,824.	11	18,625,533.
12		Investments - other securities. See Part IV, lir				12	
13	3	Investments - program-related. See Part IV, li	ne 11			13	
14	4	Intangible assets				14	
15		Other assets. See Part IV, line 11	8,067,340.	15	6,591,867.		
10		Total assets. Add lines 1 through 15 (must e		1	29,647,911.	16	33,639,228.
17	7	Accounts payable and accrued expenses			3,789,137.	17	3,228,123.
18	8	Grants payable				18	
19	9	Deferred revenue			526,305.	19	585,122.
20	20	Tax-exempt bond liabilities				20	
2		Escrow or custodial account liability. Comple		21			
္ 2	2	Loans and other payables to any current or for	ormer offic	er, director,			
<u>≅</u>		trustee, key employee, creator or founder, su	ıbstantial d	contributor, or 35%			
Liabilities		controlled entity or family member of any of t	hese pers	ons		22	
ے ا	3	Secured mortgages and notes payable to un	related thi	rd parties		23	
24	4	Unsecured notes and loans payable to unrela	ated third	oarties		24	
2	5	Other liabilities (including federal income tax,	payables	to related third			
		parties, and other liabilities not included on li	nes 17-24)	. Complete Part X			
		of Schedule D			8,176,507.	25	6,792,811.
20	6	Total liabilities. Add lines 17 through 25			12,491,949.	26	10,606,056.
		Organizations that follow FASB ASC 958, o	check her	e X			
Ses		and complete lines 27, 28, 32, and 33.					
<u>ĕ</u> 2	7	Net assets without donor restrictions			8,787,777.	27	13,725,846.
g 2	8	Net assets with donor restrictions			8,368,185.	28	9,307,326.
<u> </u>		Organizations that do not follow FASB AS	C 958, che	eck here			
로		and complete lines 29 through 33.					
Ö 29	9	Capital stock or trust principal, or current fun	ıds			29	
S SE		Paid-in or capital surplus, or land, building, o				30	
ğ 3 [.]		Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances		Total net assets or fund balances			17,155,962.	32	23,033,172.
~ 3		Total liabilities and net assets/fund balances			29,647,911.	33	33,639,228.

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Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				Х	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		281, 370,		
2	2 Total expenses (must equal Part IX, column (A), line 25)					
3	Revenue less expenses. Subtract line 2 from line 1	3	6,910,305.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))					
5	Net unrealized gains (losses) on investments	5	-1,	060,	464.	
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		27,	369.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	23,	033,	172.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				<u>Ш</u>	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		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	c 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 Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За	Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	İ	
			Form	990	(2023)	

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SCHEDULE A

(Form 990)

Total

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.

Ope

ZUZ3

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

JVS SOCAL 95-1691012 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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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.")	25,259,797.	25,586,671.	28,484,953.	26,651,740.	35,621,438.	141,604,599.
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	172,260.	172,260.	172,260.	172,260.	172,260.	861,300.
4	Total. Add lines 1 through 3	25,432,057.	25,758,931.	28,657,213.	26,824,000.	35,793,698.	142,465,899.
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)						
6	Public support. Subtract line 5 from line 4.						142,465,899.
	ction B. Total Support						· · ·
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	25,432,057.	25,758,931.	28,657,213.	26,824,000.	35,793,698.	142,465,899.
	Gross income from interest,	, ,	, ,	, ,	, ,		, ,
-	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	197,176.	218,069.	244,933.	764,231.	868,401.	2,292,810.
۵	Net income from unrelated business				,	,	
3	activities, whether or not the						
	business is regularly carried on				20,840.		20,840.
10	Other income. Do not include gain				20,010.		20,020.
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
44	Total support. Add lines 7 through 10						144,779,549.
	**	oto (oco instructio	no)			12	347,126.
	Gross receipts from related activities, First 5 years. If the Form 990 is for the	•		ourth or fifth tax v	oar as a soction 50		
13	organization, check this box and stor						
Sec	ction C. Computation of Publi		centage				
	Public support percentage for 2023 (I			olumn (f))		14	98.40 %
	Public support percentage from 2022					15	98.78 %
	33 1/3% support test - 2023. If the o						,,,
100							
r	Coop not on a significant quantity outperson of guine.						
	b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
179	and stop here. The organization qualifies as a publicly supported organization						
176	17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,						
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
1.	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or						
r		_					10% Of
	more, and if the organization meets the				-		
40	organization meets the facts-and-circu				•		H
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	i, 100, 1/a, or 1/b	, crieck this box ar		(Form 990) 2023

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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						
	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.)						
	ction B. Total Support				ı		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	, ,	` '	` '			,,
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organizatio	on,
				•			
Se	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2023 (I			column (f))		15	%
	Public support percentage from 2022					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20)23 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	a 33 1/3% support tests - 2023. If the						
-	more than 33 1/3%, check this box ar						
ŀ	33 1/3% support tests - 2022. If the						nd
-	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

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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.

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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ŀ	3a		
	3b		
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	4a		
	4b		
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	9b		
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Part IV Supporting Organizations (continued)

ı a	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	4.4		
Sec	<u>detail in</u> Part VI. tion B. Type I Supporting Organizations	11c		
	Ton 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		163	NO
•	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)			
	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			
<u></u>	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			
	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))-		
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	s).	
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			
L	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			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	2b		
3	these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	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	Ju		
_	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

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Part V	Гуре III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 C	heck here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	ll other Type III non-functionally integrated supporting organizations mu		·	_
Section A - A	djusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net sho	rt-term capital gain	1		
2 Recover	ries of prior-year distributions	2		
3 Other gr	ross income (see instructions)	3		
4 Add line	es 1 through 3.	4		
5 Depreci	ation and depletion	5		
6 Portion	of operating expenses paid or incurred for production or			
collection	on of gross income or for management, conservation, or			
mainten	nance of property held for production of income (see instructions)	6		
7 Other ex	xpenses (see instructions)	7		
8 Adjuste	ed Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - M	linimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggrega	ate fair market value of all non-exempt-use assets (see			
instructi	ions for short tax year or assets held for part of year):			
a Average	e monthly value of securities	1a		
b Average	e monthly cash balances	1b		
c Fair mar	rket value of other non-exempt-use assets	1c		
d Total (a	dd lines 1a, 1b, and 1c)	1d		
e Discou	nt claimed for blockage or other factors			
(explain	in detail in Part VI):			
2 Acquisit	tion indebtedness applicable to non-exempt-use assets	2		
3 Subtrac	t line 2 from line 1d.	3		
4 Cash de	eemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see inst	ructions).	4		
5 Net valu	ue of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply	line 5 by 0.035.	6		
7 Recover	ries of prior-year distributions	7		
8 Minimu	m Asset Amount (add line 7 to line 6)	8		
Section C - D	Distributable Amount			Current Year
1 Adjuste	d net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.	85 of line 1.	2		
3 Minimur	m asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter gr	reater of line 2 or line 3.	4		
5 Income	tax imposed in prior year	5		
6 Distribu	utable Amount. Subtract line 5 from line 4, unless subject to			
	ncy temporary reduction (see instructions).	6		
$\overline{}$	heck here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	anization (see

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instructions).

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Pai	t v Type III Non-Functionally integrated 509	(a)(3) Supporting Orga	inizations _{(continue}	<u>ed)</u>				
Sect	ction D - Distributions Current Year							
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1				
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported						
	organizations, in excess of income from activity			2				
3	Administrative expenses paid to accomplish exempt purpose	s	3					
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5				
6	Other distributions (describe in Part VI). See instructions.			6				
7	Total annual distributions. Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the	ne organization is responsive	:					
	(provide details in Part VI). See instructions.			8				
9	Distributable amount for 2023 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount			10				
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	5	(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							
c	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							
<u>_i</u>	Carryover from 2018 not applied (see instructions)							
_ <u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2023 from Section D,							
	line 7:							
<u>a</u>	Applied to underdistributions of prior years							
<u> b</u>	Applied to 2023 distributable amount							
<u>c</u>	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.							
8	Breakdown of line 7:							
<u>a</u>	Excess from 2019							
	Excess from 2020							
	Excess from 2021							
d	Excess from 2022							

Schedule A (Form 990) 2023

e Excess from 2023

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

JVS SOCAL		95-1691012
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.
General Rule		
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor	•
Special Rules		
sections 509(a)(1 contributor, durin	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, an 17 the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Z, line 1. Complete Parts I and II.	d that received from any one
contributor, during literary, or educa	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a the year, total contributions of more than \$1,000 exclusively for religious, charitable, so tional purposes, or for the prevention of cruelty to children or animals. Complete Parts I (6) instead of the contributor name and address), II, and III.	cientific,
year, contribution is checked, ente purpose. Don't c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as exclusively for religious, charitable, etc., purposes, but no such contributions totaled may here the total contributions that were received during the year for an exclusively religious omplete any of the parts unless the General Rule applies to this organization because it tole, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>
answer "No" on Part IV, lin	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fine 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PFing requirements of Schedule B (Form 990).	• •
For Paperwork Reduction A	ct Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

JVS SOCAL

95-1691012

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		\$ 8,688,933. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No.	Name, address, and ZIP + 4	Total contributions Type of contribution
2		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No.	Name, address, and ZIP + 4	Total contributions Type of contribution
3		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 4	Name, address, and ZIP + 4	Total contributions Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5	Ivallie, audi ess, aliu ZIF + 4	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 6	Name, address, and ZIP + 4	Total contributions Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

3VS_SOCAL

95-1691012

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

Page 3

Schedule B (Form 990) (2023) Page 4

Name of org	ganization			Employer identification number
VS SOCAL			- 1	95-1691012
	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) the contributor of the columns (b) the columns (c) the co	nrough (e) and the following line ent	ry. For organizations	
	completing Part III, enter the total of exclusively religious, cha Use duplicate copies of Part III if additional sp	aritable, etc., contributions of \$1,000 or ace is needed.	less for the year. (Enter this info. o	once.) •
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of git	it	
	Transferee's name, address, and	3 ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of git	it	
	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of git	it	
	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of git	t	
	Transferee's name, address, and	3 ZIP + 4	Relationship of tra	nsferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

2023

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) organizations: Complete Part III. Name of organization **Employer identification number** JVS SOCAL 95-1691012 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ______\$ ____ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. 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

		JVS SOCAL				591012 Page 2	
Pa	rt II-A Complete if the org	anization is exer	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under	
	section 501(h)).						
4 (Check if the filing organiza	tion belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,	
	expenses, and share	e of excess lobbying	expenditures).				
3 (Check if the filing organiza	tion checked box A ar	nd "limited control" pro	visions apply.		_	
		ts on Lobbying Expe ditures" means amou	nditures ınts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals	
1a	Total lobbying expenditures to influ	uence public opinion (grassroots lobbying)				
b	Total lobbying expenditures to influ	uence a legislative boo	dy (direct lobbying)				
С	Total lobbying expenditures (add li	nes 1a and 1b)					
d	Other exempt purpose expenditure	es			32,357,733.		
е	Total exempt purpose expenditure	s (add lines 1c and 1d)		32,357,733.		
f	Lobbying nontaxable amount. Ente	er the amount from the	e following table in both	n columns.	1,000,000.		
	If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable am	ount is:			
	not over \$500,000,	20% of	the amount on line 1e.				
	over \$500,000 but not over \$1,000	,000, \$100,00	00 plus 15% of the exce	ess over \$500,000.			
	over \$1,000,000 but not over \$1,5	00,000, \$175,00	00 plus 10% of the exce	ess over \$1,000,000.			
	over \$1,500,000 but not over \$17,0	000,000, \$225,00	00 plus 5% of the exces	ss over \$1,500,000.			
	over \$17,000,000,	\$1,000,	000.				
g	Grassroots nontaxable amount (en	ter 25% of line 1f)			250,000.		
h	Subtract line 1g from line 1a. If zer				0.		
i	Subtract line 1f from line 1c. If zero				0.		
j	If there is an amount other than ze		line 1i, did the organiza	tion 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 Expe	nditures During 4-Yea	r Averaging Period			
	Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total	
	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.	
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.	
			1				

2,565.

250,000.

2,565.

5,343.

250,000.

5,343.

4,000.

250,000.

4,000.

Schedule C (Form 990) 2023

250,000.

11,908.

1,000,000.

1,500,000.

11,908.

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)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the lobbying activity.		Yes	No	Amo	ount
1 During the year, did the filing organization attempt to influence foreign, national	state, or				
local legislation, including any attempt to influence public opinion on a legislativ	e matter				
or referendum, through the use of:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines	1c through 1i)?				
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative le					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar	ar means?				
i Other activities?					
j Total. Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to not be described in section					
b If "Yes," enter the amount of any tax incurred under section 4912				-	
c If "Yes," enter the amount of any tax incurred by organization managers under s					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this Part III-A Complete if the organization is exempt under section	year?501(c)(4) section	501(c)(F	i) or so	ction	
501(c)(6).	301(c)(+), 3ectioi	1 30 1(0)(0	,, or se		
` '\ '				Yes	No
			1		
Were substantially all (90% or more) dues received nondeductible by members?					
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 Part III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2	? expenditures from the 501(c)(4), sectio r	prior year? 1 501(c)(5), or se		3, is
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less Did the organization agree to carry over lobbying and political campaign activity Complete if the organization is exempt under section 	? expenditures from the 501(c)(4), section , are answered "	e prior year? 1 501(c)(5 No" OR	3 5), or se (b) Part		3, is
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less Did the organization agree to carry over lobbying and political campaign activity Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not included) 	? expenditures from the 501(c)(4), section , are answered "	e prior year? 1 501(c)(5 No" OR	3 5), or se (b) Part		3, is
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less Did the organization agree to carry over lobbying and political campaign activity Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not incluent expenses for which the section 527(f) tax was paid). 	? expenditures from the 501(c)(4), section, are answered "	prior year? 1 501(c)(5 No" OR (2 3 5), or se (b) Part		3, is
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 Part III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not inclue expenses for which the section 527(f) tax was paid). a Current year	? expenditures from the 501(c)(4), section , are answered " de amounts of politic	prior year? 1 501(c)(5 No" OR (2 3), or sec (b) Part		3, is
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 Part III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not inclue) expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	? expenditures from the 501(c)(4), section, are answered " de amounts of politic	e prior year? 1 501(c)(5 No" OR (2 3 5), or sec (b) Part		3, is
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 Part III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not inclue expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	? expenditures from the 501(c)(4), section, are answered " de amounts of politic	e prior year? 1 501(c)(5 No" OR (2 3 5), or sec (b) Part 1 2a 2b 2c		3, is
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 Part III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not inclue) 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 sections	expenditures from the 501(c)(4), section, are answered " de amounts of politication 162(e) dues	e prior year? n 501(c)(5 No" OR (2 3 5), or sec (b) Part 1 2a 2b 2c		3, is
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less Did the organization agree to carry over lobbying and political campaign activity Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not inclue expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible set If notices were sent and the amount on line 2c exceeds the amount on line 3, w 	expenditures from the specific from the specific from the specific from the specific from the specific from 162(e) dues that portion of the exception from the except	e prior year? n 501(c)(5 No" OR (2 3 5), or sec (b) Part 1 2a 2b 2c		3, is
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less Did the organization agree to carry over lobbying and political campaign activity Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not incluent expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible set If notices were sent and the amount on line 2c exceeds the amount on line 3, we does the organization agree to carryover to the reasonable estimate of nondeductible 	expenditures from the specific from the specific from the specific from the specific from the exceptible lobbying and position and position and position of the exceptible lobbying and position specific from the exceptible lobbying and position specific from the exceptible lobbying and position specific from the exceptible lobbying and position specific from the exceptible lobbying and position specific from the expension of the exceptible lobbying and position specific from the expension of the exceptible lobbying and position specific from the expension of the	prior year's 1 501(c)(5 No" OR (2 3 3 5), or sec (b) Part 1 2a 2b 2c 3		3, is
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less Did the organization agree to carry over lobbying and political campaign activity Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not inclue expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible set If notices were sent and the amount on line 2c exceeds the amount on line 3, w 	expenditures from the specific from the specific from the specific from the specific from the exceptible lobbying and position and position and position of the exceptible lobbying and position specific from the exceptible lobbying and position specific from the exceptible lobbying and position specific from the exceptible lobbying and position specific from the exceptible lobbying and position specific from the expension of the exceptible lobbying and position specific from the expension of the exceptible lobbying and position specific from the expension of the	prior year's 1 501(c)(5 No" OR (2 3 3 5), or sec (b) Part 1 2a 2b 2c 3		3, is

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Employer identification number

Name of the organization

	JVS SOCAL			95-1691012
Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fun	ds or Acco	ounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.		
		(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		dvised funds	
	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			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpo	se conferring	}
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 99	90, Part IV, Iin	ie 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).		
	Preservation of land for public use (for example, recrea	ation or education) Preservation	n of a historic	cally important land area
	Protection of natural habitat	Preservation	n of a certifie	d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quality	ified conservation contribution in the fo	rm of a conse	ervation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	-			2b
С	Number of conservation easements on a certified historic str			2c
d	Number of conservation easements included on line 2c acqu			
	on a historic structure listed in the National Register	• • •		2d
3	Number of conservation easements modified, transferred, rel			tion during the tax
	year	, ,	·	•
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the per		of .	
	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conse	rvation easer	nents during the year
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 17	'0(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and exper	nse statemen	t and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stat	ements that o	describes the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or	Other Sim	ıilar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.		
1 a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue stateme	nt and baland	e sheet works
	of art, historical treasures, or other similar assets held for put	blic exhibition, education, or research i	n furtherance	of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these i	tems.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement ar	nd balance sh	neet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in f	urtherance of	i public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(m)			•
2	If the organization received or held works of art, historical tre	easures, or other similar assets for finar	ncial gain, pro	vide
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			

332051 09-28-23

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

Schedule D (Form 990) 2023

JVS SOCAL <u> Page</u> **2** Schedule D (Form 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 h Scholarly research 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? 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 If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c 1d d Additions during the year 1e Distributions during the year 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Nο 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. (c) Two years back (d) Three years back (a) Current year (b) Prior year (e) Four years back 6,439,334. 7,232,384. 6,726,953 6,299,274 5,760,271. **1a** Beginning of year balance 84,687. 121,897. 140,618, 30,356 88,200. Contributions 848,906. -633,444. 606,978. 635,090. 683,034. Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities 245,100. 244,293. 242,165. 237,767. 232,231. and programs Administrative expenses 7,165,037. 6,439,334. 7,232,384, 6,299,274. End of year balance 6,726,953, Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment Permanent endowment 27.1700 % 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 Yes No organization by: (i) Unrelated organizations? 3a(i) (ii) Related organizations? 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

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		146,612.	146,612.	0.
d Equipment		1,223,762.	1,183,559.	40,203.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equa	40,203.			

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 JVS SOCAL			95-1691012	Page 3
Part VII Investments - Other Securities				
Complete if the organization answered "Ye	es" on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of securit	(b) Book value	(c) Method of valuation: Cost or	end-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 "Ye				
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market	ı value
<u>(1)</u>				
(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				
Complete if the organization answered "Ye	es" on Form 990 Part IV line	11d See Form 990 Part X line 15		
	(a) Description	Tra. Goo Form Goo, Fare X, line To.	(b) Book	value
	(a) Description		(B) BOOK	10,398.
			6	
(2) ROU ASSET			0,	581,469.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, line 15,	col. (B))		6,	591,867.
Part X Other Liabilities				
Complete if the organization answered "Ye	es" on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line	25.	
1. (a) Description of liability			(b) Book	value
(1) Federal income taxes				
(2) ROU LIABILITY			6	792,811.
<u> </u>				,
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, line 25,	col. (B))		6,	792,811.
2. Liability for uncertain tax positions. In Part XIII, prov	ride the text of the footnote to	the organization's financial statemen	ts that reports the	
organization's liability for uncertain tax positions un	der FASB ASC 740. Check he	ere if the text of the footnote has beer	n provided in Part X	JII 🔲

Schedule D (Form 990) 2023

95-1691012 Page **4**

Par	t XI Reconciliation of Revenue per Audited Financial Sta		Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, Ii	ne 12a.			27 002 040
1				1	37,982,840.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا مم ا	-1,060,464.		
a	Net unrealized gains (losses) on investments		172,260.		
b	Donated services and use of facilities Recoveries of prior year grants		1,2,200.		
d	Other (Describe in Part XIII.)		27,369.		
				2e	-860,835.
3	Add lines 2a through 2d Subtract line 2e from line 1			3	38,843,675.
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	4a			
b	Other (Describe in Part XIII.)		437,376.		
С	Add lines 4a and 4b			4c	437,376.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			5	39,281,051.
Par	t XII Reconciliation of Expenses per Audited Financial St	atements With	Expenses per P	Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1	Total expenses and losses per audited financial statements			1	32,105,630.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	172,260.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	172,260.
3	Subtract line 2e from line 1			3	31,933,370.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b		425 256		
b	Other (Describe in Part XIII.)		437,376.		127 276
	Add lines 4a and 4b			4c	437,376.
5 Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 t XIII Supplemental Information	18.)		5	32,370,746.
lines:	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a V, LINE 4:			; Part X, li	ne 2; Part XI,
A PO	RTION OF THE ENDOWMENT FUNDS IS INTENDED TO SUPPORT THE	ORGANIZATION'S			
SCHO	LARSHIP PROGRAM. THE REMAINDER IS INTENDED TO SUPPORT TH	Е			
ORGA	NIZATION'S OVERALL ACTIVITIES.				
PART	XI, LINE 2D - OTHER ADJUSTMENTS:				
PROV	ISION FOR RECOVERIES ON UNCOLLECTIBLE PLEDGES				
RECE	IVABLE	27,369			
	XI, LINE 4B - OTHER ADJUSTMENTS:				
	·				
RENT	AL INCOME	437,376.	•		

Schedule D (Form 990) 2023 JVS SOCAL		95-1691012	Page 5
Schedule D (Form 990) 2023 JVS SOCAL Part XIII Supplemental Information (continued)			
PART XII, LINE 4B - OTHER ADJUSTMENTS:			
RENTAL INCOME	437,376.		

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

JVS SOCAL						95-169101	ntification number	
Part I Fundraising Activities. required to complete this par	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not	
Indicate whether the organization rais a	ed funds through any of the following e Solicitat f Solicitat g Special or oral agreement with any individual eart VII) or entity in connection with previduals or entities (fundraisers) pursua	tion of tion of fundra (includanted)	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	have c	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	to (d	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 organization or licensing.	on is registered or licensed to solicit c	ontrib	utions	or has been notified	it is e	exempt from re	gistration	

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

Schedule G (Form 990) 2023

Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through STRICTLY BUSINESS WLN CONFERENCE col. (c)) (event type) (event type) (total number) 1,365,622. 1,070,144. 2,435,766. 1 Gross receipts 2,149,709. 1,179,945. 969,764. 2 Less: Contributions **3** Gross income (line 1 minus line 2) 185,677. 100,380. 286,057. 4 Cash prizes 5 Noncash prizes Direct Expenses 97,342. 36,732. 134,074. 6 Rent/facility costs 28,800. 28,800. 7 Food and beverages 8 Entertainment 59,535. 63,648. 123,183. 9 Other direct expenses 286,057. **10** Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain: _

Schedule G (Form 990) 2023

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Sch	edule G (Form 990) 2023 JVS SOCAL 95	-1091012	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
	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	%
	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	of If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$		
С	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:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
-	organization's own exempt activities during the tax year \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and I	Part III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, ,	, ,

Schedule G	i (Form 990)	JVS SOCAL					95-1691012	Page 4
Part IV	(Form 990) Supplemental Info	rmation _{(conti}	nued)					
		,	,					
-								
				<u> </u>	<u> </u>	<u> </u>		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule I (Form 990) 2023

JVS SOCAL							95-1691012
Part I General Information on Grants an	d Assistance					•	
1 Does the organization maintain records to	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	n
criteria used to award the grants or assist	ance?						Yes No
2 Describe in Part IV the organization's prod	cedures for monit	oring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to D					anization answered "Y	es" on Form 990, Part I	V, line 21, for any
recipient that received more than \$	5,000. Part II can	be duplicated if additi	onal space is need	ed.		,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) an 3 Enter total number of other organizations	-		e line 1 table	<u> </u>	<u> </u>	1	

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<u>Schedule I (Form 990) 2023</u> JVS SOCAL 95-1691012 Page **2**

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIP AWARDS	211	811,300.	0.		
		<u> </u>			
Part IV Supplemental Information. Provide the information re	equired in Part I, line	e 2; Part III, column	(b); and any other ac	lditional information.	
PART I, LINE 2:					
THE JVS SCHOLARSHIP FUND PROVIDES FINANCIAL AID T	O JEWISH STUDE	NTS WHO ARE			
LEGAL AND PERMANENT RESIDENTS OF LOS ANGELES COUN	TY APPLICANTS	ARE			
REQUIRED TO BE ENROLLED IN A POST-SECONDARY, FULL	-TIME COURSE O	F STUDY AT			
AN ACCREDITED ACADEMIC OR TECHNICAL EDUCATIONAL I	NSTITUTION. AP	PLICANTS ARE			
EXPECTED TO ALSO ACCESS OTHER FINANCIAL AID RESOU	RCES. A MINIMU	M 2.7 GPA IS			

THE PRIMARY CRITERIA FOR ELIGIBILITY IS DEMONSTRATED FINANCIAL NEED. THE

Schedule I (Form 990) JVS SOCAL	95-1691012	Page 2
Part IV Supplemental Information		
SCHOLARSHIP COMMITTEE ALSO CONSIDERS OTHER FACTORS SUCH AS EMPLOYMENT		
EFFORTS, COMMUNITY ACTIVITIES, FAMILY STATUS AND SPECIAL FINANCIAL		
CIRCUMSTANCES.		
THE JVS SCHOLARSHIP ADMINISTRATOR AND COMMITTEE MEMBERS INTERVIEW ALL		
ELIGIBLE APPLICANTS AND REVIEW GATHERED INFORMATION TO MAKE A COLLECTIVE		
AND EQUITABLE DECISION ON AWARDS.		

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Schedule I (Form 990)

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

JVS SOCAL

Part I Questions Regarding Compensation

Employer identification number
95-1691012

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

(A) Name and Title		(B) Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) JEFFREY CARR	(i)	301,685.	0.	6,092.	29,699.	5,517.	342,993.	0.	
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) MARGARITE BUITRAGO	(i)	299,616.	0.	0.	30,000.	1,742.	331,358.	0.	
CURRENT CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) NEAL MENDELSOHN	(i)	256,361.	30,000.	0.	30,000.	0.	316,361.	0.	
CSO (THRU 12/23)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) ALAN LEVEY	(i)	217,657.	63,000.	3,231.	0.	28,039.	311,927.	0.	
FORMER CEO (THRU 07/23)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) TED FELDMAN	(i)	233,614.	38,000.	6,000.	0.	24,146.	301,760.	0.	
CAO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) RANDY LAPIN	(i)	169,628.	18,000.	0.	0.	7,550.	195,178.	0.	
SENIOR VP OF PHILANTHROPY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) KIM FEDRICK	(i)	148,292.	28,000.	0.	0.	7,392.	183,684.	0.	
VP - PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) SEAN THIBAULT	(i)	178,260.	0.	0.	1,800.	0.	180,060.	0.	
SENIOR VP OF MARKETING	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) DIONNE DAY	(i)	132,409.	27,000.	0.	650.	3,485.	163,544.	0.	
FORMER CFO (THRU 06/23)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) JOSEPHINE SANTIAGO	(i)	123,332.	20,000.	6,000.	0.	7,713.	157,045.	0.	
PROGRAM DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Page 2

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.

Employer identification number 95-1691012

	JVS SOCAL		95-1691012						
Pai	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	1	(d) Method of de noncash contribu	etermin	•	s
1	Art - Works of art								
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	11	318,761.					
10	Securities - Closely held stock	Х	2	17,438.	FMV				
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organization	zation during	the tax year for co	ontributions					
	for which the organization completed Form 8283, Part V, Donee Acknowledgement								
								Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throu	gh 28,	that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be used	for				
	exempt purposes for the entire holding period?	?					30a		Х
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?						Х		
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
	contributions?						32a		Х
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	for which column (a) is che	cked,				
	describe in Part II.								

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Schedule M (Form 990) 2023

Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE	M, PART I, COLUMN (B):
THE NUMB	ER OF CONTRIBUTIONS IS THE NUMBER OF CONTRIBUTORS RATHER THAN
THE NUMB	ER OF ITEMS CONTRIBUTED.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Form 990 or 990-EZ or to provide any additional from 990 or Form 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or 990-EZ or to provide any additional from 990 or Form 990 or F

Go to www.irs.gov/Form990 for the latest information. **Employer identification number** Name of the organization 95-1691012 JVS SOCAL PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: TRAINING. MENTORING AND EDUCATION, COMBINED WITH EXPERT CAREER GUIDANCE, EMPLOYER PARTNERSHIPS AND COMPREHENSIVE RESOURCES TRANSFORMING LIVES AND EMPOWERING INDIVIDUALS TO ACHIEVE DIGNITY AND INDEPENDENCE. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: TRANSFORMING LIVES AND EMPOWERING INDIVIDUALS TO ACHIEVE DIGNITY AND INDEPENDENCE. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: IMMIGRANT AND REFUGEE IMMIGRANT AND REFUGEE PROGRAMS SERVE REFUGEES ON WELFARE BY OFFERING ENGLISH AS A SECOND LANGUAGE WORKSHOPS, JOB SEARCH SKILLS, PLACEMENT AND WORKSHOP TRAINING IN LOS ANGELES. GLENDALE AND SAN FERNANDO VALLEY. THE GOAL IS TO FOSTER ACCULTURATION AND MOVE CLIENTS QUICKLY INTO EDUCATION, TRAINING AND EMPLOYMENT. EXPENSES \$ 1,411,940. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. SCHOLARSHIP THE JVS SCHOLARSHIP FUND GRANTS SCHOLARSHIPS TO LOW-INCOME JEWISH STUDENTS WHO REQUIRE FINANCIAL ASSISTANCE TO PURSUE POST-SECONDARY EDUCATION. SCHOLARSHIP AWARDS ARE FUNDED BY CONTRIBUTIONS RECEIVED BY

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

AS WELL AS INCOME EARNED ON ENDOWMENTS HELD BY BOTH JVS AND THE

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page **2**

Name of the organization JVS SOCAL	Employer identification number 95-1691012
JEWISH COMMUNITY FOUNDATION (THE "JCF"). THESE FINANCIAL STATEMENTS	33 1031012
EXCLUDE FUNDS HELD BY THE JVS FOR WHICH JVS HAS NO RIGHTS TO THE	
PRINCIPAL.	
EXPENSES \$ 1,053,090. INCLUDING GRANTS OF \$ 811,300. REVENUE \$ 0.	
CAREER SERVICES	
CAREER SERVICES OFFERS ASSISTANCE TO CLIENTS IN DEVELOPING THEIR JOB	
SEARCH SKILLS, CAREER COUNSELING, COACHING, OUTPLACEMENT SERVICES TO	
INDIVIDUALS AND CORPORATIONS AND CAREER-RELATED INFORMATIONAL AND	
EDUCATIONAL SERVICES TO SPECIFIC SEGMENTS OF THE LOS ANGELES COMMUNITY.	
EXPENSES \$ 472,994. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
DISABILITY AND ASSESSMENTS	
THE DISABILITY AND ASSESSMENT PROGRAMS SERVE CLIENTS WITH BARRIERS TO	
EMPLOYMENT, INCLUDING PHYSICAL, EMOTIONAL AND DEVELOPMENTAL	
DISABILITIES. JVS OFFERS STATE OF THE ART ASSISTIVE TECHNOLOGY FOR JOB	
SEEKERS WITH VISION OR HEARING IMPAIRMENT WITH THE MOST COMPREHENSIVE	
RESOURCES IN THE SOUTHERN CALIFORNIA AREA. THESE PROGRAMS, WHICH	
OPERATE OUT OF SEVERAL SITES, ASSIST WITH ASSESSMENT AND IDENTIFICATION	
OF EMPLOYMENT AND EDUCATION OPPORTUNITIES. THE JVS ASSESSMENT CENTER	
PROVIDES VOCATIONAL EVALUATION AND ASSESSMENT SERVICES FOR THE	
CALIFORNIA DEPARTMENT OF REHABILITATION, FOR LOS ANGELES COUNTY	
CONSUMERS IN THE GAIN (GREATER AVENUES FOR INDEPENDENCE) AND GROW	
(GENERAL RELIEF OPPORTUNITIES FOR WORK) PROGRAMS, AND FOR THE	
DEPARTMENT OF VETERANS AFFAIRS.	
EXPENSES \$ 99,504. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	

<u>Schedule O (Form 990) 2023</u> Page **2**

Employer identification number Name of the organization JVS SOCAL 95-1691012 FORM 990, PART VI, SECTION A, LINE 2: JEFFREY PAUL AND MATTHEW PAUL HAVE A FAMILY RELATIONSHIP. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS REVIEWED BY CFO AND AUDIT COMMITTEE CHAIR. ONCE BOTH PARTIES HAVE REVIEWED THE FORM 990, THE BOARD OF DIRECTORS ARE GIVEN A COPY OF THE FORM 990. FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS AND OFFICERS REVIEW THE CONFLICT OF INTEREST POLICY ANNUALLY, AND COMPLETE AND SIGN A CONFLICT OF INTEREST FORM, THE CHAIR OF THE BOARD REVIEWS EACH SIGNED FORM TO DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS. IF THE CHAIR OF THE BOARD DETERMINES THAT A CONFLICT OF INTEREST MAY EXIST, HE/SHE REVIEWS THE SIGNED FORM WITH THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION OBTAINS COPIES OF 990S OF COMPARABLE ORGANIZATIONS, WHICH INCLUDE: URBAN DEVELOPMENT, WORKSOURCE, AND JEWISH ORGANIZATIONS, THE ORGANIZATION THEN ORGANIZES THE INFORMATION RELATED TO THE COMPENSATION OF OFFICERS, DIRECTORS, AND KEY EMPLOYEES. THIS INFORMATION IS THEN GIVEN TO A SUB-COMMITTEE OF THE ORGANIZATION'S EXECUTIVE COMMITTEE, COMPRISED OF THE CHAIR, IMMEDIATE PAST CHAIR, VICE CHAIR, TREASURER, AND AN AT-LARGE BOARD MEMBER, TO AID IN THEIR REVIEW AND ANALYSIS OF THE ORGANIZATION'S OWN COMPENSATION FOR THEIR OFFICERS, DIRECTORS, AND KEY EMPLOYEES.

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

Name of the organization JVS SOCAL	Employer identification number 95-1691012
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST	
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO CONTRACTORS, GRANTORS,	
DONORS, ETC. UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PROVISION FOR RECOVERIES ON UNCOLLECTIBLE PLEDGES	
RECEIVABLE 27,369.	