For Paperwork Reduction Act Notice, see the separate instructions.

Form 990

Department of the Treasury

DLN: 93493218009468 OMB No 1545-0047

Return of Organization Exempt From Income Tax

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

Open to Public

Interna	l Reve	nue Service	► Information abou	t Form 990 and its instructions is a	ı <u>www IR</u>	<u>3 gov/rorm</u>	<u> </u>		Inspection
A F	or th	e 2017 c		ning 01-01-2017 , and ending	12-31-2	017			
		pplicable	C Name of organization AMERICAN JEWISH COMMITTEE				D Employ	er identif	ication number
	dress i me ch	change	A TENIGRA SERVISIT CONTINUE				13-556	3393	
	tial ret	-	Doing business as AJC						
		n/terminated		l	oom/suite		E Telephor	ne number	
		d return on pending	Number and street (or P O box if m 165 EAST 56TH STREET	51-4000					
	p.i.dati.	on ponumg	City or town, state or province, cour	itry, and ZIP or foreign postal code			(212) /	JI 4000	
			NEW YORK, NY 100222709				G Gross re	ceipts \$ 7	7,332,283
			F Name and address of principa	l officer	Н	(a) Is this	a group re	turn for	
			DAVID A HARRIS 165 EAST 56TH STREET				linates?		□Yes 🗹 No
			NEW YORK, NY 100222709			(b) Are all include		tes	☐ Yes ☐No
I Ta	x-exer	mpt status	✓ 501(c)(3)	insert no)				•	instructions)
J W	ebsit	te:► WW	W AJC ORG		—] Н	(c) Group	exemption	number	>
				П	LY	ear of forma	tion 1906	M State	of legal domicile NY
K For	n of or	rganızatıon	Corporation Trust Asso	cıatıon ⊔ Other ▶	-	car or rorma	1500	- Fortice	or regar dofficile 111
Pa	rt I	Sumi	mary		l				
			cribe the organization's mission o						
e)			ion is to ennance the wellbeing of I around the world	the jewish people and israel, and t	o advance	e numan rig	ints and de	mocratic	values in the United
E C	-								
Ĕ	-								
Activities & Governance	,	Check thu	s hov • D if the organization dis	continued its operations or dispose	d of more	than 25%	of its net a	ccetc	
<u>ن</u> س				g body (Part VI, line 1a)			or its net a	3	27
₹ 0	4	Number o	of independent voting members of	the governing body (Part VI, line 1	1b)			4	26
Ħ,	5	Total num	nber of individuals employed in ca	endar year 2017 (Part V, line 2a)				5	285
Ę	6	Total num	nber of volunteers (estimate if neo	essary)				6	1,390
٩	7a	Total unre	elated business revenue from Part	VIII, column (C), line 12				7a	0
	b	Net unrela	ated business taxable income fror	n Form 990-T, line 34			ı	7b	0
						Prio	r Year		Current Year
σį	8	Contributi	ions and grants (Part VIII, line 1h)			67,120,		52,529,883
Ravenua	l	-	•)	•		1,236,	647	1,191,978
Ę.	l			lines 3, 4, and 7d)			945,		4,391,342
	1		enue (Part VIII, column (A), lines				527, 69,829,		633,948 58,747,151
	_			st equal Part VIII, column (A), line	12)				
	l		nd similar amounts paid (Part IX, o	olumn (A), lines 1–3)			693,	911	554,925 0
	l		·	nefits (Part IX, column (A), lines 5-	· -10)		30,731,	288	33,583,001
Expenses	l	•	nal fundraising fees (Part IX, colu	, , , , , , , , , , , , , , , , , , , ,	-10)		477,		161,075
€	Ι.		aising expenses (Part IX, column (D), li				777,	205	101,073
五	l		penses (Part IX, column (A), lines		_		20,346,	108	19,863,619
	l		enses Add lines 13–17 (must equ	•			52,248,		54,162,620
	l	•	less expenses Subtract line 18 fro				17,580,		4,584,531
8 8						Beginning (of Current Y	'ear	End of Year
Net Assets or Fund Balances		-	1 (B 1 V 1 - 46)				47	100	100 === ===
Ass I Ba	l		ets (Part X, line 16)				175,770,		190,550,932
₹ E	l		lities (Part X, line 26)		•		31,807,		32,613,818
Pai			s or fund balances Subtract line 2 ature Block	21 from line 20			143,962,	281	157,937,114
				ined this return, including accompa	nvina sch	edules and	statement	s. and to	the best of my
know	ledge	and belief		Declaration of preparer (other tha					
any k	nowie	eage							
		*****	c .				8-08-06		
Sign		Signatu Signatu	ire of officer			Date			
Here	•		Hyne CFO						
		 	r print name and title		1			DTIN:	
.			rınt/Type preparer's name AVID M HIGHFILL	Preparer's signature DAVID M HIGHFILL	Date	l l	:k ∐ ıf	PTIN P0151789:	1
Paid			rm's name F KPMG LLP				employed 's EIN ► 13-	-5565207	
Pre		₹! 	rm's address ► 345 PARK AVENUE				ne no (212)		
Use	Un	iiy 📋	NEW YORK, NY 10154	0102			()	.,.,	
May t	he IP	S discuse		vn above? (see instructions)				▽	′es □ No
y .	+1/		recarri mici die preparer silor	aboro (occinion actions)				ا ن	110

Cat No 11282Y

Form	990 (2	017)					Page 2
Par	t III	Statement	of Program Servi	e Accomplis	hments		
		Check of Sche	dule O contains a resp	onse or note to	any line in this Part III		
1	Briefly	describe the o	organization's mission				
	around t						atic values in the United States ICH CAN BE FOUND ON AJC'S
2		-	, -		vices during the year wh	nich were not listed on	
	•		r 990-EZ?				. 🗌 Yes 🗹 No
_		•	ese new services on Sci				
3		-	3 ,	-	changes in how it condu	cts, any program	
							. □Yes ☑No
_			ese changes on Schedu				
4	Sectio	n 501(c)(3) an		ons are required	to report the amount of	argest program services, a f grants and allocations to c	
4a	(Code) (Expenses \$	19,535,952	including grants of \$	450,709) (Revenue \$	572,150)
	See Ad	ldıtıonal Data					
4b	(Code) (Expenses \$	13,093,853	ıncludıng grants of \$	38,837) (Revenue \$	381,432)
	See Ad	ldıtıonal Data					
4c	(Code) (Expenses \$	3,723,021	ıncludıng grants of \$	27,027) (Revenue \$	107,278)
	See Ad	ldıtıonal Data					
	(Code) (Expenses \$	4,427,240	ıncludıng grants of \$	38,352) (Revenue \$	131,118)
	PARTN LATING COLLEG (E G , I RELATI	ERS TO ADVANCE D-JEWISH LEADER CTIVELY WITH ITS COMBATING PROI IONSHIP OF JEWS	E SHARED INTERESTS AND RSHIP COUNCIL, FOR EXAI S PARTNERS AGAINST AN POSALS TO BOYCOTT ISRA	VALUES, AND TO MPLE, TO WORK TO TI-SEMITISM AND AEL) (2) CONTEMF THE STATE OF ISR	FURTHER UNDERSTANDING DEETHER ON ISSUES OF MU EXTREMISM, AND FOR THE PORARY JEWISH LIFE AJC STAEL AJC TAKES PUBLIC POSAGE	AJC CONVENED A MUSLIM-JENTUAL CONCERN AND IMPORTAN WELLBEING OF THE JEWISH PERTRIVES TO STRENGTHEN JEWIS	DALITIONS WITH LIKE-MINDED WISH ADVISORY COUNCIL AND A NCE TOGETHER, AJC ADVOCATES OPLE AND THE STATE OF ISRAEL SH CONTINUITY AND TO ENRICH THE A AND MISSIONS ADDRESSING THE
4d			ces (Describe in Sched	·			
	(Expe	nses \$	4,427,240 inc	uding grants of	\$ 38,3	52) (Revenue \$	131,118)
4e	Total	program serv	/ice expenses ▶	40,780,0	66		

Checklist of Required Schedules

Yes

Yes

Page 3

No

Nο

No

to provide advice on the distribution or investment of amounts in such funds or accounts?

Did the organization receive or hold a conservation easement, including easements to preserve open space.

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🛸

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

12a Did the organization obtain separate, independent audited financial statements for the tax year?

If "Yes," complete Schedule D, Parts XI and XII

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, Yes

6 7 8

Yes

No

Nο

Nο

Nο

Nο

No

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11b

11c

11d

11e

11f

12a

12b

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14a

14b

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Nο No Nο No

or X as applicable

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Page 4

Part IV	Checklist of Required Schedules (continued)		
		Voc	

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees, If "Yes,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

V	Checklist of Required Schedules (continued)		
		Yes	

20a 20b

Yes

Yes

No

Νo

Νo

No

Nο

20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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23

24a

24b

24c

24d

25a

25b

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28a

28b

28c

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35a

35h

36

37

Yes

Yes

Yes

Yes

Yes

Form 990 (2017)

orm	990 (2017)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 155			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
L	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►BE , GM , IS , FR , PL See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
·	If res, to line 3a of 3b, did the organization meronii 0000-1.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	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		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>

	550 (2017)			Page
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	' respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 27			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	: Code	⊋.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		.,	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4	Did the organization have a written document retention and destruction policy?	14	Yes	
L5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
l6a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
b	taxable entity during the year?	16a		No
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
L7	List the States with which a copy of this Form 990 is required to be filed AL , AR , CA , CT , FL , GA , HI , IL , KS , k , MS , NH , NJ , NM , NC , OR , PA , RI , SC			
L8	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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 books and records DANIEL GOLDWATER CONTROLLER 165 EAST 56TH STREET NEW YORK, NY 100222709 (212) 891-1473			

orm 990 (2	017)										Page 7
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										-
of compensa	of the organization's current off tion Enter -0- in columns (D), (E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's current key		•								
vho received organization	organization's five current high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's former office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all operation	of the organization's former dire , more than \$10,000 of reportab	ectors or trust le compensation	ees that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	9
	in the following order individua d employees, and former such p		ectors, i	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	(A) Name and Title	(B) Average hours per week (list any hours for related		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	related organizations		
See Additiona	al Data Table										

Form 990 (2017)	to Trustee	- Vav				224	11:0	heat Ca		- I Flevene (co	d)	Page 8
Part VII Section A. Officers, Direct (A) Name and Title	(B) Average hours per week (list any hours	Position than o	ion (do	(C) lo no lox, u	ot che unles	neck mess pers	nore	Rep comp fro	(D) portable pensation om the ization (W-	(E) Reportable compensation from related organizations (W-	(F) Estima amount compen from	ated of other sation
	for related organizations below dotted line)	S P	Institutional Trustee	Officer		Highest compensated employee	Former	1 2/100	99-MISC)	2/1099-MISC)	organizat relat organiza	on and
See Additional Data Table	!	-	-	\vdash	+	1	+			 	<u> </u>	
	<u></u>		<u> </u>	Ļ	+	<u> </u>	+	<u> </u>		<u> </u>		
	<u> </u>	-		_	1	-	 	<u> </u>				
	<u> </u> '	-	-	\vdash	+	_	+	-				
	-			\vdash	+	+	+	_			-	
			<u> </u>	<u></u>	†	<u> </u>	+	<u> </u>			<u> </u>	
			<u> </u>		\perp							
1b Sub-Total c Total from continuation sheets to Pad Total (add lines 1b and 1c)	art VII, Section	nA.			•	* *		3	3,582,013	0		639,145
Total number of individuals (including of reportable compensation from the compensation)	g but not limited	to thos				e) who	o rec	eived mo	ore than \$1	00,000		
3 Did the organization list any former of	officer director	or trust	+9e. k		-mpl	lovee,	ar h	ahest cc	mnensated	employee on	Yes	No
line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is	J for such individ	dual .	•	•	•		•			3	3	No
4 For any individual listed on line 1a, is organization and related organizations individual											4 Yes	
5 Did any person listed on line 1a receive services rendered to the organization?									ation or indi		5	No
Section B. Independent Contractor Complete this table for your five higher		der		- 4 6		re		2201000	than	±100 000 of comp		
from the organization Report compen											ensation (C	
Name a	(A) and business addre	355								(B) cription of services d event travel services	Comper	
12 NAHALAT YITZHAK ST TELAVIV												•= •
IS A B DATA CLIENT TRUST ACCOUNT									Mail Fulfillm	ent	+	536,408
PO BOX 170062 MILWAUKEE, WI 532178000				_	_		_					
JACKSON RIVER LLC 2535 13TH ST NW 005			_	_		_	_		Data Manag	gement and Web Design		464,639
WASHINGTON, DC 20009 MJV MECHANICAL									Bldg Engine	ers		430,184
18 MEADOW ST LOCUST VALLEY, NY 11560												
SUBJECT MATTER									Website Des Production	sign and Video	†	423,888
1201 NEW YORK AVE WASHINGTON, DC 20005 Total number of independent contractors	- (maluding hill	· -ot lin	+od	5-5 +l		+ad) who	Transported m	+b-> #100 000 c	£	
compensation from the organization ► 2		NOC	illeu .		1050	IISCC.	auc.	/e/ wine .	received	ofe than \$100,000 .	Form 99	0 (2017)

Part \		I Statement of	Revenue									rage 3
		Check if Schedul		a respo	onse or note t	o any line ir	n this Part VII	ı				🗆
						Tota	(A) al revenue	Rela ex fur	(B) ated or empt action renue	(C) Unrelated business revenue	exc tax u	(D) Revenue cluded from nder sections 512-514
	12	Federated campaigi	ns	1a	93	,300		101	renue			312-314
nts Ints		b Membership dues		1b								
3ra not	١,	c Fundraising events		1c	22,922	 !,868						
S. (d Related organizatio		1d	<u> </u>	<u>. </u>						
ia Ia		e Government grants (co		1e								
S. E		F All other contributions,										
ributions, Gifts, Grants Other Similar Amounts		and similar amounts no above		1f	29,513	1,715						
혈죑	١,	Noncash contribution	ons included									
Contributions, Gifts, Grants and Other Similar Amounts		ın lınes 1a-1f \$		3,66	57,330							
<u>ة</u> ك	_h	Total.Add lines 1a-1	.f		•		52,529,883					
ıle					Bus	siness Code						
V-N	2 a	REGISTRATION FEES				90009	'	186,163	1,18	36,163		
Service Revenue	b	SALE OF PUBLICATIONS				51119	90	5,815		5,815		
Š	C			_								
₹	d											
ram	e	All other program se						0		0	0	0
Program		, -				1,191,97	'8					
<u></u>		Total.Add lines 2a-2f			<u> </u>	•				1		
		Investment income (in similar amounts) .			nterest, and	other	1,471,33	5				1,471,335
	4	Income from investme	ent of tax-exe	mpt bo	ond proceeds	▶						
	5	Royalties				▶						
	_	Constant of the Constant of th	(ı) Rea	l	(II) Perso	nal						
	ьа	Gross rents	1,2	60,706								
	b	Less rental expenses	1	.08,337								
	_	: Rental income or	1 1	.52,369		0						
	·	(loss)		.52,505								
	d	Net rental income of	r (loss)	•		•	1,152,36	9				1,152,369
	_	C	(ı) Securit	ies	(II) Othe	er						
	/a	Gross amount from sales of assets other than inventory	19,€	24,289								
	b	Less cost or other basis and sales expenses	16,7	04,282								
	c	Gain or (loss)	2,9	20,007		0						
	d	l Net gain or (loss) .					2,920,00	7				2,920,007
Other Revenue	8a	Gross income from form (not including \$	22,922,868 ed on line 1c)	of	4.31	54.003						
ě	ŀ	Less direct expenses		a b		72,513						
7		: Net income or (loss)			· ·		-518,42	1				-518,421
Ě	9a	Gross income from g		es								
٦		See Part IV, line 19		a								
	ь	Less direct expense:	s	b								
		: Net income or (loss)			les	<u> </u>						
	10	aGross sales of invent returns and allowand	cory, less	a								
		Less cost of goods s		b								
		Net income or (loss) Miscellaneous		invent	ory Business C	ode C						
	11	a										
	b)			-			+				
	c	:								+		
	c	All other revenue .						0		0	0	0
	e	Total. Add lines 11a	-11d		٠	•						
	12	: Total revenue. See	Instructions									
						-	58,747,15	1	1,191,97	'8	0 For	5,025,290 m 990 (2017)

IV, line 22

4 Benefits paid to or for members

key employees . . .

section 4958(c)(3)(B) .

9 Other employee benefits .

. . .

e Professional fundraising services See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation
Check here ► ✓ if following SOP 98-2 (ASC 958-720)

federal, state, or local public officials .

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

g Other (If line 11g amount exceeds 10% of line 25, column

d Lobbying

f Investment management fees .

12 Advertising and promotion .

10 Payroll taxes . .

b Legal . . .

c Accounting .

13 Office expenses .

15 Royalties

17 Travel

16 Occupancy

23 Insurance .

<u>с</u> d

14 Information technology

20 Interest

21 Payments to affiliates . . .

expenses on Schedule O)

e All other expenses

7 Other salaries and wages

650,830

4,521,719

1,049,178

244,447

n

n

O

1,651

49,792

161.075

82,053

21.979

860,849

144,846

324,326

70,854

318,339

168,354

27,305

8,746,994

Form **990** (2017)

151.559

n

0

0

49,397

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Part IX Statement of Functional Expenses

2 Grants and other assistance to domestic individuals. See Part

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15

5 Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)											
Check if Schedule O contains a response or note to any	y line in this Part IX			🗆							
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses							
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	272,850	272,850									

0

0

0

282,075

2,939,160

22,290,585

358,126

6,467,332

1,527,798

325,568

248.961

126,010

161.075

318,081

318,918

3,107,519

2,865,012

2,349,816

5,682,180

1,119,146

275,348

122,868

928,644

0

0

0

n

54,162,620

344,452

2,075,548

0

n

282,075

1,723,369

16,509,038

290,344

4,804,923

1,145,849

174,881

149,377

126,010

289,454

293.896

602,246

1,556,724

2,372,577

2,233,409

5,287,453

590,128

185,466

40,780,066

192,893

0

0

122,868

1,767,129

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n

564,961

1,259,828

18,385

613,231

137,502

149,036

49,792

28,627

226,366

3.043

689,946

181,552

168,109

45.553

76,388

360,664

62,577

n

0

0

0

0

4,635,560

n

n

n

1

2 3

4

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

Liabilities 22 0

0

2.316.950

9,132,261

68.751.883

61.185.731

190,550,932

4.236,290

1,257,665

0

0

0

0

O

27.119.863

69.298.274

157,937,114

190.550.932

Form **990** (2017)

End of year

Page **11**

Part II of Schedule L

Inventories for sale or use .

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Notes and loans receivable, net .

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11 .

Other assets See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

basis Complete Part VI of Schedule D

Intangible assets

Accounts payable and accrued expenses

			· · · · · · · · · · · · · · · · · · ·
Cash-non-interest-bearing	31,060,111	1	17,301,994
Savings and temporary cash investments	4,953,081	2	5,935,726
Pledges and grants receivable, net	32,714,940	3	25,926,387

Accounts receivable, net . . . Loans and other receivables from current and former officers, directors,

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

trustees, key employees, and highest compensated employees Complete Part II of Schedule L

10a

10b

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

32,791,910

23.659.649

Beginning of year

0

0

0

0

٥ 13

0 14

0 18

0 20

0 21

0 22 0

26.613.121

65.521.274

143,962,581

175,770,190

9

10c

11

12

15

16

17

19

23

24

25

29

30

31

32

33

34

933.226

6.976.224

40.875.294

58.257.314

175,770,190

4,282,010

912,478

- Other liabilities (including federal income tax, payables to related third parties, 25 and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 31,807,609 Total liabilities. Add lines 17 through 25 . 26 32,613,818 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and complete lines 27 through 29, and lines 33 and 34. 27 22,788,839 27 28,023,000 Unrestricted net assets 28 55.652.468 28 60,615,840 Temporarily restricted net assets
- Fund Balances 29 Assets or 30 31 32 Net 33

34

Page **12**

9.988.331

No

Nο

No

Form 990 (2017)

Yes

Yes

Yes

2a

2b

2c

3a

3b

0

5 6

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Form 990 (2017)

Schedule O

☐ Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

5 7

8 Other changes in net assets or fund balances (explain in Schedule O) 9 -598,329 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 157,937,114 Part XII **Financial Statements and Reporting**

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Additional Data

Software ID: 17005876

Software Version: 2017v2.2

EIN: 13-5563393

Name: AMERICAN JEWISH COMMITTEE

Form 990 (2017)

Form 990, Part III, Line 4a:

PETITIONS, AND MEDIA CAMPAIGNS

AND RELIGIOUS LEADERS AROUND THE WORLD AJC'S UNIQUE GLOBAL ARCHITECTURE SPANS SIX CONTINENTS AS A RESULT, AJC UNDERSTANDS THE ISSUES IN DEPTH AND MAINTAINS RELATIONSHIPS WITH MANY OF THE WORLD'S KEY DECISION-MAKERS, ENABLING IT TO HAVE AN IMPACT ON POLICY DECISIONS AJC MAINTAINS INTERNATIONAL INSTITUTES THAT CARRY OUT ITS ADVOCACY WORK THROUGHOUT THE WORLD, INCLUDING IN AFRICA, ASIA, EUROPE, LATIN AMERICA, AND THE MIDDLE EAST AJC HAS OFFICES OR REPRESENTATION IN BERLIN, BRUSSELS, JERUSALEM, PARIS, ROME, SAO PAULO, SOFIA, SOUTHEAST ASIA, TOKYO, WARSAW, AND NEW DELHI, AND HAS FORMAL PARTNERSHIP AGREEMENTS WITH MORE THAN 30 JEWISH COMMUNITY ORGANIZATIONS AROUND THE WORLD AJC'S WASHINGTON, D.C.-BASED OFFICE OF GOVERNMENT AND INTERNATIONAL AFFAIRS COORDINATES THE ORGANIZATION'S INTERNATIONAL OFFICES AND INSTITUTES. AS WELL AS ITS ENGAGEMENT WITH THE U.S. ADMINISTRATION AND CONGRESS. MUCH OF THIS WORK CONSISTS OF FACE-TO-FACE MEETINGS WITH ADMINISTRATION OFFICIALS AND DIPLOMATS, AND MEMBERS OF CONGRESS AND THEIR STAFF, ORGANIZATION OF ADVOCACY MISSIONS OVERSEAS AND PUBLIC EVENTS IN THE U.S. AND OTHER COUNTRIES TO ADVANCE ADVOCACY OBJECTIVES, PREPARATION OF BRIEFING MATERIALS AND MESSAGES FOR USE BY AJC MEMBERS AND STAFF ACROSS THE COUNTRY AND AROUND THE WORLD IN ADVOCACY SETTINGS, COMPOSING LETTERS OF SUPPORT OR CONCERN TO OFFICIALS OF THE U.S. AND OTHER GOVERNMENTS, CONTACT

WITH LOCAL AND STATE OFFICIALS ON DOMESTIC AND, WHEN APPLICABLE, INTERNATIONAL CONCERNS, COALITION-BUILDING WITH ORGANIZATIONS AND ASSOCIATIONS THAT SHARE AJC'S VALUES, COMMENTING ON PENDING LEGISLATION, POLICY RESEARCH EMPLOYED IN THE PREPARATION OF AMICUS BRIEFS, ONLINE

GOVERNMENT AND INTERNATIONAL AFFAIRS AJC IS A LEADING GLOBAL JEWISH ADVOCACY ORGANIZATION. WITH ACCESS TO DIPLOMATS. GOVERNMENT OFFICIALS.

REGIONAL OFFICES AJC MAINTAINS 22 REGIONAL OFFICES THROUGHOUT THE U S THESE OFFICES ESTABLISH AND BUILD KEY RELATIONSHIPS WITH PUBLIC OFFICIALS, MEMBERS OF CONGRESS, AND LOCAL REPRESENTATIVES OF FOREIGN GOVERNMENTS REGIONAL OFFICES FOSTER TIES WITH INTER-RELIGIOUS AND INTERGROUP ORGANIZATIONS, AS WELL AS CIVIL SOCIETY GENERALLY, IN ORDER TO BUILD COALITIONS AND MOBILIZE THE JEWISH COMMUNITY TO ADVOCATE ON AJC'S PRIORITY ISSUES IN 2017. THESE ISSUES INCLUDED AFFIRMING ISRAEL'S PLACE IN THE WORLD. COMBATING GLOBAL ANTI-SEMITISM. COUNTERING THE SPREAD OF

RADICALISM AND EXTREMISM, AND FOSTERING AMERICAN GLOBAL LEADERSHIP REGIONAL OFFICES PERIODICALLY ENGAGE IN NATIONAL CAMPAIGNS TO RAISE PUBLIC AWARENESS OF AJC PRIORITIES. SUCH AS THE MAYORS UNITED AGAINST ANTI-SEMITISM INITIATIVE AND GOVERNORS UNITED AGAINST BDS (BOYCOTT, DIVESTMENT,

Form 990, Part III, Line 4b:

AND SANCTIONS) REGIONAL OFFICES ALSO HELP RAISE FUNDS FOR AJC

COMMUNICATIONS USING A RANGE OF TRADITIONAL AND NEW MEDIA TOOLS, AJC GENERATES AWARENESS AND PROVIDES EXPERT RESOURCES TO AMPLIFY OUR ADVOCACY EFFORTS AJC'S ANALYSIS AND PESSPECTIVE ON POLICY MATTERS IS CONVEYED VIA PRESS RELEASES, OP-EDS IN NATIONAL AND INTERNATIONAL MEDIA, AND AJC STAFF EXPERTS' COMMENTARY CITED BY MAJOR NEWS OUTLETS THROUGH ROBUST SOCIAL MEDIA ACCOUNTS IN ENGLISH. FRENCH, SPANISH, AND GERMAN.

AJC INTERACTS FREQUENTLY WITH OUR FOLLOWERS, INCLUDING MANY DIPLOMATS, ELECTED OFFICIALS, AND MEDIA ELITES THEY IN TURN SHARE AJC'S ADVOCACY

MESSAGES WITH THEIR CONSTITUENCIES, ALLOWING AJC TO REACH AND ENGAGE MILLIONS AROUND THE GLOBE

Form 990, Part III, Line 4c:

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation is both an officer and a week (list from the compensation from related director/trustee) any hours organization (Worganizations from the

organization and related organizations

167,187

0

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0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)
DAVID HARRIS	60 0								
CHIEF EXECUTIVE OFFICER (SEE SCHEDULE J)	0 1	X		X				689,725	0
JOHN M SHAPIRO	20 0								
PRESIDENT		X		Х				0	0

10 0

0.0 5 0

0.0 5 0

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and Independent Contractors

SUZANNE D JAFFE

FRANK LINDE

LINDA MIRELS

ROBERT L NEWMARK

TREASURER/SECRETARY

ASSOCIATE TREASURER/BUDGET COMMITTEE

ASSOCIATE CHAIR, BOARD OF TRUSTEES

CHAIR, LEADERSHIP DEVELOPMENT

CHIEF EXECUTIVE OFFICER (SEE SCHEDULE J)	0 1	X	×		689,725	0	
JOHN M SHAPIRO	20 0	.,					
PRESIDENT	0 0	X	×		U	0	
HARRIET P SCHLEIFER	5 0	V	<i>,</i>		0		
CHAIR, BOARD OF GOVERNORS	0.0	X	×		U	٥	
MATTHEW BRONFMAN	2 0	×	х		0	0	

	0.0						1
HARRIET P SCHLEIFER	5 0	V	,				0
CHAIR, BOARD OF GOVERNORS	0 0	*	^		U	U	
MATTHEW BRONFMAN	2 0	.,	,				
CHAIR, BOARD OF TRUSTEES	0 0	Х	*		U	U	0
MATTHEW J COEN	5 0		V				
CHAIR, MARKETING & COMMUNICATIONS		Х	*		U	U	0

PRESIDENT	0 0						
HARRIET P SCHLEIFER	5 0	ζ.			0	0	
CHAIR, BOARD OF GOVERNORS	0 0	Х	[*]		U	U	U
MATTHEW BRONFMAN	2 0		.,				
CHAIR, BOARD OF TRUSTEES	0 0	Х	×		U	U	U
MATTHEW J COEN	5 0		,,				
CHAIR, MARKETING & COMMUNICATIONS	0.0	Х	×		U	0	U

MATTHEW BRONFMAN	2 0	×	v		0	0	0
CHAIR, BOARD OF TRUSTEES	0 0	^	^			0	
MATTHEW J COEN	5 0						
CHAIR, MARKETING & COMMUNICATIONS	0 0	X	X		0	0	0
HENRY DUBINSKY	5 0						
CHAIR, AUDIT COMMITTEE	0.0	Х	×		0	0	0

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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other hours per than one box, unless person compensation compensation week (list is both an officer and a from the from related compensation from the

0

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0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours		lirect			ee)	1	organization (W-	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
MICHAEL TICHNOR	5 0	×		x				0	n	0
CHAIR, REGIONAL OFFICES COMMITTEE	0 0			Ĺ^					9	0
STEVEN J WISCH	5 0	x		x					0	0
ASSOCIATE CHAIR, BOARD OF TRUSTEES	0 0								0	0
STEVEN L ZELKOWITZ	5 0		·	x				0	0	
CHAIR, PROGRAM COORDINATING COMMITTEE	0 0	×							U	0

THE TENTON		X	Ιx		
CHAIR, REGIONAL OFFICES COMMITTEE	0 0	^			
STEVEN J WISCH	5 0				
ASSOCIATE CHAIR, BOARD OF TRUSTEES	0 0	×	X		
STEVEN L ZELKOWITZ	5 0				
CHAIR, PROGRAM COORDINATING COMMITTEE	0 0	×	×		
RENE-PIERRE AZRIA	2 0				
EC MEMBER	0 0	X			

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and Independent Contractors

ROBERTA S BARUCH

RICHARD L BERKMAN

EC MEMBER

EC MEMBER

NED DUBILO

EC MEMBER

EC MEMBER

EC MEMBER

EC MEMBER

MARTIN KRALL

MARVIN ISRAELOW

ANTHONY E MEYER

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person hours per compensation compensation amount of other is both an officer and a week (list from the from related compensation

from the organization and related organizations

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0

39,972

37,593

50,062

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0

285,010

232,909

281,991

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	(direct	or/tı	ruste	ee)		organization (W-	organizations	ĺ
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	
BEN A PLOTKIN	5 0									Г
EC MEMBER	0 0	×						J	0	
DEBRA SMITH SAIDOFF	5 0									Γ
EC MEMBER	0.0	×							0	
JEFFREY E STONE	5 0	l						_	_	
		X	l	l				0	0	1

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0.0 5 0

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......

and Independent Contractors

KIM J PIMLEY

ALLAN J REICH

RICHARD M HYNE

MARC D STERN

JULIE SCHAIR

GENERAL COUNSEL

CHAIR, NATIONAL POLICY

CHIEF FINANCIAL OFFICER

CHAIR, INTERNATIONAL RELATIONS

ASSOCIATE EXECUTIVE DIRECTOR/MANAGING

DIRECTOR, RESOURCE DEVELOPMENT

			्र इ.		sat 6d			
BEN A PLOTKIN	5 0	x				0	0	
EC MEMBER	0 0						U	
DEBRA SMITH SAIDOFF	5 0	×				0	0	
EC MEMBER	0.0					0	J	
JEFFREY E STONE	5 0							
EC MEMBER	0 0	×					J	
DAVID W INLANDER	5 0							
CHAIR, INTERRELIGIOUS AFFAIRS	0 0	×						
ROBERT E LAPIN	5 0							
CHAIR, CONTEMPORARY JEWISH LIFE	0.0	×				0	l "	

(A) (B) (D) (E) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

ROBERT LEIKIND

DINA SIEGEL VANN

DIRECTOR, BILLA

MICHAEL GILBERT

REGIONAL DIRECTOR, AJC BOSTON

DIRECTOR REGIONAL OFFICE ADVANCEMENT

	ally floars	,	an ccc	.01, .1	ust	cc,		organization (1)	organizations	1 110111.1116 .
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
JASON ISAACSON ASSISTANT EXEC DIRECTOR FOR POLICY/MANAGING DIRECTOR OF THE OGIA	45 0 0 0				×			258,759	0	45,457
DANIEL ELBAUM ASSISTANT EXECUTIVE DIRECTOR/MANAGING DIRECTOR, REGIONAL OFFICES	45 0 0 0				х			229,218	0	12,615

DANIEL ELBAUM	45 0							
ASSISTANT EXECUTIVE DIRECTOR/MANAGING DIRECTOR, REGIONAL OFFICES	0 0			Х		229,218	0	
STEVE BAYME	40 0							
				Х		261,767	0	
DIR, CONTEMPORARY JEWISH LIFE	0 0							
JANET BECKER	45 0							
				~		270 726	0	

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312 VE B/(1112			x		261,767	n	35,243
DIR, CONTEMPORARY JEWISH LIFE	0 0		^		201,707	J	33,213
JANET BECKER	45 0						
ASSISTANT EXECUTIVE DIRECTOR/MANAGING DIRECTOR, STRATEGIC IMPLEMENTATION & HR	0.0		Х		270,726	0	40,927
RABBI DAVID ROSEN	40 0						

47,174

38,334

42,195

JANET BECKER	45 0						
ASSISTANT EXECUTIVE DIRECTOR/MANAGING	•••••		Х		270,726	0	40,927
DIRECTOR, STRATEGIC IMPLEMENTATION & HR	0 0						
RABBI DAVID ROSEN	40 0						
DIRECTOR OF INTERNATIONAL INTERRELIGIOUS				Х	234,828	0	58,240
AFFAIRS	0.0						

ASSISTANT EXECUTIVE DIRECTOR/MANAGING DIRECTOR, STRATEGIC IMPLEMENTATION & HR	0 0		X		270,726	0	40,92
RABBI DAVID ROSEN	40 0						
DIRECTOR OF INTERNATIONAL INTERRELIGIOUS AFFAIRS	0.0			Х	234,828	0	58,24
AFFAIRS	10.0						

		ı	 				
RABBI DAVID ROSEN	40 0						
DIRECTOR OF INTERNATIONAL INTERRELIGIOUS	•••••			Х	234,828	0	58,240
AFFAIRS	0 0						
ROBIN LEVENSTON	40 0						

DIRECTOR OF INTERNATIONAL INTERRELIGIOUS AFFAIRS	0 0					_	33,2 13
ROBIN LEVENSTON	40 0						
				Х	212,899	0	24,146
EXECUTIVE DIRECTOR, PROJECT INTERCHANGE	1 00						·

210,743

207,463

205,975

efile	e GRA	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 93493218009468			
SCI	1ED	ULE A	Public	Charity Statu	s and Dul	nlic Sunn	ort	OMB No 1545-0047		
	m 990		Complete if the	organization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) o empt charitable 990 or Form 99	organization or trust. 10-EZ.	r a section	2017		
		the Treasury	► Information ab	out Schedule A (Form www.irs.a	990 or 990-EZ ov/form990.) and its instru	ıctions is at	Open to Public Inspection		
Name	e of th	n e organiza WISH COMMIT					Employer identific	ation number		
							13-5563393			
Pal			for Public Charity Sta a private foundation becau				See instructions.			
1	Gal2		onvention of churches, or	`	•	,	(A)(i).			
2		•	scribed in section 170(b							
3			or a cooperative hospital se		,	• •				
4		·	esearch organization opera	_			•	nter the hospital's		
		name, city,	and state	-	•			<u> </u>		
5		An organiza (b)(1)(A)	ation operated for the bene (iv). (Complete Part II)	efit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170		
6		A federal, s	tate, or local government	or governmental unit de	scribed in sectio	on 170(b)(1)(<i>A</i>	۱)(v).			
7	✓	_	ation that normally receive (O(b)(1)(A)(vi). (Comple	•	s support from a	governmental u	ınıt or from the gener	al public described in		
8		A communi	ty trust described in secti	on 170(b)(1)(A)(vi)	(Complete Part I	I)				
9			ural research organization rant college of agriculture					ege or university or a		
0		from activit	ation that normally receive ties related to its exempt fi income and unrelated bus see section 509(a)(2). ((unctions—subject to cer liness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its si	upport from gross		
.1			ation organized and operat		r public safety S	ee section 509	(a)(4).			
2		more public	ation organized and operat ly supported organizations through 12d that describe	s described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a			
а		Type I. A so	supporting organization op- n(s) the power to regularly Part IV, Sections A and	erated, supervised, or covariated, and covariated are also consisted and consisted are also consisted as a major consisted area consisted as a major consisted area consisted as a consisted area consist	ontrolled by its s	upported organi	zation(s), typically by			
b		manageme	supporting organization so nt of the supporting organ plete Part IV, Sections A	zation vested in the sar						
С			unctionally integrated. A					ited with, its		
d		Type III n functionally	on-functionally integrated the organization of	ed. A supporting organion generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported organ			
e		Check this	box if the organization rec	eived a written determir	nation from the I		pe I, Type II, Type II	I functionally		
f	Enter		or Type III non-functional of supported organization		organizacion					
g	Provid	de the follow	ing information about the	supported organization(s)					
	(i) N	lame of supported organization (ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions))			(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
					Yes	No				
			1							
Tota			tion Act Notice, see the	<u> </u>	Cat No 11285		 Schedule A (Form 9	<u> </u>		

▶Ⅵ

▶□

Schedule A (Form 990 or 990-EZ) 2017

▶□

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 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 Calendar vear

	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	51,994,897	48,355,580	47,969,581	67,120,436	52,529,883	267,970,377
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
	Total. Add lines 1 through 3	51,994,897	48,355,580	47,969,581	67,120,436	52,529,883	267,970,377
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						20,133,565
6	Public support. Subtract line 5						247,836,812
_	from line 4						247,030,012
S	ection B. Total Support	Г					
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) ⊤otal
7	Amounts from line 4	51,994,897	48,355,580	47,969,581	67,120,436	52,529,883	267,970,377
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,374,954	1,893,473	1,939,512	2,087,712	2,732,041	10,027,692
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	0	0	546,679	0	0	546,679
11	Total support. Add lines 7 through 10						278,544,748
12		etc (see instruction	ons)	I		12	5,734,499
13	First five years. If the Form 990 is fo	or the organization	's first, second, thu	d. fourth, or fifth	tax vear as a sect	ion 501(c)(3) orga	
	check this box and stop here	-			•	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·
S	ection C. Computation of Publi						
	Public support percentage for 2017 (li		_	olumn (f))		14	88 98 %
	Public support percentage for 2016 Sc					15	89 75 %
	33 1/3% support test—2017. If the			n line 13, and line	e 14 is 33 1/3% or		

	the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	0	0	546,679	0	0	

b 33 1/3% support test-2016. 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-2017. 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

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

h 10%-facts-and-circumstances test—2016. 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

and stop here. The organization qualifies as a publicly supported organization

organization

instructions

supported organization

box and stop here. The organization qualifies as a publicly supported organization

Р	art III Support Schedule fo					_	_
	(Complete only if you o						er Part II. If
	the organization fails to ection A. Public Support	o quality under	the tests listed	pelow, please co	ompiete Part II.)	
	Calendar year						<i>(</i> 0 =)
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
5	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b Public support. (Subtract line 7c						
8	from line 6)						
Se	ection B. Total Support		l	L		l	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(0) 2013	(d) 2010	(e) 2017	(I) Iotai
9							
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)						
13							
14	11, and 12) First five years. If the Form 990 is for	r the organization	ı n's fırst. second. tl	ı nırd. fourth, or fıft	h tax vear as a se	ction 501(c)(3) o	rganization.
	check this box and stop here		,	,,,	,		▶ □
Se	ection C. Computation of Public	Support Perce	entage				
15	Public support percentage for 2017 (li			column (f))		15	
16	Public support percentage from 2016	Schedule A, Part I	II, line 15			16	
	ection D. Computation of Invest	ment Income	Percentage			<u> </u>	
17	Investment income percentage for 20			line 13, column (f	f))	17	
18	Investment income percentage from 2	2016 Schedule A,	Part III, line 17			18	
	331/3% support tests—2017. If the			on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶□
	33 1/3% support tests—2016. If the	•					· —
,	not more than 33 1/3%, check this bo	-			*		▶□
20	Private foundation. If the organizati	-	-		· · · · · -		▶□
							. —

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	·				
	determination					
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked 12a or 12b in Part I, answer (b) and (c) below					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					

				3.		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use					
		3с				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below					
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\overline{}$			
	supervised by or in connection with its supported organizations	4b				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections					
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes		$\overline{}$			
		4c				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and					

			, ,				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked 12a or 12b in Part I, answer (b) and (c) below	4a					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b					
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support						
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes						
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the						
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)						

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in Part VI.	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9	
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c			
	ection B. Type I Supporting Organizations				
			Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year				
_		1			
2	2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization				
5	ection C. Type II Supporting Organizations				
	cetion c. Type 11 Supporting Organizations		Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the				
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1			
S	ection D. All Type III Supporting Organizations				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)				
		2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard				
s	ection E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a			
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b			
3	Parent of Supported Organizations Answer (a) and (b) below.				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a			
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b			

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Qualified set-aside amounts (prior IRS approval require			
Other distributions (describe in Part VI) See instructio			
Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to wh details in Part VI) See instructions	sive (provide		
Distributable amount for 2017 from Section C, line 6			
Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
	Other distributions (describe in Part VI) See instruction Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to whose details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Fycess Distributions Underdistributions

details in Part VI) See instructions			
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			
b From 2013			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

Schedule A (Form 990 or 990-EZ) (2017)

i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

instructions)

See instructions

3j and 4c 8 Breakdown of line 7

Schedule A	(Form 990 or 990-E ₂	2) 201/ Page 8						
Part VI	Section A, lines 1, Part IV, Section D,	formation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See						
	Facts And Circumstances Test							
990 Sche	dule A, Supplem	ențal Information						
Re	turn Reference	Explanation						
Schedule A	A. Part II. Line 10	DESCRIPTION - LEASE TERMINATION, COLUMN A - , COLUMN B - , COLUMN C - 545877 0, COLUMN D -						

, COLUMN E - , COLUMN F - 545877 0, DESCRIPTION - OTHER INCOME, COLUMN A - , COLUMN B - , Other Income

COLUMN C - 802 0, COLUMN D - , COLUMN E - , COLUMN F - 802 0,

Schedule A (Form 990 or 990-EZ) 2017

SCHEDULE C

(Form 990 or 990-

Department of the Treasury

EZ)

5

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493218009468

Open to Public Inspection

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** AMERICAN JEWISH COMMITTEE 13-5563393 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes ☐ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregate fund or a political action committee (PAC) If additional space is needed, provide information in Part IV									
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-				
1									
2									
3									
1									
5									

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount

Did the filing organization file Form 1120-POL for this year?

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

Par		ganization is exempt under section 501(c)(3) and has NOT fi	led			
	•	Form 5768 (election under section 501(h)).				
For ea activit	·	ough 11 below, provide in Part IV a detailed description of the lobbying	(a Yes	No	(b	
1		anization attempt to influence foreign, national, state or local legislation, e public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Yes			
b		e compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?	e compensation in expenses reported on lines to through 11).	103	No		
d	Mailings to members, legislators,	or the public?	Yes	NO		23,97
e	Publications, or published or broad	·	163	No		23,97
f	Grants to other organizations for I			No		
g		er staffs, government officials, or a legislative body?	Yes	110		102,04
h	•	conventions, speeches, lectures, or any similar means?	163	No		102,04
i	Other activities?	, conventions, specenes, receares, or any similar means		No		
j	Total Add lines 1c through 1i		-	-110		126,01
, 2a	_	he organization to be not described in section 501(c)(3)?		No		120,01
	If "Yes," enter the amount of any	, , , ,				
		tax incurred by organization managers under section 4912		-		
		a section 4912 tax, did it file Form 4720 for this year?		-		
		ganization is exempt under section 501(c)(4), section 501(c))(5), o	r section	1	
					Yes	No
1	Were substantially all (90% or mo	ore) dues received nondeductible by members?		1		
2	Did the organization make only in	-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carr	y over lobbying and political expenditures from the prior year?		3		
1	and if either (a) Boanswered "Yes." Dues, assessments and similar an	OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	III-A,	line 3, i	s	
2	Section 162(e) nondeductible lobbe expenses for which the section	oying and political expenditures (do not include amounts of political n 527(f) tax was paid).				
а	Current year		2a			
	Carryover from last year		2b			
	Total		2c			
3	,	ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4		unt on line 2c exceeds the amount on line 3, what portion of the excess does er to the reasonable estimate of nondeductible lobbying and political	4			
5	· ·	political expenditures (see instructions)	5			
Pa	rt IV Supplemental Info	ormation				
Prov	ide the descriptions required for Pa	art I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list),	Part II-	A, lines 1	and 2 (s	ee
	Return Reference	Explanation				
Schar		DURING 2017, AJC SOUGHT TO INFLUENCE STATE, FEDERAL, AND NATIONA	I POLIC	V THROUG	H DIRE	
	RIPTION OF THE LOBBYING ITY	CONTACT WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS CONTACT WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS LEVEL AJC STAFF AND LAY LEADERS HELD MEETINGS ON A REGULAR BASIS CONTACTING FEDERAL AND STATE AGENCY AND ELECTED OFFICIALS REGAILEGISLATION, AJC'S ACTIVITIES FOCUSED PRINCIPALLY ON FOREIGN AFFAIS SANCTIONING HEZBOLLAH AND HAMAS AS TERRORIST ORGANIZATIONS AN COOPERATION), MEASURES DIRECTED AGAINST BOYCOTT OF, DIVESTMENT AGAINST ISRAEL, IMMIGRATION POLICY (INCLUDING SUPPORT OF COMPRE INITIATIVES RELATING TO CIVIL RIGHTS, CIVIL LIBERTIES, AND RELIGIOUS	AT THE WITH T RDING E RS LEGI ID SUPPO FROM, HENSIVE	STATE ANTHESE IND XISTING (SLATION ORT FOR U AND SANG REFORM	ID FEDE DIVIDUA DR PENI (INCLUI J S -ISR CTIONS	RAL LS IN DING DING
	RIPTION OF THE LOBBYING ITY	DURING 2017, AJC SOUGHT TO INFLUENCE STATE, FEDERAL, AND NATIONA CONTACT WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS LEVEL AJC STAFF AND LAY LEADERS HELD MEETINGS ON A REGULAR BASIS CONTACTING FEDERAL AND STATE AGENCY AND ELECTED OFFICIALS REGAI LEGISLATION, AJC'S ACTIVITIES FOCUSED PRINCIPALLY ON FOREIGN AFFAI SANCTIONING HEZBOLLAH AND HAMAS AS TERRORIST ORGANIZATIONS AN COOPERATION), MEASURES DIRECTED AGAINST BOYCOTT OF, DIVESTMENT AGAINST ISRAEL, IMMIGRATION POLICY (INCLUDING SUPPORT OF COMPRE INITIATIVES RELATING TO CIVIL RIGHTS, CIVIL LIBERTIES, AND RELIGIOUS	AT THE WITH T RDING E RS LEGI D SUPPO FROM, HENSIVE	STATE ANTHESE INC XISTING (SLATION ORT FOR U AND SANG REFORM	ID FEDE IVIDUA DR PENI (INCLUI J S -ISR CTIONS	RAL LS IN DING DING RAEL

As Filed Data efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

Supplemental Financial Statements

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

DLN: 93493218009468 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

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

Inspection Employer identification number

AMI	ERICAN JEWISH COMMITTEE				13-5	5563393
Pa	rt I Organizations Maintaining Donor Advi					
	Complete if the organization answered "Ye	·		IV, line 6. sed funds	ı	(b)Funds and other accounts
1	Total number at end of year	(a) Dono	auv	sea runus		(b) Funds and other accounts
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
					<u> </u>	Sunda anakha
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex			ets neid in donor ac	avisea i	runds are the
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?					
Pa	rt III Conservation Easements. Complete if th	ne organization a	nswe	red "Yes" on Fori	m 990), Part IV, line 7.
1	Purpose(s) of conservation easements held by the organ	nızatıon (check all t	hat a	pply)		
	Preservation of land for public use (e.g., recreation	n or education)		Preservation of ar	n histor	rically important land area
	☐ Protection of natural habitat	•	П			d historic structure
			_	Trescrivation of a	cordino	a miscorie structure
_	Preservation of open space	16.1			,	
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	ion co	intribution in the fo	rm of a	a conservation Held at the End of the Year
а	Total number of conservation easements				2a	neid at the End of the Tear
b	Total acreage restricted by conservation easements				2b	
c	Number of conservation easements on a certified histori	c structure included	l ın (a	1)	2c	
d	Number of conservation easements included in (c) acqui	red after 8/17/06,	and n	ot on a historic	2d	
•	structure listed in the National Register					
3	Number of conservation easements modified, transferre tax year •	ed, released, exting	uisne	a, or terminated by	tne or	ganization during the
4	Number of states where property subject to conservation	on easement is loca	ted 🕨			_
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		ng, ır	spection, handling	of viola	ations,
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of v	olatio	ns, and enforcing c	onserv	ation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violation	ns, a	nd enforcing conser	vation	easements during the year
8	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(II)?	above satisfy the i	equir	ements of section 1	.70(h)((4)(B)(I) ☐ Yes ☐ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the org				
Par	t III Organizations Maintaining Collections Complete if the organization answered "Ye				ner Sii	milar Assets.
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar	public exhibition, e	ducat	ion, or research in		
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1					▶\$
C	ii)Assets included in Form 990, Part X					▶ \$
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS:				ancıal g	
а	Revenue included on Form 990, Part VIII, line 1	110 (NOC 990) Tela	ang t	s arese reins		▶ \$
b	Assets included in Form 990, Part X					▶ \$
	Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.		Cat No	52287	BD Schedule D (Form 990) 20

Sche	dule D	(Form 990) 2017											Page 2
Par	1111	Organizations Ma	aintaining Col	lections of Art,	Histori	cal Tr	eası	ures, or	r Othe	r Similar	Assets (continued)	
3	_	the organization's acq (check all that apply)	uisition, accessioi	n, and other records	s, check	any of t	he fo	ollowing t	hat are	a sıgnıfıcar	nt use of its	collection	
а		Public exhibition			d		Loan	or excha	ange pro	grams			
b		Scholarly research			е		Othe	er					
c		Preservation for future	e generations										
4	Provid Part >	de a description of the	organızatıon's col	lections and explair	n how the	ey furth	er th	e organız	ation's	exempt pur	pose in		
5		g the year, did the org s to be sold to raise fur								mılar	☐ Ye	s 🗆 N	o
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.			orm 990	, Part :	IV, I	ine 9, or	r repor	ted an am			Part
1a		e organization an agent led on Form 990, Part I		an or other interme	diary for	contrib	ution	ns or othe	er asset:	s not	☐ Ye	s 🗆 N	O
b	If "Ye	s," explain the arrange	ement in Part XIII	and complete the f	following	table					Amount		_
c	Begin	ning balance							1c				_
d	Addıt	ons during the year							1d				_
е	Dıstrı	butions during the year	r						1e				_
f	Endın	g balance							1f				_
2a		e organization include	an amount on Fo	rm 990, Part X, line	≘ 21, for	escrow	or cu	ustodial a	ccount	iability?	☐ Ye	s 🗆 N	- 0
b	If "Ye	s," explain the arrange	ment in Part XIII	Check here if the	evnlanat	ion has	heen	nrovideo	d in Parl	XIII			
	rt V	Endowment Fund										<u> </u>	
			asi compiced ii	(a)Current year		rior year		(c)Two ye			years back	(e)Four year	s back
1a	Beginn	ing of year balance .		81,401,339		71,657,	-		79,561,2 6		80,436,448		205,956
b	Contrib	outions		24,283,295		7,982,	,610		95,23	17	484,827	1,3	329,561
С	Net inv	estment earnings, gair	ns, and losses	13,452,362	!	5,018,	,535	-	-3,910,86	i9	1,923,814	10,5	552,814
		or scholarships		335,807	,	413,	,428		447,81	.3	405,072	3	305,024
	Other e	expenditures for facilities		3,805,812	:	2,702,	,171		3,539,26	52	2,765,854	3,2	242,551
f	Admını	strative expenses .		318,081		141,	,207		101,55	i8	112,898	.1	104,308
g	End of	year balance		114,677,296	,	81,401,	,339	7	71,657,00	10	79,561,265	80,4	136,448
2	Provid	de the estimated perce	ntage of the curre	ent vear end halanc	e (line 1	a colun	nn (a	1) held a	ς				
a		designated or quasi-e	-	19 71 %	.c (III.c 1	g, colui	···· (G	ij) neid d	-				
b		anent endowment >	60 43 %										
		orarily restricted endov		86 %									
С	•	ercentages on lines 2a											
3a	•	nere endowment funds		•	ation tha	t are he	eld ar	nd admini	stered f	or the			
		ization by										Yes	No
	(i) ur	related organizations									3	a(i) Yes	
		elated organizations .										ı(ii)	No
b		s" on 3a(II), are the re	-	•			•				;	3b	
4	_	ibe in Part XIII the inte			owment	funds							
Pa	rt VI	Land, Buildings, Complete if the or			vrm 000	Dort 1	T\/	ıno 11a	Soo E	orm 000	Dart V Ju	0.10	
	Descri	ption of property	(a) Cost or oth (investme	er basis (b) Cos	st or other					depreciation	_	d) Book value)
1-	Land					43	0,126						430,126
	Land			+						12 161 40	11	4	,277,103
	Buildin	-				17,43		-		13,161,40	_		
		old improvements				-	5,855	1		1,317,73	-		,838,116
		nent				11,76	7,425	1		9,180,50	צו	2	,586,916
	Other				. V '	/8:	1	10(-))					
rota	II. Add	lines 1a through 1e (Co	piumn (a) must e	quai Form 990, Pari	t X, colui	mn (B),	iine	10(c)) .	<u> </u>	•		9	,132,261

Investments—Other Securities. Complete See Form 990, Part X, line 12.	e if the organization answ	ered tes on Form 990, Part IV, line 11b),
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives		cost of end of year market value	
Closely-held equity interests Other	•		
long/short equities	19,500,492	F	
state of Israel bonds	125,333	F	
multistrategy hedge funds	13,623,075	F	
debt securities	2,939,021	F	
Investment funds	23,606,868	F	
equity funds	1,390,942	F	
equity fulfus	1,390,942	'	
)			
al. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 61,185,731		
rt VIII Investments—Program Related.		11 Con Form 000 Port V 1 and 12	
Complete if the organization answered 'Yes (a) Description of investment	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market value	
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization ans	wered 'Yes' on Form 990, Par	t IV, line 11d See Form 990, Part X, line 15	
(a) Desc		(b) Book v	value
	E)		
tal. (Column (b) must equal Form 990, Part X, col (B) line 15			
tal. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	tion answered 'Yes' on Foi		
tal. (Column (b) must equal Form 990, Part X, col (B) line 15 art X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability	tion answered 'Yes' on Foi	rm 990, Part IV, line 11e or 11f.	
al. (Column (b) must equal Form 990, Part X, col (B) line 19 art X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	tion answered 'Yes' on Foi		
al. (Column (b) must equal Form 990, Part X, col (B) line 19 art X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability Federal income taxes rued unfunded pension liability er retirement benefits	tion answered 'Yes' on Foi	19,870,897 3,402,964	
ral. (Column (b) must equal Form 990, Part X, col (B) line 19 art X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability Federal income taxes rued unfunded pension liability er retirement benefits ritable gift annuities	tion answered 'Yes' on Foi	19,870,897 3,402,964 2,155,139	
al. (Column (b) must equal Form 990, Part X, col (B) line 19 art X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability Federal income taxes rued unfunded pension liability er retirement benefits ritable gift annuities se obligations	tion answered 'Yes' on Foi	19,870,897 3,402,964	
Cart X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability Federal income taxes rued unfunded pension liability er retirement benefits irritable gift annuities se obligations urity deposits	tion answered 'Yes' on Foi	19,870,897 3,402,964 2,155,139 1,666,697	
tal. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organizations See Form 990, Part X, line 25.	tion answered 'Yes' on Foi	19,870,897 3,402,964 2,155,139 1,666,697	
tal. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability Federal income taxes crued unfunded pension liability her retirement benefits aritable gift annuities se obligations curity deposits	tion answered 'Yes' on Foi	19,870,897 3,402,964 2,155,139 1,666,697	
tal. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability Federal income taxes Equal unfunded pension liability her retirement benefits aritable gift annuities se obligations Eurity deposits	tion answered 'Yes' on Foi	19,870,897 3,402,964 2,155,139 1,666,697	
tal. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organizate See Form 990, Part X, line 25. (a) Description of liability Federal income taxes irrued unfunded pension liability er retirement benefits irritable gift annuities se obligations iurity deposits	tion answered 'Yes' on Foi	19,870,897 3,402,964 2,155,139 1,666,697	

Schedule D (Form 990) 2017

Page 4

1	Total revenue, gains, and other s	upport per audited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
С	Recoveries of prior year grants		2 c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
С	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 40	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Part			Retur	n.
1	Total expenses and losses per au	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25				
а	Donated services and use of facili	ties	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
С					4c	
5		1c. (This must equal Form 990, Part I, line 18) .		5	
	t XIII Supplemental Info					
		art II, lines 3, 5, and 9, Part III, lines 1a and ϵ s 2d and 4b Also complete this part to provide			t V, line	4, Part X, line 2, Part
	Return Reference		Exp	olanation		
See /	Additional Data Table					

Page 5		Schedule D (Form 990) 2017	
	ormation (continued)	Part XIII Supplemental Info	
	Explanation	Return Reference	

Schedule D (Form 990) 2017

Additional Data

Software ID: 17005876
Software Version: 2017v2.2

EIN: 13-5563393

Name: AMERICAN JEWISH COMMITTEE

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 1 Accrued unfunded pension liability	Accrued unfunded pension liability of \$19,870,897 represents the excess of pension benefit obligation over the pension plan assets

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	INCOME FROM AJC'S ENDOWMENT FUNDS ARE USED TO PROVIDE A SOURCE OF ONGOING SUPPORT FOR ITS EXEMPT PURPOSES

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	AJC HAS EVALUATED ITS TAX POSITIONS AND HAS DETERMINED THAT IT IS MORE LIKELY THAN NOT THA T THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS AND THAT IT WILL CONTINUE TO BE EXEMPT FROM FEDERAL AND STATE INCOME TAXES

_ _ _

efile GRAPHIC prin	t - DO NOT PROCESS	As Filed Data	a - DLN: 93493218009468				
SCHEDULE F (Form 990)	Statement o	of Activities	Outside the United States OMB No 1545-00				
(1 01111 000)	► Complete if the org		1 "Yes" to Form 990, Part IV, line 14b, 15, or 16. h to Form 990. 2017				
Department of the Treasury Internal Revenue Service	► Information about Sc	hedule F (Form 990)	and its ınstructions ıs at wи	w.irs.gov/form990.	Open to Public Inspection		
Name of the organization				Employer ider	ntification number		
AMERICAN JEWISH COM	ATLLEE			13-5563393			
	information on Activit Part IV, line 14b.	ies Outside the l	Jnited States. Comple	te if the organization a	enswered "Yes" to		
other assistance, to award the gran	s. Describe in Part V the o	r the grants or assi	stance, and the selection	criteria used	✓ Yes □ No her assistance		
	n (The following Part I, line	e 3 table can be dupl	cated if additional space is	needed)			
(a) Region	(b) Number offices in the region			(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continua Part I	tion sheets to	6 39			22,984,980 0		
c Totals (add lines 3	a and 3b) Act Notice, see the Instruct	6 39		No 50082W Sched u	22,984,980 le F (Form 990) 2017		

11

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								_
(3)								
(4)								_
(5)							Schedule	F (Form 990) 2017
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								

(15) (16)

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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

(4) (5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14) (15) (16) (17) (18) Page **3**

Schedule F (Form 990) 2017

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

Sche	dule F (Form 990) 2017		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□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	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	☐Yes	☑ No

Schedule F (Form 990) 2	017 Page 5			
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).				
Return Reference	Explanation			
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	AJC'S GRANT RECIPIENTS CERTIFY THAT THE GRANTS WILL BE USED IN COMPLIANCE WITH ANY APPLICABLE UNITED STATES (US) LAWS, US AND INTERNATIONAL STATUTES, REGULATIONS, RULES AND EXECUTIVE ORDERS, INCLUDING ALL ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, REGULATIONS, RULES AND EXECUTIVE ORDERS NO FUNDS WILL BE USED IN PARTISAN FASHION TO SUPPORT OR OPPOSE CANDIDATES FOR PUBLIC OFFICE AJC REQUIRES THE RECIPIENTS TO SUBMIT NARRATIVE AND FINANCIAL REPORTS			

Return Reference	Explanation
Schedule F, Part I, Line 3 FOREIGN INVESTMENTS	AJC INVESTS IN SEVERAL ENTITIES THAT ARE LEGALLY DOMICILED IN FOREIGN JURISDICTIONS THE 2017 END OF YEAR VALUE OF INVESTMENTS DOMICILED IN CENTRAL AMERICA/CARIBBEAN WAS \$16,014,274

Return Reference	Explanation
PROCEDURES FOR	AJC'S GRANT RECIPIENTS CERTIFY THAT THE GRANTS WILL BE USED IN COMPLIANCE WITH ANY APPLICABLE UNITED STATES (US) LAWS, US AND INTERNATIONAL STATUTES, REGULATIONS, RULES AND EXECUTIVE ORDERS, INCLUDING ALL ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, REGULATIONS, RULES AND EXECUTIVE ORDERS NO FUNDS WILL BE USED IN PARTISAN FASHION TO SUPPORT OR OPPOSE CANDIDATES FOR PUBLIC OFFICE AJC REQUIRES THE RECIPIENTS TO SUBMIT NARRATIVE AND FINANCIAL REPORTS

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: 17005876 **Software Version:** 2017v2.2 **EIN:** 13-5563393

Name: AMERICAN JEWISH COMMITTEE

(a) Region	offices in the region	employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) lotal expenditures for region
Central America and the Caribbean	0	0	Investments		16,014,274

26 Program Services

IADVOCACY

3,539,603

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Middle East and North Africa 11 | Program Services IADVOCACY 2.881.867 Middle East and North Africa Grantmakıng 212,000

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Russia and Neighboring States IADVOCACY 101.904 0 Program Services East Asia and the Pacific 1 Program Services IADVOCACY 92,112

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) South America 1 |Program Services IADVOCACY 73.145 Europe (Including Iceland and Grantmakıng 58,825 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program reaion services, grants to service(s) in region region recipients located in the region) Sub-Saharan Africa 11.250 lGrantmakınd

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) 95,000 WIRE TRANSFER Middle East Grant to support a land North ıoınt Israelı Africa Jewish-Israeli Arab high School choir project, designed to bring about inter-group understanding Middle East Grant to provide 30,000 WIRE TRANSFER land North emergency relief, Africa psychosocial support, water, sanıtatıon, and hygiene products to communities affected by Hurricane Maria

(1) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region (book, FMV, cash non-cash organization and EIN(If grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) Middle East Grant to provide 25,000 WIRE TRANSFER and North emergency Africa relief. psychosocial care, water, sanitation, and hygiene support to affected communities in lMocoa, Columbia

20,000 WIRE TRANSFER Middle East Grant designated and North to provide aid to Africa lRohinava

refugees in Bangladesh

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region cash non-cash book, FMV, organization and EIN(If grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) 20,000 WIRE TRANSFER Middle East and Grant designated North Africa to provide humanıtarıan lıfe saving aid and relief to Syrians 19,975 WIRE TRANSFER Europe Grant to support (Including the efforts of the Iceland and "Human Rights Greenland) Likeminded Office, to encourage areater engagement by "likeminded" states at the 37th session of

the Human Rights Council

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) Grant to support 14,350 WIRE TRANSFER Europe (Including research project on challenges to Iceland and Greenland) the newly created UN Special Procedure on protection against violence & discrimination based on sexual orientation & gender identity Middle East and Grant to provide 12,000 WIRE TRANSFER North Africa lemergency relief In the areas affected by flooding caused by Hurricane Harvey

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region non-cash (book, FMV, cash and EIN(ıf organization arant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) 11,250 WIRE TRANSFER Grant to support Europe (Including the South African Iceland and Union of Jewish Greenland) Students Leadership Development Program Middle East and Grant to support 10.000 WIRE TRANSFER North Africa relief efforts in response to the floods and landslides in Nepal

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS codel (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) 10,000 WIRE TRANSFER Europe Grant to cover (Includina lexpenses Iceland and associated with Greenland) 2017 Muslim

IJewish Conference in

Bosnia

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

DLN: 93493218009468

OMB No 1545-0047

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ. ▶Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. Open to Public Inspection

Name of the organization AMERICAN JEWISH COMMITTEE			Employer ide	entification number
ANERCON SEWISH COMMITTEE			13-5563393	
Fundraising Activities. Complete if the organ Form 990-EZ filers are not required to complete			rm 990, Part IV, line	17.
1 Indicate whether the organization raised funds through any	of the fol	llowing activities Check a	all that apply	
a 🗹 Mail solicitations	e	✓ Solicitation of non-	government grants	
b 🗹 Internet and email solicitations	f	Solicitation of gove	rnment grants	
c 🗹 Phone solicitations	g	Special fundraising	events	
d 🗹 In-person solicitations				
2a Did the organization have a written or oral agreement with a or key employees listed in Form 990, Part VII) or entity in co				es 🗆 No
b If "Yes," list the ten highest paid individuals or entities (function to be compensated at least \$5,000 by the organization	draisers)	pursuant to agreements	under which the fundrais	ser is
or entity (fundraiser) fundrais custo contr	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1 MAIL SOLICITATION	No			
1 MAIL SOLICITATION AB DATA & PROGRAM P O BOX 170062 ADVOCACY Yes		802,703	536,408	266,295
MILWAUKEE, WI 532178000 MAIL SOLICITATION				
INTEGRATED MAIL INDUSTRIES 3450 W HOPKINS STREET	No	0	14,854	-14,854
MILWAUKEE, WI 532161700				
MARTS&LUNDY CONSULTATION 1200 WALL STREET WEST	No	0	9,516	-9,516
LYNDHURST, NJ 07071				
*				
5				
6				
7				
8				
9				
10				
Total	>	802,703	560,778	241,925
3 List all states in which the organization is registered or license		•	·	

licensing

AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA,

Cat No 50083H

Sche	edule G (Form 990 or 990-EZ) 2017				Page 2	
Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising egross receipts greater than \$5	vent contributions and				
	gross receipts greater than \$.	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events	
		(event type)	(event type)	(total number)	(add col (a) through col (c))	
Revenue						
Re	1 Gross receipts	1,285,450	1,129,275	21,762,235	24,176,960	
	2 Less Contributions	1,189,700	1,067,775	20,665,393	22,922,868	
	3 Gross income (line 1 minus line 2)	95,750	61,500	1,096,842	1,254,092	
	4 Cash prizes					
S	5 Noncash prizes					
nse	6 Rent/facility costs					
×pe	7 Food and beverages					
ਲ ਹ	8 Entertainment					
Direct Expenses	9 Other direct expenses	124,656	91,222	1,556,635	1,772,513	
	10 Direct expense summary Add lines 4 t	•	1,772,513			
	11 Net income summary Subtract line 10	from line 3, column (d)		•	-518,421	
Pai	Gaming. Complete if the organization on Form 990-EZ, line 6a.	anization answered "Ye	es" on Form 990, Part I	IV, line 19, or reported	more than \$15,000	
Revenue		(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))	
	1 Gross revenue					
Expenses	2 Cash prizes					
ă	3 Noncash prizes					
Direct	4 Rent/facility costs					
<u> </u>	5 Other direct expenses					
		☐ Yes%	☐ Yes%			
	6 Volunteer labor	□ No	☐ No	□ No		
	7 Direct expense summary Add lines 2 t	hrough 5 in column (d)				
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	n (d)	•		
9	Enter the state(s) in which the organizati	on conducts gaming activ	ities			
 a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain						
10a b	Were any of the organization's gaming like If "Yes," explain	· · · · · · · · · · · · · · · · · · ·	d or terminated during the	e tax year?	Yes No	
					J	

Sche	dule G (Form 990 or 990-EZ) 2017			P	age 3	
11	Does the organization conduct gaming	activities with nonmembers?	☐Yes	□No		
12	Is the organization a grantor, benefici formed to administer charitable gamin	ary or trustee of a trust or a member of a partnership or other entity ig?	Yes			
13	Indicate the percentage of gaming act	ivity conducted in				
а	The organization's facility	13	а		%	
b	An outside facility	13	ь		%	
14	Enter the name and address of the pe	rson who prepares the organization's gaming/special events books and record	S			
	Name ►					
	Address •					
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming	□Yes	□No		
b		revenue received by the organization ▶ \$ and the y the third party ▶ \$				
С	If "Yes," enter name and address of the	ne third party				
	Name ►					
	Address ▶					
16	Gaming manager information					
	Name ►					
	Gaming manager compensation ► \$					
	Description of services provided					
	☐ Director/officer	☐ Employee ☐ Independent contractor				
17 a	Mandatory distributions Is the organization required under sta retain the state gaming license?	te law to make charitable distributions from the gaming proceeds to	□Yes	□No		
b	Enter the amount of distributions required in the organization's own exempt activities.	ired under state law distributed to other exempt organizations or spent ities during the tax year \$				
Par		on. Provide the explanations required by Part I, line 2b, columns (iii .5c, 16, and 17b, as applicable. Also provide any additional informat				
	Return Reference	Explanation				
Sche	dule G, Part I, Line 2b(v) AB DATA	AMOUNTS IN COLUMN (V) REPRESENT PAYMENTS TO PROFESSIONAL FUND FUNDRAISING AND PROGRAMMATIC SERVICES AND REIMBURSEMENT OF FUNDERS OF PRINTING, PAPER, ENVELOPES, ETC			S,	
Schedule G, Part II, Line 9(b) Other direct fundraising event expenses AJC REPORTS ALL EXPENDITURES RELATED TO ITS SPECIAL EVENT FUNCTIONS AS "OTHER EXPENSES" ON SCHEDULE G, PART II, LINE 9 COSTS OF RUNNING THESE SPECIAL EVENTS FREQUENTLY INVOICED AS ONE FEE BY THE VENDOR, SO THAT THE RENTAL, FOOD AND OT COSTS ARE BUNDLED AND FURTHER CATEGORIZATION ON SCHEDULE G, PART II IS NOT POINT IT IS THEREFORE MORE ACCURATE TO COMBINE ALL THE EXPENSES						
Sche	dule G, Part I, Line 2b(III) AB DATA	Checks are mailed directly to AB Data's PO Box in Milwaukee On a daily bas checks from the PO Box and hand the checks to the personnel for data entry physically open up every single piece of mail and enter the donations into AB system Once the donations are entered into the record-keeping system, the directly into AJC's bank account On a monthly basis, AJC's Accounting Depa account to a report provided by AB Data which lists all the donations	The data en B Data's recor y are then de	try perso d-keeping posited	nnel g	
Schedule G, Part I, Line 2b(v) MARTS&LUNDY REPRESENT PAYMENTS TO FUNDRAISING CONSULTANTS FOR CAPITAL CAMPAIGN PLANNING FEASIBILITY STUDIES						

efile GRAPHIC print - [OO NOT PROCESS	As Filed Data -					DLI	N: 934932180	09468	
Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.							С	OMB No 1545-0047 2017 Open to Public		
Department of the Treasury Internal Revenue Service	▶ Infor	mation about Schedu	► Attach to Form le I (Form 990) and its		vw.irs.gov/form990			Inspection		
Name of the organization AMERICAN JEWISH COMMITT	EE					'	oyer identific 563393	ation number		
Part I General Info	rmation on Grants	and Assistance				13 33				
the selection criteria us Describe in Part IV the	ed to award the grants organization's procedu	s or assistance ⁷ res for monitoring the u	se of grant funds in the U	nited States				✓ Yes	□ No	
			ditional space is needed	ents. Complete if the o	rganızatıon answered "Yes	" on Form 990,	Part IV, line	21, for any recip	ient	
(a) Name and address of organization or government	(a) Name and address of organization (b) EIN (c) IRC section (If applicable) (d) Amount of cash grant (e) Amount of non- (book, FMV, appraisal, noncash and cash (book) (book, FMV, appraisal, noncash and cash (book)				(g) Descri noncash as		(h) Purpose of or assistance	f grant		
(1) See Additional Data										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
		-	s listed in the line 1 table				. >		11 0	
For Paperwork Reduction Act N				Cat No 50055			Sch	edule I (Form 990) 2017	

Schedule I (Form 990) 2017						Page 2	
Part III Grants and Other Ass	sistance to	Domestic Individu	uals. Complete if the orga	anization answered "Yes"	on Form 990, Part IV, line 22		
(a) Type of grant or assista		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
(1)			<u> </u>				
(2)							
(3)			1				
(4)			1				
(5)							
(6)							
(7)			1				
Part IV Supplemental 1	Information	on. Provide the in	formation required in	Part I, line 2; Part III	I, column (b); and any other a	dditional information.	
Return Reference	Explanation	on		_			
Procedures for monitoring use of	RULES AND ORDERS NO	C'S GRANT RECIPIENTS CERTIFY THAT THE GRANTS WILL BE USED IN COMPLIANCE WITH ANY APPLICABLE UNITED STATES LAWS, STATUTES, REGULATIONS, LES AND EXECUTIVE ORDERS, INCLUDING ALL ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, REGULATIONS, RULES AND EXECUTIVE DERS NO FUNDS WILL BE USED IN PARTISAN FASHION TO SUPPORT OR OPPOSE CANDIDATES FOR PUBLIC OFFICE IN MOST OF THE CASES AJC REQUIRES THE CIPIENTS TO SUBMIT NARRATIVE AND FINANCIAL REPORTS					

Schedule I (Form 990) 2017

Additional Data

Israel Rescue Coalition Inc.

New York, NY 10022

208 East 51st Street Ste 303

Jewish Theological Seminary

3080 Broadway Box 62

New York, NY 10027

Software ID: 17005876 **Software Version:** 2017v2.2 **EIN:** 13-5563393 Name: AMERICAN JEWISH COMMITTEE

(a) Name and address of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash	(f) Method of valuation (book, FMV, appraisal,	n
or government				assistance	other)	

501(c)(3)

501(c)(3)

(a) Name and address of organization or government	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of cash assistance

47-4056881

13-0887640

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance			

50,000

34,230

d Domest	ic Governments.		
unt of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant

or assistance

Grant designated to

provide funding for

Srı Lanka

will

United Hatzalah Training Programs in India and

Charitable / educational

purposes consistent with Edward M Chase's

lFM∨

FMV

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization arant cash non-cash assistance or assistance or government other) assistance 13-3219419 501(c)(3) 30.000 IFMV Grant to support the The Graduate Center FoRB [Freedom of Foundation Inc 336 Fifth Avenue 8th Floor Religion or Belief | Unit New York, NY 100164309 at the CUNY Graduate Center for religious studies Cadena Foundation Inc. 81-2702562 501(c)(3) 30,000 lFM∨ Grant designated to 2719 Hollywood Blvd provide emergency

relief and humanitarian aid in the wake of the devastating earthquake in Mexico City

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Hollywood, FL 330204821

organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 52-2345895 501(c)(3) 25.000 IFMV US Committee For Human Grant to support the Rights In North Korea North Korea United 1001 Connecticut Ave NW Ste Nations Human Rights 435 Project, including testimony from

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

to the Cholera Epidemic

lın Haıtı"

Washington, DC 20036 escapees of North Korea Social Science Research 13-1325070 501(c)(3) 25.000 IFMV Council

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

Grant to conduct a study of Haitians' One Pierrepont Plaza 15th preferences regarding the implementation of Floor Brooklyn, NY 11201 the UN's "New Approach

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable arant cash non-cash assistance or assistance or government other) assistance 94-3299686 501(c)(3) 22.000 IFMV Center For Justice & Grant to support victimcentric investigation and litigation seeking accountability for the Yazıdı genocide Hias Inc 501(c)(3) 20,000

IFMV

Grant to support project

"strategic Litigation to

advance Refugee Rights and Protection in Greece"

Accountability One Hallidie Plaza Suite 406 San Francisco, CA 94102

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

13-5633307

333 7th Avenue 16th Floor

New York, NY 100015004

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance Equality Now Inc 13-3660566 501(c)(3) 18,200 IFMV Grant to support the 250 West 57th Street Ste 1527 "Protecting Women and

Assistance

New York, NY 10107 Girls- Repealing Discriminatory Rape 12,000 Jewish Family Service 76-0240622 IFMV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Laws" project 501(c)(3) Grant designated to 4131 S Braeswood Bl provide funding for Houston, TX 77025 Hurricane Harvey

(a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant **(b)** EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 53-0196605 501(c)(3) 10.000 IFMV Grant to provide

Hurricane Harvey in

Houston

American Red Cross PO Box 37839 emergency relief for the Boone, IA 500370839 lareas affected by

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

efil	e GRAPHIC pr	int - DO NOT PROCESS A	s Filed Dat	a -	DLN: 934	9321	8009	468	
Sch	edule J	Con	npensati	ion Information	МО	IB No	1545-0	0047	
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest							
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					2017		
	▶ Attach to Form 990.								
•	tment of the Treasury al Revenue Service	► Information abou		(Form 990) and its instructions <u>agov/form990</u> .	is at		to Pul ectio		
Nar	ne of the organiza		<u>'</u>		Employer identificat				
AME	RICAN JEWISH COM	MITTEE			13-5563393				
Pa	rt I Questi	ons Regarding Compensatio	n						
							Yes	No	
1a				the following to or for a person liste y relevant information regarding the					
		or charter travel		Housing allowance or residence for	personal use				
	_	companions	님	Payments for business use of perso					
		nification and gross-up payments	片	Health or social club dues or initiation					
	☐ Discretion	ary spending account		Personal services (e g , maid, chauf	reur, cher)				
b		kes in line 1a are checked, did the dill line 1 above		ollow a written policy regarding paym iplete Part III to explain	nent or reimbursement	1 b	Yes		
2				or allowing expenses incurred by all r, regarding the items checked in line	. 1?	2	Yes		
	directors, truste	es, officers, including the CEO/Exe	cutive Directo	r, regarding the items checked in line	e la?				
3				ed to establish the compensation of the	ne				
		EO/Executive Director Check all th d organization to establish compen		not check any boxes for methods CEO/Executive Director, but explain i	n Part III				
	✓ Compensa			Works					
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study					
		of other organizations	7	Approval by the board or compensa	tion committee				
		-							
4	related organiza		J, Part VII, Se	ction A, line 1a, with respect to the f	ning organization or a				
а	Receive a sever	ance payment or change-of-control	payment?			4a		No	
b		receive payment from, a supplem		ified retirement plan?		4b	Yes		
c	Participate in, o	receive payment from, an equity-	based comper	nsation arrangement?		4c		No	
	If "Yes" to any o	of lines 4a-c, list the persons and pi	rovide the app	plicable amounts for each item in Part	: III				
	Only 501(c)(3), 501(c)(4), and 501(c)(29) or	raanizations	must complete lines 5-9.					
5			_	the organization pay or accrue any					
	compensation c	ontingent on the revenues of							
а	The organization	٦٦				5a		No	
b	Any related orga					5b		No	
_	-	5a or 5b, describe in Part III							
6		ed on Form 990, Part VII, Section A ontingent on the net earnings of	i, line 1a, did	the organization pay or accrue any					
а	The organization					6 a		No	
b	Any related orga					6b		No	
7	•	6a or 6b, describe in Part III	العالم ما مسا	the eventuation provide and a section	al .				
7		ed on Form 990, Part VII, Section A escribed in lines 5 and 6? If "Yes,"		the organization provide any nonfixed rt III	u	7		No	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		No	
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow t	he rebuttable	presumption procedure described in	Regulations section	9		No_	
For I	Danamuark Badı	ction Act Notice, see the Instru	etions for Ec	orm 990 Cat No 5	50053T Schedule 1		, 990)	2017	

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (C) Retirement (D) Nontaxable (B) Breakdown of W-2 and/or 1099-MISC (E) Total of (F) and other benefits columns compensation Compensation in

	(i) Base (ii) (iii) Other deferred		Bellettes	(B)(ı)-(D)	compensation in		
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(I)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							
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Schedule J (Form 990) 2017											

Part III **Supplemental Information** Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation Schedule J, Part II, Column (B)(III) IN 2016, PER DAVID HARRIS' CONTRACT, AJC ESTABLISHED A SUPPLEMENTARY EXECUTIVE RETIREMENT PLAN AS A PORTION OF THE PLAN IS TAXABLE TO SUPPLEMENTAL NONQUALIFIED DAVID HARRIS EACH YEAR, AJC HAS REMITTED THE AMOUNT OF THE TAXES DUE ON HIS BEHALF, AS IS COMMON PRACTICE, WHICH WILL BE OFFSET AGAINST RETIREMENT PLAN ANY FUTURE PAYMENTS OF THE PLAN ACCORDINGLY, SCHEDULE J, PART II, COLUMN B INCLUDES THE 2017 CALENDAR YEAR'S TAXABLE BENEFITS OF \$107,144 UNDER THE PLAN. DAVID HARRIS RECEIVED AN ADDITIONAL \$107,144 IN CALENDAR YEAR 2017 THIS AMOUNT IS DEFERRED AND REPORTED ON SCHEDULE J, PART II, COLUMN C Schedule J. Part I. Line 1a First-class FIRST CLASS AIRLINE TICKETS ARE TYPICALLY BOOKED FOR DAVID HARRIS. AIC PAYS FOR ALL THE TRAVEL COSTS OF HIS WIFE WHO ACCOMPANIES DAVID or charter travel HARRIS ON CERTAIN AJC TRIPS UP TO A TOTAL \$25.000 A YEAR AJC PURCHASED A TERM LIFE INSURANCE POLICY IN THE AMOUNT OF ONE MILLION DOLLARS ON THE LIFE OF DAVID HARRIS PAYABLE UPON HIS DEATH TO HIS BENEFICIARIES ADDITIONALLY, DAVID HARRIS HAS ADDITIONAL SUPPLEMENTAL DISABILITY INCOME POLICIES THAT ARE PAID FOR BY AJC. THE ANNUAL AMOUNTS OF ALL THESE COSTS, WITH THE EXCEPTION OF FIRST CLASS AIRLINE TRAVEL FOR DAVID HARRIS. ARE INCLUDED IN HIS FORM W-2 AS TAXABLE COMPENSATION see responses to line 1A above

Page 3

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

Schedule J, Part I, Line 1a Travel for companions Schedule J. Part I. Line 1a Tax IN 2016, PER DAVID HARRIS' CONTRACT, AJC ESTABLISHED A SUPPLEMENTARY EXECUTIVE RETIREMENT PLAN AS A PORTION OF THE PLAN IS TAXABLE TO INDICATION AND GROSS-UP PAYMENTS DAVID HARRIS EACH YEAR, AJC HAS REMITTED THE AMOUNT OF THE TAXES DUE ON HIS BEHALF, AS IS COMMON PRACTICE, WHICH WILL BE OFFSET AGAINST

ANY FUTURE PAYMENTS OF THE PLAN ACCORDINGLY, SCHEDULE J. PART II, COLUMN B INCLUDES THE 2017 CALENDAR YEAR'S TAXABLE BENEFITS OF \$107,144 lunder the plan, david harris received an additional \$107,144 in calendar year 2017. This amount is deferred and reported on schedule J. PART II, COLUMN C Schedule J, Part I, Line 4b IN 2016, PER DAVID HARRIS' CONTRACT, AJC ESTABLISHED A SUPPLEMENTARY EXECUTIVE RETIREMENT PLAN AS A PORTION OF THE PLAN IS TAXABLE TO

Supplemental nonqualified retirement DAVID HARRIS EACH YEAR. AJC HAS REMITTED THE AMOUNT OF THE TAXES DUE ON HIS BEHALF. AS IS COMMON PRACTICE. WHICH WILL BE OFFSET AGAINST plan ANY FUTURE PAYMENTS OF THE PLAN ACCORDINGLY, SCHEDULE J, PART II, COLUMN B INCLUDES THE 2017 CALENDAR YEAR'S TAXABLE BENEFITS OF \$107,144

lunder the plan, david harris received an additional \$107,144 in calendar year 2017. This amount is deferred and reported on schedule J. IPART II. COLUMN C

DIRECTOR, BILLA

12MICHAEL GILBERT

DIRECTOR REGIONAL OFFICE ADVANCEMENT

(11)

203,109

Software ID: 17005876

Software Version: 2017v2.2

EIN: 13-5563393

Name: AMERICAN JEWISH COMMITTEE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MISC	Compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) (iii) Bonus & incentive Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1DAVID HARRIS	(1)	552,862	0	136,863	115,244	51,943	856,912	0
CHIEF EXECUTIVE OFFICER (SEE SCHEDULE J)	(11)	0	0	0	0	0	0	0
1RICHARD M HYNE	(1)	285,010	0	0	8,100	31,872	324,982	0
CHIEF FINANCIAL OFFICER	(11)	0	0	0	0	0	0	0
2MARC D STERN	(1)	226,558	0	6,351	7,041	30,552	270,502	0
GENERAL COUNSEL	(11)	0	0	0	0	0	0	0
3JULIE SCHAIR	(1)	281,033	0	958	8,100	41,962	332,053	0
ASSOCIATE EXECUTIVE DIRECTOR/MANAGING DIRECTOR, RESOURCE DEVELOPMENT	(11)	o	0	0	0	0	0	0
4JASON ISAACSON	(1)	255,017	0	3,742	7,881	37,576	304,216	0
ASSISTANT EXEC DIRECTOR FOR POLICY/MANAGING DIRECTOR OF THE OGIA	(11)	0	0	0	0	0	0	0
5DANIEL ELBAUM	(1)	225,483	0	3,735	6,968	5,647	241,833	0
ASSISTANT EXECUTIVE DIRECTOR/MANAGING DIRECTOR, REGIONAL OFFICES	(11)	0	0	0	0	0	0	0
6 STEVE BAYME	(1)	254,657	0	7,110	7,791	27,452	297,010	0
DIR, CONTEMPORARY JEWISH LIFE	(11)	0	0	0	0	0	0	0
7 JANET BECKER	(1)	263,193	0	7,533	8,100	32,827	311,653	0
ASSISTANT EXECUTIVE DIRECTOR/MANAGING DIRECTOR, STRATEGIC IMPLEMENTATION & HR	(11)	0	0	0	0	0	0	0
8RABBI DAVID ROSEN	(1)	234,828	0	0	0	58,240	293,068	0
DIRECTOR OF INTERNATIONAL INTERRELIGIOUS AFFAIRS	(11)	0	0	0	0	0	0	0
9ROBIN LEVENSTON	(1)	212,196	0	703	6,562	17,584	237,045	0
EXECUTIVE DIRECTOR, PROJECT INTERCHANGE	(11)	0	0	0	0	0	0	0
10ROBERT LEIKIND	(1)	207,782	0	2,961	6,390	40,784	257,917	0
REGIONAL DIRECTOR, AJC BOSTON	(11)	0	0	0	0	0	0	0
11DINA SIEGEL VANN	(1)	204,502	0	2,961	6,423	31,911	245,797	0

2,866

6,213

0

35,982

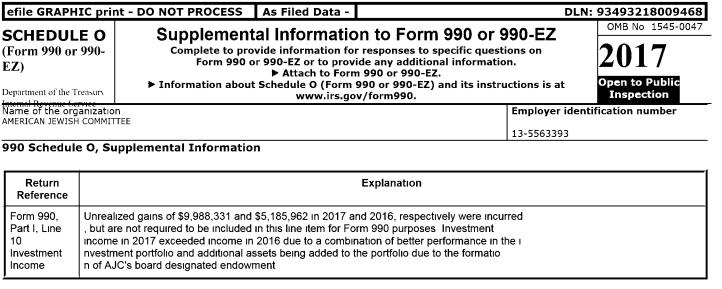
248,170

0

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efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN: 9	9349321	8009	468
	EDULE M			loncash Contri	hutione		OMB No 1	.545-0	047
(For	m 990)		1	ioncasii contin	butions		20	1 /	7
►Complete if the		organizati	ons answered "Yes" on Fo	orm 990, Part IV, lines 2	9 or 30.	20	1/	7	
		► Attach to Form	990.						
Depar	tment of the Treasury	▶Information abo	ut Schedu	le M (Form 990) and its i	nstructions is at <u>www.ir</u> .	s.gov/form990	Open to		
	al Revenue Service					E 1 11 11	Inspe		
Name AMER	e of the organizat ICAN JEWISH COMM	ion ITTEE				Employer identif	lication n	umbe	r
						13-5563393			
Pa	rt I Types	of Property	1			1			
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on	Method noncash cor	(d) of determi itribution a		ts
					Form 990, Part VIII, line 1g				
1	Art—Works of art	t			,				
2	Art—Historical tr	easures .							
3	Art—Fractional in	iterests							
4	Books and public								
5	Clothing and hou								
_	goods Cars and other v					+			
6 7	Boats and planes					+			
-	Intellectual prope								
	Securities—Public		X	120	3 667 33	0 Market value			
10	Securities—Close				5/00.700	- I I I I I I I I I I I I I I I I I I I			
	Securities—Partr	•							
	or trust interest	s							
12	Securities—Misce								
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15	contribution—Of Real estate—Res					+			
16	Real estate—Cor								
17	Real estate Oth								
18	Collectibles .								
19	Food inventory								
20	Drugs and medic								
21	Taxidermy .								
22	Historical artifact	is							
23	Scientific specim	ens							
24	Archeological art								
	Other ▶ (•							
	Other ► (1			
	Other ▶ (1			
	Other ▶ (
29		,	_	ation during the tax year for 3, Part IV, Donee Acknowled		29			0
								Yes	No
30a	must hold for at	least three years fr	om the date	y contribution any property r e of the initial contribution, a	and which is not required to		pt 30a		 _{No}
b	If "Yes," describ	e the arrangement i	n Part II				304		1 140
31	•	_		olicy that requires the reviev	v of any nonstandard contr	ibutions?	31	Yes	
32a		zation hire or use th		or related organizations to so	olicit, process, or sell nonce	ish • • • •	32a	_	No
b	If "Yes," describ	e ın Part II							
33	If the organizati	on did not report an	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part	II							
Eor D	anerwork Peductio	on Act Notice, see the	Instruction	e for Form 990	Cat No 512271	Schedu	ıle M (Form	0001	(2017)

Schedule M (Form 990) (2017)	Page 2
	non required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part lumber of contributions, the number of items received, or a combination of both. Also complete
Return Reference	Explanation
Schedule M, Part I EXPLANATIONS OF REPORTING METHOD FOR NUMBERS OF CONTRIBUTIONS	THE ORGANIZATION RECEIVED 120 SEPARATE GIFTS OF PUBLICLY TRADED SECURITIES
	Schedule M (Form 990) (2017)



Return Explanation
Reference

Form 990, Part I, Line 8 IN 2017 REVENUE WAS LOWER THAN 2016 AS THERE WERE MAJOR GIFTS RELATED TO AJC'S CAPITAL CAMPAIGN IN 2016 THAT WERE NOT REPEATABLE IN 2017

CONTRIBUTIONS AND GRANTS

Return Reference	Explanation
Form 990, Part I, Line 15 SALARIES, OTHER COMPENSATION & EMPLOYEE BENEFITS	SALARIES, OTHER COMPENSATION & EMPLOYEE BENEFITS IN 2017 INCREASED OVER 2016 DUE TO ANNUAL SALARY INCREASES, INCREASES IN HEALTHCARE COSTS, A SMALL INCREASE IN HEADCOUNT AND SOME O NE-TIME SEVERANCE COSTS FOR A FORMER EMPLOYEE NOT REQUIRED TO BE REPORTED ON PART VII

Return Reference	Explanation
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 4,427,240 including grants of \$ 38,352)(Revenue \$ 131,118) AJC'S 2017 OTHER PR OGRAMMATIC ACTIVITIES INCLUDE (1) INTERRELIGIOUS AND INTERGROUP RELATIONS AJC BUILDS COA LITIONS WITH LIKE-MINDED PARTNERS TO ADVANCE SHARED INTERESTS AND VALUES, AND TO FURTHER U NDERSTANDING AJC CONVENED A MUSLIM-JEWISH ADVISORY COUNCIL AND A LATINO-JEWISH LEADERSHIP COUNCIL, FOR EXAMPLE, TO WORK TOGETHER ON ISSUES OF MUTUAL CONCERN AND IMPORTANCE TOGETH ER, AJC ADVOCATES COLLECTIVELY WITH ITS PARTNERS AGAINST ANTI-SEMITISM AND EXTREMISM, AND FOR THE WELLBEING OF THE JEWISH PEOPLE AND THE STATE OF ISRAEL (E.G., COMBATING PROPOSALS TO BOYCOTT ISRAEL) (2) CONTEMPORARY JEWISH LIFE AJC STRIVES TO STRENGTHEN JEWISH CONTINU ITY AND TO ENRICH THE RELATIONSHIP OF JEWS IN THE DIASPORA WITH THE STATE OF ISRAEL AJC T AKES PUBLIC POSITIONS AND HOLDS SYMPOSIA AND MISSIONS ADDRESSING THE MOST CRITICAL CURRENT ISSUES (E.G., THE ROLE OF THE CHIEF RABBINATE IN ISRAEL)

Return Explanation
Reference

Form 990,	AJC IS A MEMBERSHIP ORGANIZATION UNDER APPLICABLE NEW YORK NONPROFIT CORPORATION LAW, AND
Part VI, Line	THE MEMBERS OF ITS BOARD OF GOVERNORS CONSTITUTES ITS CORPORATE MEMBERSHIP
6 Classes of	
members or	
stockholders	

Return Explanation Reference Form 990. SEE ABOVE Part VI, Line 7a Members

or stockholders electing members of governing body

990 Schedule O, Supplemental Information Return Explanation Reference Form 990. SEE ABOVE Part VI, Line 7b Decisions requiring

approval by members or stockholders Return Explanation

Reference

Form 990,
Part VI, Line
11b Review
of form 990
by governing
body

THE RETURN WAS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY
AJC'S STAFF THE DRAFT WAS THEN REVIEWED BY AJC'S AUDIT COMMITTEE, AND SUBSEQUENTLY PROVIDED TO AJC'S EXECUTIVE COUNCIL PRIOR TO FILING WITH THE IRS PURSUANT TO AJC'S BYLAWS, THE
EXECUTIVE COUNCIL CONSTITUTES AJC'S BOARD OF DIRECTORS AS THAT TERM IS USED IN THE NEW YO
RK NOT-FOR-PROFIT CORPORATION LAW

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	AJC HAS WRITTEN CONFLICT OF INTEREST POLICIES COVERING ALL MEMBERS OF THE EXECUTIVE COUNCI L, OFFICERS, AND EMPLOYEES STIPULATING THAT NO INDIVIDUAL MAY PARTICIPATE IN A DISCUSSION OR DECISION ON ANY MATTER IN WHICH HE OR SHE HAS A MATERIAL FINANCIAL INTEREST, AND HE OR SHE MUST DISCLOSE ANY POTENTIAL CONFLICTS ALL MEMBERS OF THE EXECUTIVE COUNCIL, OFFICERS, KEY EMPLOYEES WHO HAVE SIGNING AUTHORITY, AND OTHER EMPLOYEES ARE REQUIRED TO CERTIFY COM PLIANCE WITH THE APPROPRIATE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS AND TO INDICAT E WHETHER THE ORGANIZATION DOES BUSINESS WITH AN ENTITY IN WHICH THEY HAVE A MATERIAL FINA NCIAL INTEREST RESTRICTIONS IMPOSED ON PERSONS WITH A CONFLICT INCLUDE REFRAINING FROM PA RTICIPATING IN DELIBERATIONS AND DISCUSSIONS, AS WELL AS ANY DECISION, RELATING TO THE ALL EGED CONFLICT

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	IN 2017, AJC CONDUCTED A SALARY REVIEW OF CHIEF EXECUTIVE OFFICER COMPENSATION, REVIEWING FAIR MARKET COMPARABLES FOR POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS THE CHIEF EXECU TIVE OFFICER'S MULTI-YEAR CONTRACT WAS REVIEWED AND APPROVED BY AN INDEPENDENT COMPENSATIO N COMMITTEE AND SUBSEQUENTLY APPROVED BY THE EXECUTIVE COUNCIL A REVIEW OF THE CHIEF EXECUTIVE OFFICER'S COMPENSATION IS CURRENTLY IN PROGRESS BY A COMPENSATION COMMITTEE COMPOSED OF INDEPENDENT DIRECTORS AS IS AN AGENCY WIDE SALARY REVIEW BY AN OUTSIDE CONSULTANT WHICH WILL ALSO REVIEW COMPENSATION OF KEY AND HIGHLY COMPENSATED EMPLOYEES THE ORGANIZATION MAINTAINS RECORDS REGARDING THE COMPENSATION SETTING PROCESS COMPENSATION OF OTHER KEYEM PLOYEES FOR THE PAST SEVERAL YEARS HAS BEEN TIED TO THE SALARY INCREASES NEGOTIATED WITH A JC'S LABOR UNIONS, EXCEPT FOR THOSE WHO HAVE RECEIVED PROMOTIONS AND/OR INCREASED RESPONSIBILITIES

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	In 2017, salaries for senior managers and key employees were reviewed by the Executive Com pensation Committee AJC retained a professional compensation firm in 2015 and performed a complete a review of relevant salaries and adopted a multi-year plan for adjusting salari es of relevant senior management

Return

Reference	'
Form 990,	AJC CURRENTLY DOES NOT MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC AJC CURRENTLY
Part VI, Line	MAKES ITS CONFLICT OF INTEREST POLICY AND WHISTLEBLOWER POLICY AVAILABLE TO THE PUBLIC ON
19 Required	ITS WEBSITE THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE ALSO AVAILABLE ON ITS WEBS
documents	ITE AND FORM 990T IS AVAILABLE UPON REQUEST THE IRS DOES NOT REQUIRE THE PUBLIC DISSEMINA
available to	TION OF AJC'S IRS FORM 1023 BECAUSE THE ORGANIZATION WAS INITIALLY RECOGNIZED AS TAX EXEMP
the public	T IN 1929 AND PUBLIC AVAILABILITY IS NOT REQUIRED WHERE THE ORGANIZATION DID NOT HAVE A CO
	PY OF ITS EXEMPTION APPLICATION ON THE EFFECTIVE DATE OF THE REQUIREMENT IN JULY 1987

Explanation

Return Reference	Explanation
Form 990, Part VII, Section A, Line 1a, Column (D) SECTION A, LINE 1 COLUMN D	IN 2016, PER DAVID HARRIS' CONTRACT, AJC ESTABLISHED A SUPPLEMENTARY EXECUTIVE RETIREMENT PLAN AS A PORTION OF THE PLAN IS TAXABLE TO DAVID HARRIS EACH YEAR, AJC HAS REMITTED THE AMOUNT OF THE TAXES DUE ON HIS BEHALF, AS IS COMMON PRACTICE, WHICH WILL BE OFFSET AGAINST ANY FUTURE PAYMENTS OF THE PLAN ACCORDINGLY, SCHEDULE J, PART II, COLUMN B INCLUDES THE 2017 CALENDAR YEAR'S TAXABLE BENEFITS OF \$107,144 UNDER THE PLAN, DAVID HARRIS RECEIVED A N ADDITIONAL \$107,144 IN CALENDAR YEAR 2017 THIS AMOUNT IS DEFERRED AND REPORTED ON SCHED ULE J, PART II, COLUMN C

Return Explanation
Reference

Form 990,
Part VII,
Section A
SECTION A

Return Explanation

Reference

Form 990, Part X, Line 1 O A TRANSFER OF \$20 MILLION IN ASSETS TO INVESTMENTS AS PART OF AJC'S BOARD DESIGNATED END OWMENT THAT WAS FORMED IN 2017

NON-INTEREST BEARING

Return Reference	Explanation
Form 990,	PREPAID EXPENSES AND DEFERRED CHARGES SHOW A LARGE INCREASE IN 2017 OVER 2016 DUE TO TIMIN
	G OF PAYMENTS BEING MADE, PRIMARILY HAVING TO DO WITH PAYMENTS BEING MADE IN 2017 FOR AJC'
PREPAID	S GLOBAL FORUM TAKING PLACE IN ISRAEL IN 2018
EXPENSES	
AND	
DEFERRED	
CHARGES	

Explanation Return Reference

Form 990. Part The fair market value of investment increased in 2017 over 2016 due to a combination of be tter performance in the investment portfolio and additional assets being added to the port X. Line 11

INVESTMENTS | folio due to the formation of AJC's board designated endowment

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	PENSION AND POSTRETIREMENT CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS REPRESENTS THE NO N-CASH CHARGE TAKEN PRIMARILY DUE TO THE INCREASE IN THE DISCOUNT RATE USED IN CALCULATING THE BENEFIT OBLIGATION - 1321496, CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT1919825,

Return Explanation
Reference

Schedule R,	FOR EACH OF AJC'S FOREIGN AFFILIATES, AJC HAS CONTRACTED WITH LOCAL ACCOUNTING FIRMS TO CO
Part II Part II	MPILE FINANCIAL INFORMATION AND PREPARE LOCAL REGULATORY FILINGS ALL RECORDS ARE MAINTAIN
	ED IN THE UNITED STATES ADDITIONALLY, PERIODICALLY, AJC STAFF IN THE FINANCE, LEGAL AND A
	DMINISTRATIVE AREAS VISIT THE FOREIGN OFFICES TO REVIEW INTERNAL CONTROLS AND MONITOR COMP
	LIANCE WITH LOCAL REGULATIONS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493218009468 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2017 (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number AMERICAN JEWISH COMMITTEE 13-5563393 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (f) (b) (c) (e) Direct controlling Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state Total income End-of-year assets Primary activity or foreign country) entity

Part II 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. (a) (d) (b) (c) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No FUNDRAISING NY 501(c)(3) AJC

(1) INSTITUTE OF HUMAN RELATIONS 165 EAST 56TH STREET NEW YORK, NY 10022 23-7389215 (2)TRANS-ATLANTIC INSTITUTE ADVOCACY BE AJC Yes AJC (3)AJC BERLIN ADVOCACY GM (4) FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE ADVOCACY PL AJC Yes (5)AJC FRANCE ADVOCACY FR AJC Yes For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2017

				1		ı								
(a) Name, address, and E related organization	EIN of on	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominal Income(relat unrelated excluded fro tax under sections 51 514)	ted, total income , om r		(† Dispropi allocat	rtionate	(1) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065)	x man part	j) ral or P aging o ner?	(k Percei owne	ntage
								Yes	No		Yes	No		
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							1				<u> </u>	لليا		
Part IV Identification of Related Order because it had one or more rel							wered "Yes	" on Fo	orm 99	90, Part IV	, line	34		
(a) Name, address, and EIN of related organization	(b) Primary activity	d	(c) Legal omicile or foreign		(d) at controlling entity ((e) Type of entity C corp, S corp, or trust)	(f) Share of total Income		(g) of end- year assets	-of- Perce	h) entage ership	Sec (13	(ı) ctıon ! 3) con entıt	512(l trolle
(1)CHARITABLE REMAINDER TRUSTS (2)	INVESTMENT	CC	ountry) NY	AJC								Ye Ye	es es	No
6 RED GROUND ROAD OLD WESTBURY, NY 11568	INVESTITE IN			7.50									3	
(2)CHARITABLE REMAINDER TRUST	INVESTMENT		FL	AJC								Ye	es	
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(1)AJC BERLIN

(2)AJC BERLIN

(3)TRANS-ATLANTIC INSTITUTE

(4)TRANS-ATLANTIC INSTITUTE

(5)FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE

(6) FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE

No

Yes

1e

1f

1g

1h

1i

1j

1k

11 Yes

1m

1n 10 Yes

1p

1a | Yes

1r Yes

1s

Schedule R (Form 990) 2017

Method of determining amount involved

Yes

Page 3

Part V Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

2 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

R

Q

R

R

0

(b)

Transaction type (a-s)

(c)

Amount involved

750,000

1,132,433

750,000

773.655

180.000

706,282

FMV

FMV

FMV

FMV

FMV

FMV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. 1a 1b

1c 1d

Sale of assets to related organization(s) . . . Purchase of assets from related organization(s).

Name of related organization

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		(f) Share of total Income	of Share of end-of-year	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017

Additional Data

AJC BERLIN

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FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE

Software ID: 17005876 **Software Version:** 2017v2.2

EIN: 13-5563393

Form 990, Schedule R, Part V - Transactions With Related Organizations			
(a) Name of related organization	(b) Transaction	(c) Amount Involved	

Form 990, Schedule R, Part V -	Transactions With Related Organizations
	(a) Name of related organization

Name: AMERICAN JEWISH COMMITTEE

type(a-s)

Q

Q

Q

750,000

1,132,433

750,000

773,655

180,000

706,282

FMV

FMV

FMV

FMV

FMV FMV (d)

Method of determining amount involved