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Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1546-0047

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

Open to Public

Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service For the 2014 calendar year, or tax year beginning and ending C Name of organization Anti-Defamation League Foundation D Employer Identification number Check if applicable: Doing business as Address change Number and street (or PO, box if mail is not delivered to street address) Room/sulte 13-2887439 Name change 605-Third-Avenue---E Telephone number Initial return City or town State ZIP code (212) 885-7700 New York, NY 10158-3560 Final return/terminated Foreign country name Foreign province/state/county Foreign postal code Amended return G Gross receipts \$ 32,597,252 F Name and address of principal officer. Application pending Yes X No H(a) is this a group return for subordinalos? Michael A Keliman Exec. Dir. ADLF, 605 Third Ave, N Y, NY 10158 H(b) Are all subordinates included? Yes X 501(c)(3)) < (insert no.) 527 If "No." attach a list (see instructions) Tex-exempt status Website: ► www.adl.org H(c) Group exemption number > N/A X Corporation K Form of organization Trust Association Other > L Year of formation: 1977 M State of legal domicile. Part I Summary Briefly describe the organization's mission or most significant activities. See note in Schedule O Activities & Governance Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of Independent voting members of the governing body (Part VI, line 1b) . 4 37 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 30 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12. 7a 256,889 Net unrelated business taxable income from Form 990-T, line 34 101,321 (apie-incerna-ican **Current Year** Contributions and grants (Part VIII, line 1h). 13,542,448 6,397,168 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4 land 7d) 275,187 283,443 10 3,944,090 6,146,775 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 42,979 43,886 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 17,804,704 12,871,272 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 14,287,036 10,661,568 Benefits paid to or for members (Part IX, column (A), line 4). 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). . . 15 4,563,003 Professional fundraising fees (Part IX, column (A), line 11e). 16a Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). 3,211,733 2,825,674 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . 18 21,888,024 18,050,245 Revenue less expenses. Subtract line 18 from line 12 -4.083.320 -5,178,973 19 Beginning of Current Year End of Year Total assets (Part X, line 16) . . 141,137,908 131,541,010 20 Total fiabilities (Part X, line 26) . . 19,196,092 19,742,126 21 Net assets or fund balances. Subtract line 21 from line 20 121,941,816 111,798,884 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge weday Sign Stonature of officer Here Michael A. Kellman **Executive Director** Type or print name and title Preparer's signature Print/Type preparer's name Date Check Paid 10/20/2015 P00504182 Daniel Romano self-employed Preparer Firm's name - GRENT THORNTON LLP Firm's EIN > 36.6055558 **Use Only** Firm's address > 757 Thied Avenue, New York, MY Phone no. 212-542-9609 10017

X Yes No Form 990 (2014)

| rm 990 | (2014) | Anti-Defamation League Foundation | 13-2887439 | Page 2 |
|--------|-----------|---|--------------------|--------------|
| Part | Ш | Statement of Program Service Accomplishments | | |
| | | Check if Schedule O contains a response or note to any line in this Part III | · · · · · · | X |
| | - | escribe the organization's mission: | | |
| ٤ | See not | e in Schedule O | | |
| - | | | | |
| - | | | | |
| . [| Did the | organization undertake any significant program services during the year which were not listed on | | |
| | | r Form 990 or 990-EZ? | Yes | X No |
| ŀ | f "Yes,' | describe these new services on Schedule O. | | |
| | Did the | organization cease conducting, or make significant changes in how it conducts, any program | | |
| | service | | Yes | X No |
| | | describe these changes on Schedule O. | | |
| | | e the organization's program service accomplishments for each of its three largest program services | | |
| | | es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo | ocations to others | , |
| τ | ne tota | expenses, and revenue, if any, for each program service reported | | |
| la (| Code. |) (Expenses \$ 10,661,568 including grants of \$ 10,661,568) (Revenue | e \$ | ·) |
| | | the state of the ADI Fernandation and the state of the ADI Fernandation is | | |
| | | grants totaling \$10,507,568 were made to ADL. In addition, through the ADL Foundation's | | |
| F | orogran | n for making grants from donor advised funds grants of \$17,200 were distributed to ADL and | | |
| ç | grants o | of \$136,800 were made to unrelated charities. | | . |
| _ | | | | |
| _ | | | | |
| | | | | |
| _ | | | | |
| - | | | | |
| - | | | | |
| - | | | | |
| 4b (| Code. |) (Expenses \$ 344,984 including grants of \$) (Revenue | e\$ 283 | 3,443) |
| E | Building | - Supports ADL through ownership and administration of a building in Los Angeles, CA. | | |
| _ | This bu | lding houses ADL's Pacific Southwest Regional Office in Los Angeles. | | |
| - | | | · | |
| - | | | | |
| - | | | | |
| - | | | | -- |
| - | | | | |
| - | | | | |
| - | | | | |
| - | · | | | |
| | | | | |
| | (Code. |) (Expenses \$ 595,269 including grants of \$) (Revenue | e\$ |) |
| | | on - Supplements ADL's furtherance of its mission, where ADL designs and delivers | | |
| | | up, Holocaust, anti-bias, and other educational materials for use in P-12 classrooms, on | | - |
| | | campuses, and with community groups, corporations, civic associations, religious ations, youth movements, and other nontraditional learning contexts. | | - |
| 9 | organiz | ations, youth movements, and other normaditional learning contexts. | | |
| - | | | | |
| - | | | | |
| - | | | | |
| - | | | | |
| - | | | | |
| - | - | | | |
| | | | | |
| | | | | |
| | Other p | rogram services. (Describe in Schedule O) ses \$ 675,859 including grants of \$ 0) (Revenue \$ | 0) | |

| Part | TIV. Checklist of Required Schedules | | | | |
|-------|---|----------|-------------|--|-----------------|
| | | | | Yes | No |
| 1 • | | | | | l |
| | complete Schedule A | | 1 | X | <u> </u> |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | | 2 | Χ | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | | |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | | 4 | | × |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | | | |
| | assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, | | | | l |
| | Part III | | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | | |
| J | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | | |
| | "Yes," complete Schedule D, Part I | | 6 | х | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | • | H | | |
| • | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | | 7 | | х |
| _ | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | • • | ┝┷ | | ├^ |
| 8 | · · · · · · · · · · · · · · · · · · · | | 8 | | x |
| _ | complete Schedule D, Part III | • • | ┝╩┈ | | ^ |
| 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 det | οι | ا | | |
| | negotiation services? If "Yes," complete Schedule D, Part IV | | 9 | | X |
| 10 | | | | | |
| | endowments, permanent endowments, or 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, | ļ | 48.4 | <u>د</u> | 2 |
| | VII, VIII, IX, or X as applicable | | | | |
| а | a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete | | | | |
| | Schedule D, Part VI | | 11a | X | - |
| b | 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 | X | — |
| С | c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more | | | | ١ |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | | 11c | | <u> X</u> |
| d | d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets | ! | | | |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | | 11d | | X |
| е | e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Par | rt X . | 11e | X | |
| f | 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 | X | ـــــ |
| 12a | a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," comp | plete | | | l |
| | Schedule D, Parts XI and XII | | 12a | | X |
| b | b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Y | ∕es," | | | |
| | and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional. | | 12b | X | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | | 13 | | <u> X</u> |
| 14a | a Did the organization maintain an office, employees, or agents outside of the United States? | | 14a | | X |
| b | b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | | | | 1 |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | | 1 | ŀ | |
| | 0.650 0.000 0 | | 14b | × | İ |
| 15 | | • | | | П |
| • | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | | 15 | | X |
| 16 | | | | | |
| | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | | 16 | | X |
| 17 | The state of the s | | | t — | |
| • • • | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions). | | 17 | | X |
| 40 | 04F 000 L L L C | | | | `` |
| 18 | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. | | 18 | 1 | X |
| 40 | the data one of the second form position and the second flow of the se | | | 1 | 广 |
| 19 | If "Yes," complete Schedule G, Part III. | | 19 | 1 | X |
| 00- | · · · · · · · · · · · · · · · · · · · | | 20a | I^{-} | \ x |
| ∠va | b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | 20b | | † ^ |
| 0 | D. II. 165. IO III 6 208. UIU II 6 OLUAIII 2410 II allaori a copy of its addited illianolal statements to tris feturi: . 👚 🔄 | <u> </u> | 1-02 | | |

| rar | Checklist of Required Scriedules (Continued) | | | | |
|--------|--|----------|---------------|----------|--|
| | | Г | | Yes | No |
| 21 د | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | - 1 | , l | v | |
| 22 | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | H | 21 | <u> </u> | |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. | | 22 | | х |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | · - | | | - |
| 23 | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | | |
| | employees? If "Yes," complete Schedule J | | 23 | х | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | 1 | | ~ | |
| | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines | | l | | |
| | 24b through 24d and complete Schedule K. If "No," go to line 25a | . [: | 24a | | х |
| ь | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | | |
| | to defease any tax-exempt bonds? | [: | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | [: | 24d | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | Γ | | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | Ŀ | 25a | | _X_ |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a | | | | |
| | prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or | ŀ | | | |
| | 990-EZ? If "Yes," complete Schedule L, Part I | . [2 | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any | | ı | | |
| | current or former officers, directors, trustees, key employees, highest compensated employees, or | | | | |
| | disqualified persons? If "Yes," complete Schedule L, Part II | · - | 26 | | <u> </u> |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | - 1 | | |
| | substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | ا ء | | |
| 00 | entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | F | 27 | | <u> </u> |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, | | \$ | | |
| _ | Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 1 | 28a | | X |
| a b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | · | 20a | | ^- |
| D | Schedule L, Part IV | | 28ь | | х |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | Ė | | | - ^- |
| · | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | . [| 28c | | х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | | 29 | Х | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | | |
| | conservation contributions? If "Yes," complete Schedule M | , L | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | | |
| | Part I | . [| 31 | | _X_ |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? | | l | | |
| | If "Yes," complete Schedule N, Part II | . | 32 | | <u> </u> |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | | l |
| | sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | ⊦ | 33 | | <u> </u> |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, | l | | ., | |
| | III, or IV, and Part V, line 1 | г | 34 | Χ | <u> </u> |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | ŀ | 35a | | _X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled | | 256 | | |
| 20 | entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | . - | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | 36 | | х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | 50 | | ├^ |
| 31 | 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 in Schedule O for Part VI, lines 11b and | ŀ | | | l |
| - | 19? Note. All Form 990 filers are required to complete Schedule O | . | 38 | х | |
| | | | | | |

Anti-Defamation League Foundation

Statements Regarding Other IRS Filings and Tax Compliance

| | Check if Schedule O contains a response or note to any line in this Part V | | | X |
|-------------|--|--------------|--------------|------------------|
| + | | | 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 in line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | | | |
| | gaming (gambling) winnings to prize winners? | 1c | X | |
| 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 2a 30 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | X | _ |
| _ | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | X | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | X | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | 130 | <u> </u> | \vdash |
| - 44 | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | ļ |
| | account)? | 4a | | x |
| L | If "Yes," enter the name of the foreign country: | a_ | | ┝ |
| b | See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts | | | |
| | | | | |
| - - | (FBAR) | | | - _v - |
| 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 | | ┝ |
| C | · | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | 6- | | l 🗸 |
| L | 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 | | l | 1 |
| _ | gifts were not tax deductible? | 6b | ┢ | ₩ |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | | |
| | and services provided to the payor? | 7a | ┝ | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | ┼ |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | ' | 1 | |
| | required to file Form 8282? | 7c | ļ | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | - <u>-</u> - | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | - | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | ₩ |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | ╁ |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | · | |
| _ | sponsoring organization have excess business holdings at any time during the year? | 8 | | <u> </u> |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | - | X |
| þ | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | ₩ | X |
| 0 | Section 501(c)(7) organizations. Enter | | | l. |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 4 | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | ┨ | | 1 |
| 1 | Section 501(c)(12) organizations. Enter | | 1 | |
| а | Gross income from members or shareholders | 4 | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | 1 | | |
| _ | against amounts due or received from them) | 1 | | |
| 2a | 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 | - | | |
| 3 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 1 | ├ | + |
| 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. | | | 1 |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | | | 1 |
| | the organization is licensed to issue qualified health plans | - | 1 | |
| С | Enter the amount of reserves on hand | + | 1 | +~ |
| 4a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | _ | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | 1 | 1 |

Part VI

| Sect | ion A. Governing Body and Management | | | | |
|------|--|-----------------------------|--------|--------------------|----------|
| _ | | 1 | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year . | 1a 39 | | | |
| | 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 in Schedule O. | 41 07 | | l | |
| Ъ | Enter the number of voting members included in line 1a, above, who are independent | 1b 37 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relations | hip with | | : | |
| _ | any other officer, director, trustee, or key employee? | | 2 | _X_ | |
| 3 | Did the organization delegate control over management duties customarily performed by or under | | | | |
| | supervision of officers, directors, or trustees, or key employees to a management company or other | | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was | | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's a | assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | | 6 | _ <u>X</u> _ | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or | appoint | _ | | |
| _ | one or more members of the governing body? | | 7a | _X_ | |
| Ь | Are any governance decisions of the organization reserved to (or subject to approval by) members | , | | | |
| _ | stockholders, or persons other than the governing body? | | 7Ь | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken | n during | | | |
| | the year by the following: | | | | |
| a | The governing body? | | 8a | X | |
| ь | Each committee with authority to act on behalf of the governing body? | | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re | eached | | | |
| 24 | at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. | | 9 | | _X_ |
| Seci | ion B. Policies (This Section B requests information about policies not required by the | <u>ınternai Revenue C</u> | oae. | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | i | 100 | Yes | No X |
| Ь | If "Yes," did the organization have written policies and procedures governing the activities of such | | 10a | | <u> </u> |
| b | affiliates, and branches to ensure their operations are consistent with the organization's exempt pu | | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of the | | 11a | х | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | de ming the lotte. | IIa | -^- | |
| 12a | Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> | | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could g | | 12b | $\hat{\mathbf{x}}$ | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If | | 12.0 | | |
| _ | describe in Schedule O how this was done | | 12c | х | |
| 13 | Did the organization have a written whistleblower policy? | | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review and appro | val by | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation | - | | | ! |
| а | The organization's CEO, Executive Director, or top management official | | 15a | X | |
| ь | Other officers or key employees of the organization | | 15b | Х | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange | ement | | | |
| | with a taxable entity during the year? | | 16a | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate | ate its | | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to safe | guard | | | 1 |
| | the organization's exempt status with respect to such arrangements? | | 16b | | |
| Sect | ion C. Disclosure | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ► See Attached Sta | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99 | 0-T (Section 501(c)(3) | s only | r) | |
| | available for public inspection. Indicate how you made these available. Check all that apply. | | | | |
| | | plain in Schedule O) | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, | conflict of interest police | cy, an | d | |
| | financial 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 to | | • | | |
| | Michael A Kellman Executive Dir. c/o ADL Foundation | 212-885-7700 | · | | |
| | 605 Third Avenue, New York, NY 10158-3560 | | | | |

| Form 990 (2014) | Anti-Defamation League Foundation 13-28 | 387439 | 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 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors; institutional trustees; officers; key employees, highest compensated employees; and former such persons.

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

| (A) Name and Title | (B) Average hours per | box, | unles er and | Pos neck ss pe | rson | than o | an ee) | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of |
|---------------------------|--|--------------------------------|-----------------------|----------------------|--------------|------------------------------|-----------|--|--|--|
| | week (list any hours for related organizations below dotted 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 |
| (1) Milton S Schneider | 7 00 | | | | | | | | | ,,,, |
| President | 1 00 | X | | Х | l | | | 0 | 0 | 0 |
| (2) David H Strassler | 1 50 | | | | | | | | | |
| Executive Vice President | 2 00 | X | | Х | | | | 0 | 0 | 0 |
| (3) Martin L Budd | 1 50 | | | | | | | | | |
| Vice President | 6 00 | | | Х | | l | | 0 | 0 | 0 |
| (4) George E Moss | 3 50 |] | | | | | | 1 | | |
| Treasurer | 1 00 | Х | | X | | | | 0 | 0 | 0 |
| (5) Thomas C Homburger | 3.50 | | | | | | | | | |
| Secretary | 2.00 | Х | | X | | | <u> </u> | 0 | 0 | 0 |
| (6) Barbara B Balser | 0 50 | | | | | | | | | |
| Trustee | 2 00 | Х | L | | L | | L. | 0 | 0 | 0 |
| (7) Ronald Davis Balser | 0 50 | | | | | | | | | |
| Trustee | 1.00 | X | L | <u> </u> | | | | 0 | 0 | 0 |
| (8) Howard P Berkowitz | 1.50 |] | ł | | | | | | | |
| Trustee | 2.00 | | | L | <u> </u> | | <u> </u> | 0 | 0 | 0 |
| (9) Kenneth J Bialkin | 0.50 | | | | 1 | | | ļ | | |
| Trustee | 2.00 | - | | L | <u> </u> | | | 0 | 0 | 0 |
| (10) Barry Curtiss-Lusher | 4.50 | | | | ŀ | | 1 | | | |
| Trustee | 20.00 | | L | | ↓_ | <u> </u> | | 0 | 0 | 0 |
| (11) Esta Gordon Epstein | 0.50 | | | | | | | | | _ |
| Trustee | 6.00 | X | <u> </u> | | | | L | 0 | 0 | 0 |
| (12) Howard W Goldstein | 2.50 | | | ļ | | 1 | | | | |
| Trustee | 6.00 | _ | <u> </u> | | | <u> </u> | <u> </u> | 0 | 0 | 0 |
| (13) James Grosfeld | 0 50 | | | | | | | | | |
| Trustee | 2.00 | | L | L | <u> </u> | <u> </u> | <u> </u> | 0 | 0 | 0 |
| (14) Eric D Horodas | 2.50 | -1 | | | | 1 | | | | |
| Trustee | 9 00 | X | L | L | <u> </u> | <u> </u> | <u>L</u> | <u></u> | 0 | 0 |

| Part VII | Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) | | | | | | | | | | | | | |
|----------------|---|--|--------------------------------|-----------------------|----------------------|--|---------------------------------|-----------|--|--|-------------------------------|---------------------------|--------------|--|
| • | (A) Name and title | (B) Average hours per | box. | unles | Pos neck ss pe | rson | e than o is both or/trust | an ee) | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of | | | |
| | | week (list any hours for related organizations below dotted 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) | compe | n the izatio elated | n d | |
| (15) Murray I | Koppelman (until 11/2014) | 0.50 1.00 | 1 | | | | | | 0 | 0 | | | _ | |
| (16) Charles | F Kriser | 1.50 | | | ऻ | Г | | | - | | | | _ | |
| Trustee | | 7.00 | X | | | | | | 0 | 0 | | | (| |
| (17) Ellis Lar | ndau | 0.50 | | | | | | | | | | | | |
| Trustee | | 5.00 | X | | L | | | | 0 | 0 | | | | |
| (18) Ronald | S Lauder (until 11/2014) | 0.50 | | | | | | | | | | | | |
| Trustee | | 0.00 | | ļ | L | ┞ | | | 0 | 0 | | | | |
| (19) Burton S | S Levinson | 0.50 | | | | l | | | | | | | | |
| Trustee | | 2.00 2.50 | | ┢ | ⊢ | ╁ | - | - | 0 | 0 | - | | | |
| Trustee | Lewy | 2 00 | | | | | | | 0 | 0 | ĺ | | | |
| (21) Lawrence | e J Miller | 1.50 | - | | | <u> </u> | | - | | | | | <u> </u> | |
| Trustee | æ 3 ivillier | 6.00 | | | | | | | 0 | 0 | 1 | | (| |
| (22) David J | Millstone | 0.50 | _ | | | | | | | | | | | |
| Trustee | | 6.00 | X | | | | | | 0 | 0 | | | C | |
| (23) Robert I | l Naftaly | 5.50 | | | | | | | | | 1 | | | |
| Trustee | | 7.00 | | | <u> </u> | ļ | <u> </u> | | 0 | 0 | <u> </u> | | | |
| (24) Marvin (| O Nathan | 0 50 | | | | | | | | | | | | |
| Trustee | | 6 00 | - | ├ | ⊢ | - | - | - | 0 | 0 | <u> </u> | | | |
| Trustee | Parker | 3 50 0 00 | | | l | | | | o | 0 | | | , | |
| 1b Sub-tot | al | 0 00 | | | L | ــــــــــــــــــــــــــــــــــــــ | L | <u> </u> | 0 | | | | - | |
| | om continuation sheets to Part VII, S | ection A | • | • | | | • | • | 1,100,396 | | | 345, | ` 553 | |
| | dd lines 1b and 1c). | | | | | | | • | 1,100,396 | | | 345, | | |
| | mber of individuals (including but not lir | mited to those lis | ted a | bov | e) v | vho | recei | ved | | | | | | |
| reportab | ole compensation from the organization | • | | | 9 | | | | | | | | | |
| | | | | | | | | | | | | es | No | |
| | organization list any former officer, dire | | | | | e, c | r higi | nesi | compensated | | | - 2m | ~ | |
| | ee on line 1a? If "Yes," complete Sched | | | | | | | • | | | 3 | _ | X | |
| | individual listed on line 1a, is the sum | | | | | | | | | | 3 4 m () | | - , ` | |
| • | nization and related organizations grea | ater than \$150,00 | JU? 11 | | - | con | npiete | Sc | nedule J for suc | n | 5 4.2 | · - | - ~ | |
| individu | | | | ٠ | | | | ٠ | | | 4) | <u>×</u> + | _ | |
| | person listed on line 1a receive or accives rendered to the organization? If "You | | | | | | | | | vidual | 5 | | X | |
| | dependent Contractors | | | | | | | | | | | | | |
| | te this table for your five highest compe- sation from the organization. Report co | | | | | | | | | | tax | | | |
| | (A) | | | | | | | | (B) | | (C) | | | |
| | Name and business add | ress | | | | | | L | Description of ser | vices | Compensa | tion | | |
| New York Gol | | ve Garden City, | | | 0 | | | Se | curity | | | 154,138 | | |
| Furman Roth | Advertising 801 Second Av | e New York, NY | 1001 | 7 | | | | Ad | vertising | | | 110, | 950 | |
| | | | | | | | | <u> </u> | | | | | - | |
| | | | | | | | | | | | | | | |

Total number of independent contractors (including but not limited to those listed above) who received

2

more than \$100,000 of compensation from the organization

| Part | VIII | Statement of Revenue | 0.00.00 | to to any line in | this Bort VIII | | | 439 Page |
|---|------|--|-----------|-------------------|-------------------|--|---|---|
| ,• | | Check if Schedule O contains a response | e 01 1101 | te to any line in | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under section 512-514 |
| s s | 1a | Federated campaigns | 1a | 0 | | | | |
| Grants | b | Membership dues . | 1b | 0 | | | | |
| 5 8 | C | Fundraising events | 1c | 0 | | | | |
| | d | Related organizations | 1d | 0 | | | | |
| 8, E | е | Government grants (contributions) | 1e | 0 | | | | |
| 를 합 | f | All other contributions, gifts, grants, and | | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | similar amounts not included above . | 1f | 6,397,168 | | | | 1 |
| 들 | g | Noncash contributions included in lines 1a-1f: | \$ | 0 | | | | |

| | | | | | | function revenue | revenue | tax under sections |
|---|--------|--|-------------------|---------------|------------|------------------|---------------------------------------|--------------------|
| 8 8 | 1a | Federated campaigns . | . 1a | 0 | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | b | Membership dues . | 1b | 0 | | | | |
| | C | Fundraising events | 1c | 0 | | | | |
| Sifts ar / | d | Related organizations | <u>1d</u> | 0 | | | | |
| is, (| е | Government grants (contribution | s) <u>1e</u> | 0 | | | | ļ |
| er S | f | All other contributions, gifts, gran | its, and | ł | | | | |
| ફ | | similar amounts not included abo | ve . <u>1f</u> | 6,397,168 | | | | } |
| Contributions, Gifts, and Other Similar A | g | Noncash contributions included in I | ines 1a-1f: \$ | 0 | | | | |
| —— | h | Total. Add lines 1a-1f | | <u> </u> | 6,397,168 | | | |
| 9 | | | | Business Code | | | | |
| Ven | 2a | Rental income from affiliated exe | mpt org | 900099 | 283,443 | 283,443 | | |
| Program Service Revenue | b | | | | 0 | | | |
| <u> </u> | С | | | | 0 | | | |
| Ser | d | | | | 0 | | | |
| E | е | | | | 0 | | | |
| .go | f | All other program service revenu | е | | 0 | | · · · · · · · · · · · · · · · · · · · | |
| <u> </u> | g | Total. Add lines 2a-2f . | | | 283,443 | | | |
| 1 | 3 | Investment income (including div | ıdends, ınterest, | and | | | | |
| | | other similar amounts) | | | 2,362,126 | | 256,889 | 2,105,237 |
| | 4 | Income from investment of tax-e | xempt bond prod | eeds - | 0 | | | |
| | 5 | Royalties | (3.5-3 | • | 0 | | | |
| | | _ | (i) Real | (II) Personal | | | | |
| | 6a | Gross rents . | 181,944 | | | | | , , |
| | þ | Less rental expenses | 138,058 | | | | | |
| | C | Rental income or (loss) | 43,886 | | | | | |
| | d | Net rental income or (loss) | (ı) Securities | (II) Other | 43,886 | | | 43,886 |
| | 7a | Gross amount from sales of | | | | | | |
| | | assets other than inventory | 23,372,571 | 0 | | | | |
| | b | Less: cost or other basis and sales expenses | 19,587,922 | o | | | | |
| | | • | 3,784,649 | | | | | |
| | C d | Gain or (loss) Net gain or (loss) | 3,764,649 | . • | 3,784,649 | | | 3,784,649 |
| | u | Net gain or (loss) | • | | 3,704,049 | | | 3,7 64,649 |
| <u>•</u> | 8a | Gross income from fundraising | | | 7 | _ | | |
| Revenue | - | events (not including \$ | 0 | | | | | |
| ě | | of contributions reported on line | | | ļ | | | |
| | | See Part IV, line 18 | a | o | | | | • |
| Othe | b | Less direct expenses | . b | 0 | | | | |
| δ | C | Net income or (loss) from fundra | ising events | . ▶ | 0 | | | |
| | 9a | Gross income from gaming activ | | | | | | |
| | | See Part IV, line 19 | а | o | | | | |
| | b | Less direct expenses | b | 0 | | | | |
| | С | Net income or (loss) from gaming | activities . | | 0 | | | |
| | | Gross sales of inventory, less | | | | | | |
| | | returns and allowances | a | 0 | | | | |
| | b | Less cost of goods sold . | . b | 0 | | i | | |
| | C | Net income or (loss) from sales of | of inventory | > | 0 | | | |
| | | Miscellaneous Revenue | | Business Code | | | | |
| | 11a | | | | 0 | | | |
| | b | | | | 0 | | | |
| | С | | | | 0 | | | |
| | d | All other revenue | | | 0 | | | |
| | е | Total. Add lines 11a-11d | | ▶ | 0 | | | |
| | 42 | Total revenue Securetructions | | _ | 12 871 272 | 283 443 | 256 880 | 5 023 772 |

Form **990** (2014)

Statement of Functional Expenses

| Section | on 501(c)(3) and 501(c)(4) organizations must complete all | columns All other or | ganizations must c | omplete column (A). | |
|---------|--|------------------------|------------------------------------|-------------------------------------|---------------------------------------|
| • | Check if Schedule O contains a response or note | to any line in this Pa | irt IX | | 🔲 |
| | not include amounts reported on lines 6b, 7b, 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 | | | | |
| _ | domestic governments. See Part IV, line 21. | 10,661,568 | 10,661,568 | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 0 | | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals See Part IV, lines 15 and 16 | 0 | | | |
| 4 | Benefits paid to or for members | 0 | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 715,121 | 117,521 | 299,508 | 298,092 |
| 6 | Compensation not included above, to disqualified | | | i i | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 0 | | | |
| 7 | Other salaries and wages | 2,735,523 | 482,228 | 794,428 | 1,458,867 |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions). | 83,117 | 14,130 | 26,597 | 42,390 |
| 9 | Other employee benefits | 749,740 | 127,457 | 239,917 | 382,366 |
| 10 | Payroll taxes | 279,502 | 48,580 | 88,608 | 142,314 |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | 0 | | į | |
| b | Legal | 0 | | | |
| С | Accounting | 109,805 | | 107,745 | 2,060 |
| d | Lobbying | 0 | | | |
| е | Professional fundraising services See Part IV, line 17 | 0 | | | |
| f | Investment management fees | 340,424 | | 340,424 | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column | | | | |
| | (A) amount, list line 11g expenses on Schedule O) | o | | | |
| 12 | Advertising and promotion | 233,075 | | | 233,075 |
| 13 | Office expenses | 224,160 | | 134,496 | 89,664 |
| 14 | Information technology | 0 | | | |
| 15 | Royalties | 0 | | | · . |
| 16 | Occupancy | 859,871 | 344,984 | 400,515 | 114,372 |
| 17 | Travel | 174,820 | | 156,201 | 18,619 |
| 18 | Payments of travel or entertainment expenses | | | | · · · · · · · · · · · · · · · · · · · |
| | for any federal, state, or local public officials | l o | | | |
| 19 | Conferences, conventions, and meetings | 42,741 | | | 42,741 |
| 20 | Interest | 0 | | | |
| 21 | Payments to affiliates | 0 | | | , |
| 22 | Depreciation, depletion, and amortization | 0 | 0 | 0 | 0 |
| 23 | Insurance | 77,559 | | 77,559 | |
| 24 | Other expenses. Itemize expenses not covered | | | | |
| | above (List miscellaneous expenses in line 24e. If | | | İ | |
| | line 24e amount exceeds 10% of line 25, column | | | | |
| | (A) amount, list line 24e expenses on Schedule O) | | | | |
| а | Projects and Functions | 481,212 | 481,212 | · † | · · · · · · · · · · · · · · · · · · · |
| b | Professional Education | 15,910 | , | | 15,910 |
| c | Research | 5,547 | | | 5,547 |
| ď | Consultants | 7,920 | | 7,920 | |
| e | All other expenses | 252,630 | | 50,786 | 201,844 |
| 25 | Total functional expenses. Add lines 1 through 24e . | 18,050,245 | 12,277,680 | 2,724,704 | 3,047,861 |
| 26 | Joint costs. Complete this line only if the | 1,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | =1. = 11. = 1 | 2,2 ,001 |
| | organization reported in column (B) joint costs | | | | |
| | from a combined educational campaign and | | | | |
| | fundraising solicitation. Check here | | | | |
| | following SOR OR 2 (ASC 058.720) | | | | |

Total liabilities and net assets/fund balances.

33

Form 990 (2014) **Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year Cash—non-interest-bearing 1,522,870 1.919,498 2 2 Savings and temporary cash investments 6.432,199 3 2.700.692 3 Pledges and grants receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 7 Notes and loans receivable, net . 8 Inventories for sale or use 13,901 8.148 9 Prepaid expenses and deferred charges . . . Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 6.692.291 10b 2.513,499 10c 2,387,450 Less: accumulated depreciation 46,920,133 46,548,007 11 Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11. . . 81,139,114 12 75,019,274 12 Investments—program-related. See Part IV, line 11 0 13 13 ol 14 14 2,571,690 2,982,443 15 Other assets. See Part IV, line 11. . . 15 141,137,908 16 131,541,010 16 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 628,167 17 723,332 17 18 18 Grants payable. 19 15,367 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties . . . 4.000.000 4.000,000 23 23 24 0 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete 14,567,925 25 15,003,427 Part X of Schedule D 19,742,126 19,196,092 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ► | X | and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 23,235,848 16,052,289 Unrestricted net assets . . 27 27 28,991,781 28 25,584,009 28 Temporarily restricted net assets . . . 69,714,187 70,162,586 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds. 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds. 32 32

111,798,884

121,941,816

141,137,908

33

| Form 9 | 990 (2014) Anti-Defamation League Foundation | 13 | 3-2887439 | Page | e 12 |
|--------|--|----|-----------|--|-------|
| Par | XI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | [| X |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 12 | ,871 | ,272 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 18 | ,050 | ,245 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | -5 | ,178 | ,973 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 121 | ,941 | ,816 |
| 5 | Net unrealized gains (losses) on investments | 5 | | -292 | ,821 |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior penod adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 4 | ,671 | ,138_ |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | 111 | <u>,798</u> | ,884 |
| Part | • | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | <u>. </u> | |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 CashX Accrual Other | | | | } |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in | | | | 1 |
| | Schedule O. | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? . | | 2a | | _X_ |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or | | | | i i |
| | reviewed on a separate basis, consolidated basis, or both | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | . 2b | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a | | | | j |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis X Consolidated basis Both consolidated and separate basis | | | l | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of | | | - 1 | , |
| | 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 in | | | | |
| | Schedule O. | | 1 | 1 | 1 |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | | | | |
| | the Single Audit Act and OMB Circular A-133? | | 3a | | Х |
| ь | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the | | | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | | . 3b | | |
| | | | Form S | 90 (| 2014) |

Continuation Sheet for Form 990

Page 1 of

Name of the Organization
Anti-Defamation League Foundation

Employer identification number

13-2887439

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest

| Compensated Emp | loyees | r | | | | | | | | |
|---|---|--------------------------------|-----------------------|--------------|--------------|--|----------|--|--|--|
| (A) | (B) | l <u>.</u> | | | 2) | | | (D) | (E) | (F) |
| Name and title | Average | - | _ | | Г | that ap | 1 | Reportable | Reportable | Estimated |
| | hours per week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MISC) | amount of other compensation from the organization and related organizations |
| (26) Lawrence Rosenbloom Trustee | 0.05 6.00 | L | | | | | | 0 | 0 | 0 |
| (27) Melvin Salberg | 0.05 | | | | | | | | | |
| Trustee | 2.00 | Х | L. | | | | | 0 | 0 | 0 |
| (28) William R Sapers | 0.50 | | | | | | | | | <u> </u> |
| Trustee | 0 00 | X | L. | | | | | 0 | 0 | 0 |
| (29) Benjamin S Sax | 1 50 | 1 | | | | | | | | |
| Trustee | 6 00 | • | L | | L | <u> </u> | | 0 | 0 | 0 |
| (30) Marla Schaefer | 0 50 | | | | | l | | | | |
| Trustee | 0 00 | • | <u> </u> | ļ | | _ | <u> </u> | 0 | 0 | 0 |
| (31) Pamela Schwartz | 1 50 | | | | | | | | | |
| Trustee | 9 00 | _ | ┡ | <u> </u> | ┡ | _ | ┡ | 0 | 0 | 0 |
| (32) Howard A Sherwood | 0.50 | | | | l | | | _ | _ | _ |
| Trustee | 1.00 | | <u> </u> | | ⊢ | - | <u> </u> | 0 | 0 | 0 |
| (33) Helen Warren Spector | 0 50 | | İ | | | | | | | |
| Trustee | 100 | + | H | | ├ | ├ | ├- | 0 | 0 | 0 |
| (34) George Stark | 1 50 | | | | | | | l , | 0 | • |
| Trustee (25) Pehort C Sugarman | 2 00 0.05 | | ┢ | - | H | 1 | ┢ | 0 | 0 | 0 |
| (35) Robert G Sugarman Trustee | 2.00 | | | | ł | | | l o | o | • |
| (36) Glen A Tobias | 1.50 | | ╁─ | | ╁ | | 1 | <u> </u> | | 0 |
| Trustee | 2 00 | | l | | | | | 0 | ا | 0 |
| (37) Christopher Wolf | 0.50 | | | | ┢ | | t | | - | |
| Trustee | 6.00 | | | | İ | | | l 0 | o | 0 |
| (38) Abraham H Foxman | 20.00 | | | \vdash | İ | | t | | Ĭ | |
| Trustee (see sch J, part III) | 20 00 | | | | 1 | | | 344,915 | 344,915 | 64,456 |
| (39) Nina Hanan | 16 00 | + | | T | 一 | 1 | | 311,010 | <u> </u> | 0 1, 100 |
| Assoc. Exe. Dir. of Dev./Trustee | 24 00 | | | | | | | 100,336 | 150,503 | 15,818 |
| (40) Michael A Kellman | 16.00 | | | | | | Г | | | |
| Exe. Director / Assistant Treasurer | 24.00 | | | x | | | 1 | 105,020 | 157,530 | 43,771 |
| (41) Steven C Sheinberg | 20.00 | | | | | | | | | |
| Assistant Secretary | 20 00 | | | Х | | | | 89,327 | 89,329 | 38,915 |
| (42) Linda S Zisk (resigned 10/2/2014) | 20 00 | | | | | | | | | |
| Director of National Major Gifts (ADL) | 20 00 | | | | L | X | | 95,356 | 95,356 | 35,782 |
| (43) Samuel V Memberg | 10.00 | | | | | | | | | |
| Chief Information Officer (ADL) | 30.00 | • | | _ | L | <u>X</u> | | 51,496 | 154,489 | 39,653 |
| (44) Lisa B Lager (resigned 12/31/2014) | 40.00 | | | | | | | | | |
| Dir. of Nat. PG Legacy & End. | 0.00 | - | \vdash | — | \vdash | LX. | ↓_ | 215,466 | 0 | 23,034 |
| (45) Marvin S Rappaport | 12.00 | • 1 | | | 1 | | | | | |
| Director of Leadership (ADL) | 28 00 | | ⊢ | <u> </u> | ↓_ | X | ╄ | 54,091 | 126,212 | 41,428 |
| (46) Samuel M Connor | 10.00 | | | | | | | | 400 4=0 | 40.00- |
| Director of M & C (ADL) | 30.00 | L | 1 | <u> </u> | <u> </u> | X | | 44,389 | 133,170 | 42,696 |

SCHEDULE A (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization

OMB No 1545-0047

2014

Open to Public Inspection

| | | he organization | - - | | | - | Employer identificatio | n number | | |
|---------|--|---|--|--|---|---------------------------|--|---|-----|--|
| | | amation League Foundation | | | | | | 87439 | | |
| Par | | | ity Status (All org | ganizations must co | mplete th | is part) | See instructions. | | | |
| ne 1 | orga | anization is not a private foundati A church, convention of churche | | | | | | | | |
| | H | | | | Section | 170(0)(1)(| (A)(I). | | | |
| 2 | H | A school described in section 1 | | • | | | | | | |
| 3 | <u> -</u> | A hospital or a cooperative hosp | = | | - | | • | | | |
| 4 | | A medical research organization hospital's name, city, and state: | | | · | | | | | |
| 5 | | An organization operated for the section 170(b)(1)(A)(iv). (Com | | e or university owned | or operate | d by a gov | vernmental unit desc | ribed in | | |
| 6 | | A federal, state, or local govern | ment or governmen | ital unit described in se | ection 170 | (b)(1)(A)(| v). | | | |
| 7 | X | An organization that normally redescribed in section 170(b)(1)(| eceives a substantia (A)(vi). (Complete F | al part of its support fro Part II.) | m a gover | nmental u | unit or from the gene | ral public | | |
| 8 | | A community trust described in | • | · | II.) | | | | | |
| 9 | | An organization that normally re receipts from activities related t support from gross investment acquired by the organization af | eceives (1) more the oits exempt function income and unrelated | an 33 1/3% of its supp ons—subject to certain ed business taxable in | ort from co exception come (less | s, and (2) s section t | no more than 33 1/3 511 tax) from busine | 3% of its | | |
| 10 | | An organization organized and | operated exclusivel | y to test for public safe | ety. See se | ction 509 | 9(a)(4). | | | |
| 11 | | An organization organized and of one or more publicly support Check the box in lines 11a thro | ed organizations de | scribed in section 509 | 9(a)(1) or s | section 50 | 09(a)(2). See section | n 509(a)(3). | | |
| a b | | Type I. A supporting organization (so organization). You must con Type II. A supporting organization or management of the | s) the power to regunder Part IV, Sect zation supervised on the supporting organics. | larly appoint or elect a cions A and B. r controlled in connecti ization vested in the sa | majority o | of the direct | ctors or trustees of the discourse of th | ne supporting having | | |
| c | 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. | | | | | | | | | |
| d | | its supported organization(s) Type III non-functionally in that is not functionally integr | tegrated. A supportated The organizat | ting organization opera ion generally must sati | ated in con isfy a distri | nection wibution red | oth its supported org | anization(s) entiveness | | |
| е | | requirement (see instruction Check this box if the organiz | ation received a wr | itten determination from | m the IRS | that it is a | | e ili | | |
| f | | functionally integrated, or Ty Enter the number of supported | | ily integrated supportir | ng organiz | ation | | | 0 | |
| ď | ı | Provide the following information | _ | ed organization(s) | | • | | · <u>L</u> | | |
| | (i) | Name of supported organization | (ii) EIN | | (iv) is the o listed in you docur | ır govemıng | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (s instructions) | see | |
| | | | | (000 | Yes | No | | | | |
| A) | | | | | | | | | | |
| B) | | | | | | | | | | |
| C) | | | | | | | | | | |
| D) | | | | | | | | | | |
| | | | | | - | | | | | |
| E) | | | | | | | | | | |
| Γota | ı | | | | | | 0 | | n | |

instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (d) 2013 Calendar year (or fiscal year beginning in) (a) 2010 **(b)** 2011 (c) 2012 (e) 2014 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 9,853,986 10,819,474 9,103,227 6,397,168 13,542,448 49,716,303 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge . Total. Add lines 1 through 3 . . . 9.853.986 10.819.474 9,103,227 13.542.448 6.397.168 49.716.303 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). 5,727,398 Public support. Subtract line 5 from line 4. 43.988.905 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total 9.853.986 10.819.474 9,103,227 13,542,448 6.397,168 49,716,303 7 Amounts from line 4 . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 1,549,537 1,379,242 1,910,344 2,127,882 2,284,372 . . . 9,251,377 Net income from unrelated business activities, whether or not the business is regularly carried on . 105,437 182,110 195,397 0 257,598 740.542 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10. 59.708.222 12 Gross receipts from related activities, etc. (see instructions) . . . 1.337.032 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 73.67% 15 Public support percentage from 2013 Schedule A, Part II, line 14 76.20% 16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test—2014. 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 meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 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 meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

| che | edule A (Form 990 or 990-EZ) 2014 Anti-Defam | ation League Fou | ındation | | | 13-288743 | Page 3 |
|------|--|----------------------|---------------------|---------------------|---------------------|-------------------|-----------|
| ⊃a | rt III Support Schedule for Organ | | | tion 509(a)(2) | | | |
| | (Complete only if you checke | | | | ition failed to qu | ualify under Part | II. |
| | If the organization fails to qua | | | | | • | |
| Sec | ction A. Public Support | | | | | | |
| | endar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | Gifts, grants, contributions, and membership fees | | | • | | ** | |
| | received (Do not include any "unusual grants") | | | | | | 0 |
| 2 | Gross receipts from admissions, merchandise | | | | | | |
| | sold or services performed, or facilities furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | ļ | | | | | 0 |
| 3 | Gross receipts from activities that are not an | | | | | | |
| | unrelated trade or business under section 513. | | | | | | 0 |
| 4 | Tax revenues levied for the organization's | | | | | | |
| | benefit and either paid to or expended on | | | | | | |
| | ıts behalf | | | | | | 0 |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the | | | | } | | |
| | organization without charge | | | | | | 0 |
| 6 | Total. Add lines 1 through 5 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7a | Amounts included on lines 1, 2, and 3 | | | | | | |
| | received from disqualified persons | | | | | | 0 |
| b | Amounts included on lines 2 and 3 received | | | | | | |
| | from other than disqualified persons that | | | | | 1 | |
| | exceed the greater of \$5,000 or 1% of the | | | | | 1 | _ |
| | amount on line 13 for the year | | | | | | 0 |
| _ | Add lines 7a and 7b | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 | Public support (Subtract line 7c from | | | | | | 0 |
| 20 | ine 6) ction B. Total Support | L | | <u></u> | | | 0 |
| | endar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | Amounts from line 6 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Gross income from interest, dividends, | | | Ŭ | Ŭ | 1 | |
| · oa | payments received on securities loans, | | | | | | |
| | rents, royalties and income from similar sources . | | | | | ļ | 0 |
| b | Unrelated business taxable income (less | | | | | | <u>_</u> |
| _ | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | 0 |
| С | Add lines 10a and 10b | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included in line 10b, whether | | ' | | | | |
| | or not the business is regularly carried on | | | | | | 0 |
| 12 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | | | | | | 0 |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12.) | 0 | 0 | 0 | 0 | 0 | 0 |
| 14 | First five years. If the Form 990 is for the or | - | | - | s a section 501(c) | (3) | |
| | organization, check this box and stop here | · · · · · · | | | | | |
| Se | ction C. Computation of Public Sup | port Percenta | ge | | | | |
| 15 | Public support percentage for 2014 (line 8, co | olumn (f) divided by | y line 13, column (| (f)) | | 15 | 0 00% |
| 16 | Public support percentage from 2013 Schedu | | | <u></u> | <u> </u> | 16 | 0 00% |
| Se | ction D. Computation of Investmen | | | | | | |
| 17 | Investment income percentage for 2014 (line | | - | * * * * | | 17 | 0 00% |
| 18 | Investment income percentage from 2013 Sc | | | | | 18 | 00% |
| 19a | 33 1/3% support tests—2014. If the organization of more than 33 1/3%, check this box and s | | | | | | , r- |
| | noundre man 33 1/3%, theta this box and S | LOD HEIE. HIE OIG | zınzauvu düdilles | as a DUDIICIV SUDDO | oneu oruanización . | | |

b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . .

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No 1545-0047 20**14**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization Antı-Defamation League Foundation 13-2887439 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 11 Aggregate value of contributions to (during year) 2 18,931 542 3 Aggregate value of grants from (during year) . 174.000 423,382 Aggregate value at end of year . . 969.922 5.894.921 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? X Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other X Yes Conservation Easements. Part II Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements . . . Total acreage restricted by conservation easements . 2b Number of conservation easements on a certified historic structure included in (a) C 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1. . . (ii) Assets included in Form 990, Part X... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1. . .

Assets included in Form 990, Part X

| Schedu | ile D (Form 990) 2014 Anti-Defamation Le | | | | | | 13-288 | | | Page 2 |
|--------|--|---------------------------------------|----------------|--------------|---------------------------------------|-------------|---------------------|------------|--------------|----------------|
| Part | Organizations Maintaining | Collections of A | Art, Histo | orical Tr | easures, or | Other : | Similar Asse | ts (con | inuec | 1) |
| 3 | Using the organization's acquisition, ac | | records, c | heck any | of the follows | ng that ar | re a significant | | | |
| • | use of its collection items (check all the | at apply): | _ | | | | | | | |
| а | Public exhibition | | d [_] | Loan | or exchange p | orograms | | | | |
| b | Scholarly research | | е 🗌 | Other | | | | | . | . - |
| С | Preservation for future generation | ons | | | | | | | | |
| 4 | Provide a description of the organization Part XIII. | on's collections and | explain ho | ow they fu | rther the orga | anization's | s exempt purp | ose in | | |
| 5 | During the year, did the organization se | olicit or receive dona | ations of a | rt, historic | cal treasures, | or other | sımilar | | | |
| | assets to be sold to raise funds rather | than to be maintain | ed as part | of the org | ganization's co | ollection? | | Ye | s 🔲 | No |
| Part | Complete if the organization 990, Part X, line 21. | | to Form | 990, Par | t IV, line 9, d | or report | ted an amour | nt on Fo | rm | |
| | Is the organization an agent, trustee, or | ustodian or other in | termedian | for contr | ibutions or ot | her asset | ts not | | | |
| | included on Form 990, Part X? . | | | | | | | Ye | s 🔲 | No |
| b | If "Yes," explain the arrangement in Pa | rt XIII and complete | the follow | ving table | • | | | | | |
| | | | | | | | , | Amount | | |
| C | Beginning balance | | | | | 1c | | | | 0 |
| d | Additions during the year | | • | • | | 1d | | | | |
| e | Distributions during the year | | | • | | 1e | | | | |
| f | Ending balance | | | | | 1f | <u> </u> | | | 0 |
| 2a | Did the organization include an amoun | it on Form 990, Part | X, line 21 | , for escr | ow or custodi | al accour | nt liability? | Ye | s X | No |
| b | If "Yes," explain the arrangement in Pa | rt XIII Check here | f the expla | anation ha | as been provi | ded in Pa | art XIII | • | | |
| Part | V Endowment Funds. | | | | | | | | | |
| | Complete if the organization | answered "Yes" | to Form | 990, Par | t IV, line 10. | | | | | |
| | | (a) Current year | (b) Pnd | r year | (c) Two years | back (c | d) Three years back | (e) Fo | ur years | back |
| 1a | Beginning of year balance | 97,116,918 | 88 | ,933,756 | 82,61 | 5,358 | 80,582,79 | 1 | 73,65 | 6,629 |
| b | Contributions | 816,649 | 3 | ,394,086 | 4,00 | 4,202 | 5,249,11 | 0 | 4,20 | 5,725 |
| С | Net investment earnings, gains, | | | | | | | 1 | | |
| | and losses | 2,551,347 | 9 | ,426,721 | | 4,115 | -1,358,94 | | | 5,977 |
| d | Grants or scholarships | | | 12,900 | 1 | 9,500 | 26,55 | 50 | 3 | 80,900 |
| е | Other expenditures for facilities | | | | | | 4 004 04 | ا | | |
| | and programs | 5,529,083 | 4 | ,624,745 | 1,66 | 0,419 | 1,831,04 | 18 | 1,80 |)4,640 |
| T | Administrative expenses | 04.055.024 | 07 | 446 040 | 90.02 | 2.756 | 00.645.25 | | 90.50 | 204 |
| g | End of year balance | 94,955,831 | | ,116,918 | · · · · · · · · · · · · · · · · · · · | | 82,615,35 | 08[| 80,58 | 32,791 |
| 2 | Provide the estimated percentage of the Board designated or quasi-endowmen | · · · · · · · · · · · · · · · · · · · | 3% | ine ig, co | numm (a)) ner | u as | | | | |
| a b | Permanent endowment | 74% | | | | | | | | |
| C | Temporarily restricted endowment | ▶ 23% | | | | | | | | |
| · | The percentages in lines 2a, 2b, and 2 | | % | | | | | | | |
| 3a | Are there endowment funds not in the | | | n that are | held and adr | ministere | d for the | | | |
| | organization by: | • | J | | | | | | Yes | No |
| | (i) unrelated organizations | | | | | | | 3a(i) | Х | |
| | (ii) related organizations | | | • | | | | 3a(ii) | | Х |
| b | If "Yes" to 3a(ii), are the related organi | izations listed as red | quired on S | Schedule | R? | | • | 3b | | |
| 4 | Describe in Part XIII the intended uses | s of the organization | 's endowr | nent fund | s | | | | | |
| Part | | = | | | | _ | | _ | | |
| | Complete if the organization | n answered "Yes" | to Form | 990, Pai | t IV, line 11 | a. See F | orm 990, Pa | rt X, line | <u>: 10.</u> | |
| | Description of property | (a) Cost or ot | | | ost or other | | ccumulated | (d) B | ook valu | e |
| | | (investm | | bas | is (other) | der | preciation | | | |
| 1a | Land | · · | 0 | | 1,150,224 | | | | | 50,224 |
| b | Buildings | · · | 0 | | 5,344,597 | | 4,304,841 | | 1,03 | 39,7 <u>56</u> |
| C | Leasehold improvements | - | 0 | | 0, | | 0 | | | 0 |
| d | Equipment | | 0 | | 107.470 | | 0 | | | 0 |
| e_ | Other | <u> </u> | 0 | | 197,470 | | 0 | | | 97,470 |
| Tota | . Add lines 1a through 1e. (Column (d) | must equal Form 99 | ω, Part X, | coiumn (| ы, iine тис) | · · | <u> </u> | | 2,38 | 37 <u>,450</u> |

| Schedule D (Form 990) 2014 Anti-Defamation League F | oundation | | 13-2887439 Page 3 |
|--|---------------------------------------|---|-------------------------|
| Part VII Investments—Other Securities | s. | | |
| Complete if the organization and | swered "Yes" to Form 990 | 0, Part IV, line 11b. See Form | 990, Part X, line 12. |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of va Cost or end-of-year n | luation |
| (1) Financial derivatives | 0 | | |
| (2) Closely-held equity interests | 0 | | |
| (3) Other Fixed income securities - government | 5,008,669 | F | |
| (A) Mutual funds - equities | 3,034,556 | F | |
| (B) Mutual funds - fixed income | 3,088,767 | | |
| (C) Absolute return funds | 51,858,119 | | |
| (D) LP, real estate, & long only securities | 12,029,163 | F | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) Total (Column (b) must equal Form 990, Part X, col (B) line 12) | 75.040.074 | | |
| | 75,019,274 | L <u>.,</u> | |
| Part VIII Investments—Program Relate | | O Dort IV line 11e Coe Form | 000 Dart V line 12 |
| Complete if the organization and | swered tes to Form 99 | | |
| (a) Description of investment | (b) Book value | (c) Method of va Cost or end-of-year r | |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
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| (8) | | | <u></u> |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) | 0 | | ···· |
| Part IX Other Assets. | | | |
| Complete if the organization and | swered "Yes" to Form 99 | 0, Part IV, line 11d. See Forn | n 990, Part X, line 15. |
| | Description | | (b) Book value |
| | | | |
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| (5) | | | |
| (6) | | · | |
| <u>(7)</u> | | | |
| (8) | | | |
| (9) Total. (Column (b) must equal Form 990, Part X, col | (R) line 15.) | | |
| Part X Other Liabilities. | . (D) | · · · · · · · · · · · · · · · · · · · | <u> </u> |
| Complete if the organization and | swered "Yes" to Form 90 | 0 Part IV line 11e or 11f Se | e Form 000 Part Y |
| line 25. | | | |
| 1. (a) Description of liability | (b) Book value | | |
| (1) Federal income taxes | 0 | | |
| (2) Liabilities under charitable trusts and annuity a | 9,975,782 | | |
| (3) Accrued pension obligations | 1,876,527 | 1 | |
| (4) Due to ADL | 3,151,118 | | |
| (5) | | 1 | |
| (6) | | | |
| | | 1 | |
| (8) | · |] | |

15,003,427

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

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

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

Part V Line 4: The ADL Foundation endowment consists of individual donor-restricted

endowment funds established for a variety of program purposes (See Part III for Statement

of Program Service Accomplishments). As required by generally accepted accounting

principals, net assets associated with endowment funds are classified and reported based

on the existence or absence of donor-imposed restrictions.

Part X Line 2. As required under FIN 48 "Accounting for Uncertainty in Income Taxes", the

following footnote was included in note (2)(i) of the consolidated financial statements of

ADL and the ADL Foundation: "ADL recognizes the effect of income tax positions only if

those positions are more likely than not of being sustained. Income generated from

activities unrelated to ADL's exempt purpose is subject to tax under Internal Revenue Code

Section 511 and is reported and paid with the Internal Revenue Service Form 990-T (Exempt

Organization Business Income Tax Return)"

| Schedule D (Form | 990) 2014 Anti-Defamation League Foundation | 13-2887439 Page | ₃ 5 |
|------------------|---|-----------------|------------|
| Part XIII | Supplemental Information (continued) | | |
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Schedule F (Form 990)

Statement of Activities Outside the United States

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

Department of the Treasury Internal Revenue Service

Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

| Name of the organization | | | | | Employer identification number |
|--|-------------------------------------|--|---|--|--------------------------------|
| Anti-Defamation League Four Part I General Info | | ctivities Outs | ide the United States. | Complete if the organizat | 13-2887439 |
| | 990, Part IV, line | | ide the office outes. | omplete il the organizat | ion answered |
| | s' eligibility for th | | rds to substantiate the amoustance, and the selection cri | - | . Yes No |
| 2 For grantmakers. Describe assistance outside the U | | e organizatıon's _l | procedures for monitoring th | e use of its grants and o | ther |
| 3 Activities per Region (Th | he following Par | t I, line 3 table ca | an be duplicated if additional | space is needed) | |
| (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) a program service, describe specific type of service(s) in region | expenditures for |
| Central America and the | | | Investments | | |
| (1) Caribbean | | | | | 43,480,791 |
| (2) | | | | | |
| (2) | | | | | |
| (3) | | | | <u> </u> | |
| (4) | | | | | |
| (5) | | , | | | |
| (3) | | | | | |
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| (8) | | | | | |
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| (10) | | | | <u> </u> | |
| (11) | | | | | |
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| (12) | | | | | |
| (13) | | | | | |
| (14) | | | | | |
| (15) | | | | | |
| | | | , | | |
| (16) | | | | | |
| (17) | | | | | |
| 3a Sub-total | 0 | 0 | | | 43,480,791 |
| b Total from continuation sheets to Part I. | 0 | 0 | | | 0 |
| C Totals (add lines 3a and 3b) | 0 | | <u> </u> | | 43,480,791 |

13-2887439

Schedule F (Form 990) 2014 Anti-Defamation League Foundation

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| (i) Method of valuation (book, FMV, appraisal, other) | | | | | | | | | | | | | | | | |
|---|---|-----|-----|-----|-----|-----|-----|-----|-----|------|------|------|------|------|------|------|
| (h) Description of non-cash assistance | | | | | | | | | | | | | | | | |
| (g) Amount of non-cash assistance | | | | | | | | | | | | | | | | |
| (f) Manner of cash disbursement | | | | | | | | | | | | | | | | |
| (e) Amount of cash grant | | | | | | | | | | | | | | | | |
| (d) Purpose of grant | | | | | | | | | | | | ' | | | | |
| (c) Region | | | | | | | | | | | | | | | | |
| (b) IRS code section and EIN (if applicable) | | | | | | | | | | | | | | | | |
| 1 (a) Name of organization | £ | (2) | (3) | (4) | (5) | (9) | (2) | (8) | (6) | (10) | (11) | (12) | (13) | (14) | (15) | (16) |

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. 7

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2014

Page 3

13-2887439

Anti-Defamation League Foundation

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.. Part III can be dublicated if additional space is needed. Schedule F (Form 990) 2014
Part III Grants

| Part III can be duplicate | Part III can be duplicated if additional space is needed. | eeded. | | | | | , |
|---------------------------------|---|--------------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
| (1) | | | | | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
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| (14) | | | | | | | |
| (15) | | | | | | | |
| (16) | | | | | | | |
| (17) | | | | | | | |
| (18) | | | | | | | |
| | | | | | | Sched | Schedule F (Form 990) 2014 |

| | Anti-Delamation League Foundation | <u> </u> | 1 40 3 | rage . |
|------|---|----------|-------------------|--------|
| Part | V Foreign Forms | | | |
| 1 ' | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | X Yes | ☐ No | |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) | Yes | X No | |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471). | X Yes | ☐ No | |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) | Yes | X No | |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) | X Yes | ☐ No | |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990). | Yes | X No | |

| | 7-titi Delamation League i Gandation | raye 🗸 |
|--------|--|------------|
| Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions) | |
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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations,

▶ Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

| OMB No 1545-0047 | 2014 | 1 1 2 |
|------------------|------|-------|
| | | |

Employer identification number

13-2887439

2

| | Assistance |
|-----------------------------------|--|
| | Frants and |
| oundation | General Information on Grants and Assistance |
| Anti-Defamation League Foundation | General Info |
| Anti-Defama | Part I |

- X Yes [Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
 - Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Part II

| d of valuation (g) Description of (h) Purpose of grant | non-cash assistance | General Support | General Support | General Support | General Support | | General support | General support General Support | General Support General Support General Support | General support General Support General Support General Support | General Support General Support General Support General Support General Support | General support General Support General Support General Support General Support General Support | General Support General Support General Support General Support General Support General Support |
|--|----------------------------------|--|---|---|---|---|---|---|--|---|---|---|--|
| (A) (A) | (book, FMV, appraisal, other) | | | | | | | | | | | | |
| (e) Amount of non- | cash assistance | | | | | | | | | | | | |
| (d) Amount of cash | grant | 10,524,768 | 20,000 | 20,000 | 12,500 | | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 | 12,000 10,000 10,000 10,000 | 12,000 10,000 10,000 10,000 7,500 6,000 |
| (c) IRC section | ıf applicable | 501(c)3 | 501(c)3 | 501(c)3 | 501(c)3 | | 501(c)3 | 501(c)3 | 501(c)3 501(c)3 501(c)3 | 501(c)3 501(c)3 501(c)3 | 501(c)3 501(c)3 501(c)3 501(c)3 | 501(c)3 501(c)3 501(c)3 501(c)3 501(c)3 | 501(c)3 501(c)3 501(c)3 501(c)3 501(c)3 |
| (b) EIN | | 13-1818723 | 13-2887439 | 13-6104086 | 13-3681170 | • | 13-3376265 | 13-3376265 | 13-3376265 13-6220819 13-2909403 | 13-3376265 13-6220819 13-2909403 95-6207819 | 13-3376265 13-6220819 13-2909403 95-6207819 13-3971298 | 13-3376265 13-6220819 13-2909403 95-6207819 13-3971298 23-7252135 | 13-3376265 13-6220819 13-2909403 95-6207819 13-3971298 23-7252135 95-2466183 |
| 1 (a) Name and address of organization | or government | (1) Anti-Defamation League (ADL) 605 Third Ave New York, NY 10158 | (2) Anti-Defamation League Foundatio 605 Third Ave New York, NY 10158 | (3) PEF Israel Endowment Fund 317 Madison Ave New York, NY 10017 | (4) American Finends of Beut Morasha 25 W 45th St New York, NY 10036 | | (5) Museum of Jewish Hentage 36 Battery Place New York, NY 10280 | (5) Museum of Jewish Hentage 36 Battery Place New York, NY 10280 (6) American Society of Haifa Univ 245 Fifth Avenue New York, NY 10016 | (5) Museum of Jewish Hentage 36 Battery Place New York, NY 10280 (6) American Society of Harfa Univ 245 Fifth Avenue New York, NY 10016 (7) Int'l Sephardic Education Foundate 135 Wt 29th St New York, NY 10001 | (5) Museum of Jewish Hentage 36 Battery Place New York, NY 10280 (6) American Society of Haifa Univ 245 Fifth Avenue New York, NY 10016 (7) Int'l Sephardic Education Foundate 135 Wt 29th St New York, NY 10001 (8) Los Angeles City College Foundati 855 No Vermont Ave L A, CA 90029 | (5) Museum of Jewish Hentage 36 Battery Place New York, NY 10280 (6) American Society of Harfa Univ 245 Fifth Avenue New York, NY 10016 (7) Int'l Sephardic Education Foundate 135 Wt 29th St New York, NY 10001 (8) Los Angeles City College Foundati 855 No Vermont Ave L A, CA 90029 (9) NYU Hospital Centers 1 Park Avenue New York, NY 10016 | (5) Museum of Jewish Hentage 36 Battery Place New York, NY 10280 (6) American Society of Haifa Univ 245 Fifth Avenue New York, NY 10016 (7) Int'l Sephardic Education Foundate 135 Wt 29th St New York, NY 10001 (8) Los Angeles City College Foundati 855 No Vermont Ave L.A. CA 90029 (9) NYU Hospital Centers 1 Park Avenue New York, NY 10016 (10) America-Israel Friendship League 134 E 39th St New York, NY 10016 | (5) Museum of Jewish Hentage 36 Battery Place New York, NY 10280 (6) American Society of Haifa Univ 245 Fifth Avenue New York, NY 10016 (7) Int'l Sephardic Education Foundate 135 Wt 29th St New York, NY 10001 (8) Los Angeles City College Foundatif 855 No Vermont Ave L.A., CA 90029 (9) NYU Hospital Centers 1 Park Avenue New York, NY 10016 (10) America-Israel Friendship League 134 E. 39th St New York, NY 10016 (11) Center Theatre Group of Los Angele 601 W Temple St LA, CA 90012 |

Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2014)

| art III | Grants and Other Assistance to Domestic Individual Part III can be duplicated if additional space is needed | omestic Individu | als. Complete if the | organization answe | dividuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 needed. | Part IV, line 22. |
|-----------------------|---|---------------------------------------|---|---|---|--|
| | (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 non-cash assistance |
| _ | | | | | | |
| 6. | | | | | | |
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| Part IV | Supplemental Information. Provide the inform | the information r | equired in Part I, lin | e 2, Part III, column | ation required in Part I, line 2, Part III, column (b), and any other additional information. | tional information. |
| art I Lin | 9.2 | listed in Part II is ac | complished by ADL be | efore the actual receipt | of the | |
| nancial | nancial award. Thus, it is not necessary and ADL Foundation does not have procedures to monitor the use of these funds. The remaining | indation does not ha | ve procedures to mon | tor the use of these fu | nds The remaining | |
| wards li | wards listed in Part II were distributed from donor advised funds 👃 | ised funds As such | the donors selected t | s such, the donors selected the recipient of each award ADL | ard ADL | |
| oundatic | oundation ensures that the recipient organizations qualify for the awards according to IRS regulations regarding non-taxable | nalify for the awards | according to IRS regul | ations regarding non-t | эхаblе | |
| istributio | listributions and has final control of whether to make the advised grant. | he advised grant. | | | | |
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SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

| Anti-[| Defamation League Foundation | 13-2887439 | | |
|-------------|--|--|-----|----------------|
| Par | Questions Regarding Compensation | | | |
| 1a | Check the appropriate box(es) if the organization provided any of the following 990, Part VII, Section A, line 1a Complete Part III to provide any relevant infor | | Yes | No |
| | X First-class or charter travel Housing allowance of | r residence for personal use | | |
| | Travel for companions Payments for busine | ss use of personal residence | | |
| | X Tax indemnification and gross-up payments Health or social club | dues or initiation fees | | |
| | Discretionary spending account Personal services (e | .g , maid, chauffeur, chef) | | |
| b | If any of the boxes on line 1a are checked, did the organization follow a writter or reimbursement or provision of all of the expenses described above? If "No," | complete Part III to | | |
| | explain | <u>1b</u> | X | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing exp directors, trustees, and officers, including the CEO/Executive Director, regarding | ng the items checked in line | | |
| | 1a? | <u>2</u> | X | - |
| 3 | Indicate which, if any, of the following the filing organization used to establish to organization's CEO/Executive Director. Check all that apply. Do not check any related organization to establish compensation of the CEO/Executive Director, X Compensation committee Written employment Independent compensation consultant Form 990 of other organizations X Approval by the boars. | boxes for methods used by a but explain in Part III contract | | |
| a b c | During the year, did any person listed in Form 990, Part VII, Section A, line 1a organization or a related organization. Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retiremer Participate in, or receive payment from, an equity-based compensation arrang If "Yes" to any of lines 4a–c, list the persons and provide the applicable amount | 4a t plan? | 1 | X X X |
| 5 a b | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must comp For persons listed in Form 990, Part VII, Section A, line 1a, did the organization compensation contingent on the revenues of The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III | | | X |
| 6 a b | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization compensation contingent on the net earnings of The organization? Any related organization? If "Yes" to line 6a or 6b, describe in Part III | n pay or accrue any | | X |
| 7 8 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization payments not described in lines 5 and 6? If "Yes," describe in Part III | a contract that was | | X |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follow the rebuttable presumption processes to line 8, did the organization also follows the rebuttable presumption processes to line 8, did the organization also follows the rebuttable presumption processes to line 8, did the organization also follows the rebuttable presumption processes to line 8, did the organization also follows the rebuttable presumption also follows the rebuttable pr | | | |

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

(F) Compensation in column (B) reported as deferred in prior Form 990 For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII 377,143 377,143 106,664 159,993 122,528 183,793 108,784 113,246 113,248 61,409 66,519 155,212 55,063 165,192 238,500 (E) Total of columns (B)(i)-(D) (E) amounts for that 14,935 16,429 10,761 25,110 28,328 28,328 5,572 8,357 14,388 21,583 16,736 16,736 8,368 25,103 9,243 14.936 Section A, line 1a, applicable column (D) and (D) Nontaxable benefits 2,955 3,890 3,900 2,721 1,545 6,605 756 3,120 4,680 4.637 1,667 1,431 4,294 (C) Retirement and other deferred compensation 17,960 17,961 2,818 13,155 539 824 1,868 1,869 13,156 1,607 ,189 2.773 179 4,227 13,581 (B) Breakdown of W-2 and/or 1099-MISC compensation (iii) Other reportable compensation Note. The sum of columns (B)(I)—(III) for each listed individual must equal the total amount of Form 990, Part VII, 0:0 0 0 00 (ii) Bonus & incentive compensation 326,955 326,954 87,459 87,460 49,889 102,202 201,885 123,439 44,210 99,512 153,303 82,201 82,200 52,902 149,268 132,631 (i) Base compensation Ξ ≘≘ \equiv Ξ \equiv \equiv (E) \equiv \equiv \equiv Ξ \equiv Ξ Ξ Ξ \equiv 5 Director of National Major Gifts (ADI Lisa B Lager (resigned 12/31/2014) 3 Exe. Director / Assistant Treasurer Linda S Zisk (resigned 10/2/2014) 2 Assoc. Exe. Dir. of Dev /Trustee 6 Chief Information Officer (ADL) 7 Dir. of Nat. PG Legacy & End. 8 Director of Leadership (ADL) (A) Name and Title 1 Trustee (see sch. J, part III) 9 Director of M & C (ADL) Steven C Sheinberg Samuel V Memberg Marvin S Rappaport Abraham H Foxmar 4 Assistant Secretary Michael A Kellman Samuel M Connor Nina Hanan 4 5 16 9 12 5 ¥

Schedule J (Form 990) 2014

Supplemental Information Part III

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| Part I Line 1a Travel Reimbursement Policy - ADL Foundation has a written policy regarding travel reimbursement in accordance | |
|---|--|
| indation has a written policy regarding travel reimbursement in accordance | |
| y - ADL Foundation has a writter | |
| Part I Line 1a Travel Reimbursement Policy - A | |
| Part I Line 1a | |

National Director's and the ADLFoundation Executive Director's expense reports

with rules for an accounable plan. The Chair of the Audit Committee reviews a periodic summary of the ADL Foundation Trustee / ADL

Part I Line 1a Agross up benefit, allocated in part to ADL Foundation, is paid to the ADL Foundation Trustee / ADL National

Director directly by the ADL in accordance with its policy regarding payment of expenses and is included in taxable comensation

Part I Line 4b In 2012, ADL and ADL Foundation finalized a Supplemental Executive Retirement Plan (SERP) benefit for Abraham H

Foxman, ADL's National Director since 1987 It was in recognition of his significant value to ADL and the ADL Foundation at that

tme and going forward, and his fifty years of invaluable and tireless service, including 25 years as a National Director The

SERP is a retirement benefit that is paid out over time. No amounts were paid or accured during the year ended December 31, 2014

and the remaining benefit is included in the accounts payable and accrued expenses liability on ADL's balance sheet. The SERP was

approved by ADL's and ADL Foundation's Joint Executive Compensation Committee. The Committee is a fully independent and

disinterested body. It was rigorous in its methodology and relied upon independent experts who advised that the SERP (and the

overall compensatory package) was reasonable in light of market comparability data

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

| | Defamation League Foundation | | | | 39 | | | |
|-----|---|-------------------------------|--|---|-----------------------|--------------------------------|-------|----|
| Par | 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 | Method on noncash cor | (d) of determ itribution | | |
| 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 . | X | 8 | 140,033 | Mean; date of | of contrib | utior | |
| 10 | Securities—Closely held stock | | | | | | | |
| 11 | Secunties—Partnership, LLC, | | | | | | | |
| | or trust interests | | | | | | | |
| 12 | Securities—Miscellaneous | | | | | | | |
| 13 | Qualified conservation | | | | | | | |
| | contribution—Historic | | | | | | | |
| | structures | 1 | | | 1 | | | |
| 14 | Qualified conservation | | | | | | | |
| | contribution—Other | | | | | | | |
| 15 | Real estate—Residential . | | | | | | | |
| 16 | Real estate—Commercial | | | | | | | |
| 17 | Real estate—Other | 1 | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | | | | | _ | | |
| 20 | Drugs and medical supplies . | | | | | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| 24 | Archeological artifacts | - | | | _ | | | |
| 25 | Other ► () | | | } | | | | |
| 26 | Other ► () | | | | | | | |
| 27 | Other ► () | | | | | <u>-</u> | | |
| 28 | Other ► () | | | | | | | |
| 29 | Number of Forms 8283 received | by the orgar | nization during the tax year f | or contributions for | | | | |
| | which the organization completed | l Form 8283 | , Part IV, Donee Acknowled | gement | 29 | | | |
| | | | | | | Y | es | No |
| 30a | During the year, did the organizat | tion receive | by contribution any property | reported in Part I, lines 1 th | rough | ļ | | , |
| | 28, that it must hold for at least th | ree years fr | om the date of the initial cor | ntribution, and which is not re | equired | | | |
| | to be used for exempt purposes f | or the entire | holding period?. | | . [| 30a | | X |
| b | If "Yes," describe the arrangemen | | | | 1 | T | T | |
| 31 | Does the organization have a gift | acceptance | policy that requires the revi | iew of any non-standard | | | | |
| | contributions? | | | | . [| 31 | X | |
| 32a | Does the organization hire or use | third partie | s or related organizations to | solicit, process, or sell | | T | | |
| | noncash contributions?. | | | | . | 32a | | X |
| b | If "Yes," describe in Part II | | | | | | | |
| 33 | If the organization did not report a checked, describe in Part II | an amount II | n column (c) for a type of pro | operty for which column (a) i | s | | | |

| 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. |
|--------------|---|
| Part I, Line | 9(b): Each security is counted as a separate contributed item. |
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SCHEDULE O (Form 990 or 990-EZ)

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 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service Name of the organization

Anti-Defamation League Foundation

Open to Public Inspection

Employer identification number

13-2887439

| Form 990, Part I, Line 1: Help promote the mission of the Anti-Defamation League (ADL) through |
|--|
| the maintenance and, where appropriate, prudent investment of the endowments, trusts, |
| philanthropic funds, real estate and other assets held by the Anti-Defamation League |
| Foundation (the ADL Foundation) as set forth in the ADL Foundation's Certificate of |
| Incorporation These assets and their proceeds are to be used to support the mission of ADL. |
| Form 990, Part III, Line 1 Help promote the mission of ADL through the maintenance and, where |
| appropriate, prudent investment of the endowments, trusts, philanthropic funds, real estate |
| and other assets held by the ADL Foundation as set forth in the ADL Foundation's Certificate |
| of Incorporation. These assets and their proceeds are to be used to support the mission of |
| ADL. |
| Form 990, Part III, Line 4d The amount of \$675,859 consists of the following additional |
| program service accomplishments Regional Operations (\$304,483), Civil Rights (\$326,221), |
| International Affairs & Interfaith programs (\$11,606), and Leadership (\$33,549) |
| Form 990, Part V, Line 1a. Of the 209 forms filed, 20 are forms 1099-M and 189 are forms |
| 1099-R. |
| |
| Form 990, Part VI, Section A, Line 2. List of individuals listed in part VII, Section A with |
| famıly relationships. Barbara B Balser - Ronald Davis Balser |
| |
| Form 990, Part VI, Section A, Line 6 The ADL Foundation has a single member, ADL |
| |
| |

| Schedule O (Form 990 or 990-EZ) (2014) | Page 2 |
|--|---|
| Name of the organization Anti-Defamation League Foundation | Employer identification number 13-2887439 |
| Anti-Defamation League Foundation | · |
| Form 990, Part VI, Section A, Line 7a The ADL Foundation has a three-person Member Committee | ee |
| consisting of the President of the ADL Foundation; the National Chair of ADL; and the | |
| immediate Past National Chair of ADL The Member Committee approves significant changes to t | he |
| organizational documents and elects the Board of Trustees. | |
| | |
| Form 990, Part VI, Section B, Line 11b. Copies of draft Form 990 were provided to the members | · |
| of the ADL Foundation's Audit Committee, which reviewed and approved the Form 990 at its | |
| October, 2015 meeting Subsequent to the meeting of the Audit Committee, an email was sent to | |
| the entire ADL Foundation's Board of Trustees notifying them that the Form 990 is available | |
| for their review before it is filed with the IRS. | |
| | |
| Form 990, Part VI, Section B, Line 12c ADL Foundation has a written Conflict of Interest | |
| policy approved by the Board of Trustees that requires its officers, directors and employees | |
| to annually disclose their potential conflicts of interest, those of their family members and | |
| of other interested parties. This disclosure form is distributed to all staff annually by the | |
| organization's Human Resources Department (HR) HR ensures that all forms are completed and | |
| reviews the forms for conflicts. The disclosure form is distributed to members of the Board of | |
| Trustees annually by the Office of the Executive Director The Office of the Executive | |
| Director collects and reviews them for noted officer and director conflicts. A summary and the | |
| noted findings are then reviewed by the Executive Director, who then provides all disclosures | |
| to the Board of Trustees for further review The Board of Trustees reviews and determines by | |
| majority vote whether a conflict exists. If a conflict is noted involving a member of the | |
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| Form 990, Part VI, Section B, Line 15a: Compensation Process - ADL Foundation's process for | |
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| independent third party that performs a compensation market study and provides salary | |
| structure grading. This is reviewed and a decision is made by the Executive Compensation | |

| Schedule O (Form 990 or 990-EZ) (2014) | Page 2 |
|---|---|
| Namer of the organization Anti-Defamation League Foundation | Employer identification number 13-2887439 |
| Committee, as documented in the committee meeting minutes. The Executive Compensation | |
| Committee performs a compensation review at least once a year. | |
| | |
| Form 990, Part VI, Section B, Line 15b Compensation Process - ADL Foundation's process for | |
| determining the compensation of Officers and Key Employees includes consultation with an | |
| ındependent third party that performs a compensation market study and provides salary | |
| structure grading. This is reviewed by ADL's National Director who presents a recommendation | |
| to the Executive Compensation Committee. The Executive Compensation Committee makes a de- | ecision |
| on the recommendation, as documented in the committee meeting minutes. The Executive | |
| Compensation Committee performs a compensation review at least once a year | |
| | |
| Form 990, Part VI, Section C, Line 19: The audited consolidated financial statements of ADL | |
| and the ADL Foundation is made available to the public through a direct link on the ADL | |
| Foundation website, (www.ADL.org). Furthermore, a full set of the audited consolidated | |
| financial statements of ADL and the ADL Foundation is available upon request as indicated on | |
| the ADL Foundation website and in the ADL annual report ADL Foundation's Certificate of | |
| Incorporation is available with the Secretary of State of New York. | |
| | |
| Form 990, Part XI, Line 9. Other changes in net assets totaling (\$4,671,138) is the sum of the | |
| following items (i) a pension charge other than net periodic benefit cost in the amount of | |
| (\$1,404,552) and (ii) the change in the value of charitable trust and annuity agreements in | |
| the amount of (\$3,266,586) Such amounts were recorded on the consolidated audited financial | |
| statements and schedules of ADL and the ADL Foundation. | |
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Anti-Defamation League Foundation Name of the organization

Part

Name, address, and EIN (if applicable) of disregarded entity

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▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990

(f)
Direct controlling entity Open to Public Employer identification number OMB No 1545-0047 Inspection 13-2887439 (e) End-of-year assets Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income S Legal domicile (state or foreign country) Attach to Form 990. Primary activity

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Part II

| one of those related tax-exemption gain zations during the tax year. | ding the tax year. | | | | | | ١ |
|--|-------------------------|---|---------------------|--|---------------------------|---|------------------------|
| (a) | (q) | (9) | (Đ | (e) | € | (B) | |
| Name, address, and ElN of related organization | Pnmary activity | Legal domicile (state or foreign country) | Exempt Code section | Public chanty status (if section 501(c)(3)) | Direct controlling entity | Section 512(b)(13) controlled entity? | 2(b)(13) led ? |
| | | | | | | Yes | ٩ |
| (1) Anti-Defamation League EIN # 13-1818723 | Eliminate anti-Semitism | | | | | | |
| | | DC | 501(c)(3) | 6 | N/A | | × |
| (2) ADLF Common Fund EIN # 13-3095748 | Assist & Support ADL | | | | | | |
| 605 Third Avenue New York, NY 10158 | | N | 501(c)(3) | PF | N/A | | × |
| (3) | • | | | | | | |
| (4) | | | | | | | |
| (5) | | | | | | | |
| (9) | • | | | | | | |
| (7) | | | | | | | |

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

Schedule R (Form 990) 2014

Page 2

13-2887439

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Schedule R (Form 990) 2014

Anti-Defamation League Foundation

Schedule R (Form 990) 2014 Percentage ownership (1) Section 512(b)(13) controlled ŝ 3 Yes 34 Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year × (j) General or managing partner? Yes No Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line (h) Percentage ownership Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) end-of-year assets \equiv (g) Share of (h)
Disproportionate
allocations? ž (f) Share of total income Yes Share of end-ofyear assets (e)
Type of entity
(Ccop, Scop, or trust) because it had one or more related organizations treated as a partnership during the tax year. Share of total income (d)
I Direct controlling entity ADL Foundatio Predominant income (related, unrelated, excluded from tax under sections 512-514) (c)
Legal domcile
(state or foreign country) (d)
Direct controlling lentity VARIOUS Charitable Trusts Primary activity (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Charitable Remainder Trust (20) Name, address, and EIN of related organization <u>e</u> Part IV Part III Ξ 0 Ξ 8 ල € 9 9 0 2 **3** 3 9 (0)

Anti-Defamation League Foundation

Schedule R (Form 990) 2014

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13-2887439

Yes

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Lease of facilities, equipment, or other assets to related organization(s).

Purchase of assets from related organization(s). Exchange of assets with related organization(s)

19 ပ္ 4 19 Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Dunng the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Loans or loan guarantees by related organization(s)... Gift, grant, or capital contribution from related organization(s). Gift, grant, or capital contribution to related organization(s). Loans or loan guarantees to or for related organization(s). Sale of assets to related organization(s). Dividends from related organization(s) Part V σ

Method of determining amount involved × × If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. Ē = 4 9 Amount involved Transaction type (a-s) Performance of services or membership or fundraising solicitations for related organization(s). Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s). Lease of facilities, equipment, or other assets from related organization(s) Sharing of paid employees with related organization(s)..... Reimbursement paid by related organization(s) for expenses. Reimbursement paid to related organization(s) for expenses. Other transfer of cash or property from related organization(s) Other transfer of cash or property to related organization(s). Name of related organization Ε **-** 0 ۵ ۵ Œ Schedule R (Form 990) 2014

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13-2887439

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| | | | | | | | | 1 | | | | | | | |
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| | Yes No Yes No Yes | Yes No Yes Yes | Yes No Yes No Yes | Ves No Action Action Action Actio | Ves No Yes No N | Yes No Yes No Yes | Age No No Age No Age No N | Ves No Ves No Ves No No | No No No No No No No No | No No No No No No No No | Ves No No | Age Age <th>Age NO Age NO <td< th=""><th>Ves No Act No</th><th> No No No No No No No No</th></td<></th> | Age NO Age NO <td< th=""><th>Ves No Act No</th><th> No No No No No No No No</th></td<> | Ves No Act No | No No No No No No No No |

| Schedule R (For | | Anti-Defamation League Four | ndation | | 13-2887439 | Page 5 |
|-----------------|-------------|--------------------------------|------------------------------|---|------------|---------|
| Part VII | Supplem | ental Information | | | | |
| | Provide a | Iditional information for resi | ponses to questions on Sched | ule R (see instruction | ns). | |
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