DLN: 93493227019099 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 foundations)

Department of the

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

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Open to Public Inspection

Form 990 (2018)

Cat No 11282Y

Treasury Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization AMERICAN JEWISH COMMITTEE D Employer identification number B Check if applicable ☐ Address change 13-5563393 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 165 EAST 56TH STREET ☐ Amended return □ Application pending (212) 751-4000 City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY $\,$ 100222709 G Gross receipts \$ 95,782,795 Name and address of principal officer H(a) Is this a group return for DAVID A HARRIS □Yes ☑No subordinates? 165 EAST 56TH STREET H(b) Are all subordinates NEW YORK, NY 100222709 ☐ Yes ☐No included? Tax-exempt status **✓** 501(c)(3) ☐ 501(c)() **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW AJC ORG L Year of formation 1906 M State of legal domicile NY Summary 1 Briefly describe the organization's mission or most significant activities AJC's mission is to enhance the wellbeing of the jewish people and israel, and to advance human rights and democratic values in the United States and around the world Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 4 26 Number of independent voting members of the governing body (Part VI, line 1b) 5 289 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 1,168 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 4,975 b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 52,529,883 64,972,689 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 1,191,978 1,649,731 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 4,391,342 7,093,053 633,948 719,994 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 58,747,151 74,435,467 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3). 554,925 574,099 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 33,583,001 35,137,013 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 161,075 502,367 b Total fundraising expenses (Part IX, column (D), line 25) ▶8,557,259 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 19,863,619 21,634,072 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 54,162,620 57,847,551 19 Revenue less expenses Subtract line 18 from line 12 . 4,584,531 16,587,916 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 190,550,932 189,301,304 32,975,684 21 Total liabilities (Part X, line 26) . 32,613,818 22 Net assets or fund balances Subtract line 21 from line 20 . 156,325,620 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-08-15 Signature of officer Sign Here Richard Hyne CFO Type or print name and title Date Print/Type preparer's name Preparer's signature Check I If P00504182 Paid self-employed Firm's name FRANT THORNTON LLP Firm's EIN > 36-6055558 **Preparer** Use Only Firm's address ► 757 THIRD AVENUE 3RD FLOOR Phone no (212) 599-0100 NEW YORK, NY 100172013 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) .

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2018)					Page 2
Pa	t Statement	of Program Servi	ce Accomplis	hments		
	Check if Sched	dule O contains a resp	onse or note to a	any line in this Part III		
1	Briefly describe the o	rganızatıon's mıssıon				
	round the world ADD:					ratic values in the United States HICH CAN BE FOUND ON AJC'S
2	-	, ,	ant program ser	vices during the year v	which were not listed on	. □Yes ☑No
	the prior Form 990 or					. ∟Yes ⊻No
_		se new services on Sc				
3	-	cease conducting, or n	nake significant	changes in how it cond	lucts, any program	
	services? If "Yes," describe the	se changes on Schedu	 le O			☐ Yes ☑ No
4	Section $501(c)(3)$ and		ons are required	to report the amount	e largest program services, of grants and allocations to	
4a	(Code See Additional Data) (Expenses \$	21,667,493	including grants of \$	522,455) (Revenue	\$ 841,362)
4b	(Code See Additional Data) (Expenses \$	14,020,143	including grants of \$	23,789) (Revenue	\$ 544,411)
4c	(Code See Additional Data) (Expenses \$	2,549,117	including grants of \$	0) (Revenue	\$ 98,984)
	(Code) (Expenses \$	4,248,528	including grants of \$	27,855) (Revenue	\$ 164,974)
	PARTNERS TO ADVANCE LATINO-JEWISH LEADER COLLECTIVELY WITH ITS (E G , COMBATING PROF RELATIONSHIP OF JEWS VITAL ISSUE AJC IS WO	SHARED INTERESTS AND SHIP COUNCIL, FOR EXALS PARTNERS AGAINST AN OOSALS TO BOYCOTT ISRALD IN THE DIASPORA WITH BRKING TO BRING TOGET	O VALUES, AND TO MPLE, TO WORK TO TISEMITISM AND E AEL) (2) CONTEMP THE STATE OF ISR HER THESE TWO CO	FURTHER UNDERSTANDIN DGETHER ON ISSUES OF M XTREMISM, AND FOR THE PORARY JEWISH LIFE AJC AEL AJC TAKES PUBLIC P	IG AJC CONVENED A MUSLIM-J IUTUAL CONCERN AND IMPORT, WELL-BEING OF THE JEWISH P STRIVES TO STRENGTHEN JEW OSITIONS AND HOLDS SYMPOS RENGTHEN THE TIES BETWEEN	COALITIONS WITH LIKE-MINDED EWISH ADVISORY COUNCIL AND A ANCE TOGETHER, AIC ADVOCATES EOPLE AND THE STATE OF ISRAEL ISH CONTINUITY AND TO ENRICH THE SIA AND MISSIONS ADDRESSING THIS THE TWO LARGEST JEWISH
4d		es (Describe in Sched	,			_
	(Expenses \$	4,248,528 inc	luding grants of	\$ 27,	855) (Revenue \$	164,974)
4e	_Total program serv	rice expenses ►	42,485,2	81		

Pa	tiV Checklist of Required Schedules			rage 3
Par	Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services of "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			_
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	206		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	20b 21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
			orm 001	(2018)

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ar	Checklist of Required Schedules (continued)			
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		Yes	No
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
1	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
•	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	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? If "Yes," complete Schedule L, Part II	26		No
	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 of any of these persons? If "Yes," complete Schedule L, Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28b		No
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

No

Yes

Yes

142

0

1a

1b

7a

7b

7c

7e

7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

Nο

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7d

10a

10b

11a

11b

12b

13b

13c

Yes

Yes

Yes

Nο

Nο

Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

Organizations that may receive deductible contributions under section 170(c).

d If "Yes," indicate the number of Forms 8282 filed during the year

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . .

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," did the organization notify the donor of the value of the goods or services provided?

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

19

20

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI									
Se	ection 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	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 officer, director, trustee, or key employee?		2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct su of officers, directors or trustees, or key employees to a management company or other person? •	pervision ;	3		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file	:d?	4		No				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	<u> </u>	5		No				
6	Did the organization have members or stockholders?	. [5	Yes					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one members of the governing body?		а	Yes					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholder persons other than the governing body?	s, or 7	b	Yes					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the the following	year by							
а	The governing body?	8	а	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		•		No				
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	Revenue C	ode	.)					
				Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10	Оа	Yes					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affi and branches to ensure their operations are consistent with the organization's exempt purposes?	liates,	оь	Yes					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fili form?		1a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	. L							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	13	2a	Yes					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give r conflicts?		2b	Yes					
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describedule O how this was done	I .	2c	Yes					
13	Did the organization have a written whistleblower policy?	. 1	3	Yes					
14	Did the organization have a written document retention and destruction policy?	. 1	4	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by indeperpersons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ndent							
а	The organization's CEO, Executive Director, or top management official	. 1	5a	Yes					
b	Other officers or key employees of the organization	. 1	5Ь	Yes					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with taxable entity during the year?		5a		No				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its parti in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's e status with respect to such arrangements?	exempt	5b						
Se	ection C. Disclosure								
17	List the States with which a copy of this Form 990 is required to be filed CA , CT , FL , GA , AL , HI , IL , K: , NH , NJ , NM , NC , OR , PA , RI WI								
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c) 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)	(3)s							

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest

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

policy, and financial statements available to the public during the tax year

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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	this	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees	, an	id H	lighe	st C	Compensated En	nployees	
ear • List all f compens	e this table for all persons require of the organization's current of ation Enter -0- in columns (D), (ficers, directors, E), and (F) if no	trustee	s (wl nsatı	neth on v	er ir vas į	ndıvıdu Daid	als (or organizations), re	gardless of amount	-
	of the organization's current key		•								
ho receive	organization's five current high ad reportable compensation (Box n and any related organizations										
f reportabl	of the organization's former office e compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	•'			·	•
rganızatıor	of the organization's former dire n, more than \$10,000 of reportab	le compensation	n from t	he or	gan	ızatı	on and	an	y related organization	ns	2
ompensate	s in the following order individua ed employees, and former such p	ersons	•								
_ Check	this box if neither the organizatio	n nor any relate	ed orgar	nzatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	Γ
	(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- MISC)	(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 Addition	al Data Table						Ŀ				
					l	1		l			

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
(A) Name and Title Average hours per week (list any hours		Position (do not check more than one box, unless person is both an officer and a director/trustee) Reprince to the compression of the compression							(D) (E) ortable Reportable compensation from related attion (W-			compensation W- from the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	1 2/109	9-MISC)	MISC) 2/1099-MISC)			related organizations	
See Additional Data Table														
							-							
							\vdash							
1b Sub-Total			٠.	Щ.		 					\top			
c Total from continuation sheets to Pad Total (add lines 1b and 1c)						>		3,7	730,259		0		680,156	
Total number of individuals (including of reportable compensation from the compensation)	but not limited	to thos			oove	e) who	rece	eived moi	re than \$1	.00,000	ı			
D. Dalilla annual latera formani	- CC		1.		1		1					Yes	No	
3 Did the organization list any former of line 1a? If "Yes," complete Schedule 3			ее, к	ey er •		• •	or ni	gnest cor	npensated	employee on	3		No	
4 For any individual listed on line 1a, is organization and related organization individual	the sum of repositions of the sum of repositions of the sum of the	ortable (150,00	comp 0? <i>If</i> •	ensa "Yes,	tion ," co	and o	other te Sc	compens	sation fror for such	n the	4	Yes		
5 Did any person listed on line 1a receive services rendered to the organization									ion or ind	ıvıdual for				
Section B. Independent Contract	•	ete Stri	cuare	. 3 10.	, 34	icii pei	3011	• •			5		No	
Complete this table for your five higher from the organization. Report comper	est compensate										mpen	sation		
	(A) ind business addre		,		9					(B) cription of services			C) nsation	
ESHET INCOMING										d event travel servi	ces		2,883,283	
12 NAHALAT YITZHAK ST TELAVIV IS														
TRIPLE A STUDIOS LLC									Global Foru	m Branding			564,812	
809 WEST 181ST STREET 262 NEW YORK, NY 10033														
A B DATA CLIENT TRUST ACCOUNT									Mail Fulfillment				499,175	
PO BOX 170062 MILWAUKEE, WI 532178000 MG SECURITY SERVICES LLC									Security			431,201		
MG SECURITY SERVICES LLC 133 WEST 25TH STREET SUITE 8W								Security				731,201		
NEW YORK, NY 10001 MJV MECHANICAL									Bldg Engine	eers			418,009	
18 MEADOW ST LOCUST VALLEY, NY 11560														
2 Total number of independent contractor compensation from the organization > :		not lim	ited t	o the	ose	listed	abov	ve) who r	eceived m	ore than \$100,00	00 of			
compensation from the organization												Form 99	0 (2018)	

Part		Statement of	Revenue									rage 9
		Check if Schedul	e O contains	a respo	onse or note to ar	ny line in t	hıs Part VIII					🗆
							A) revenue	Reli ex fui	(B) ated or empt nction	ı	(C) Inrelated business revenue	(D) Revenue excluded from tax under sections
	12	Federated campaig	ns	1a	90,800	<u> </u>		re	venue			512 - 514
tributions, Gifts, Grants Other Similar Amounts		b Membership dues		1 b		_						
Gra not	١,	c Fundraising events		1c	17,019,903	- 3						
, §		d Related organizatio		1d	25,000	- 0						
Gif ilar	١.	e Government grants (co	ontributions)	1e	<u> </u>	_						
ns,	1	F All other contributions,	, gıfts, grants,			_						
er S		and similar amounts n above		1f	47,836,986	5						
휼흊	۱,	g Noncash contribution										
Contributions, Gifts, Grants and Other Similar Amounts		ın lınes 1a - 1f \$										
<u>ۃ ت</u>		h Total. Add lines 1a	-1f	•			64,972,689					
3					Busine	ss Code	1 /	643,727	1.64	3,727		
۲. د ت		REGISTRATION FEES				900099	1,	6,004	<u> </u>	6,004		
a ²	b	SALE OF PUBLICATIONS	; 			511190		0,004		0,004		
Ž,	С			_								
₹	d	•										
ram	e							0		0		0 0
Program Service Revenue		All other program se				1,649,731				<u> </u>		
		Total. Add lines 2a-2			<u> </u>							
		Investment income (ii similar amounts) .			interest, and othe	er ▶	1,800,86	57			4,975	1,795,892
	4	Income from investm				•						
	5	Royalties				<u> </u>						
	6a	Gross rents	(ı) Rea		(II) Personal	_						
			1,5	63,519								
	b	Less rental expenses	2	42,703								
	c	: Rental income or	1,3	20,816		0						
	لــ	(loss)	- (1)				1,320,81	6				1 220 016
	ď	Net rental income o	r (loss) (l) Securit		(II) Other	•	1,320,61	.0		-		1,320,816
	7a	Gross amount	. ,		. ,	\dashv						
		from sales of assets other	24,2	47,106								
		than inventory										
	Ь	 Less cost or other basis and 	18,9	54,920								
	c	sales expenses Gain or (loss)	5,2	92,186		0						
		Net gain or (loss)		•	•	.	5,292,18	16				5,292,186
	8a	Gross income from f										
Other Revenue		(not including \$ contributions reporte	17,019,903 ed on line 1c)	of								
₹ 		See Part IV, line 18		а	· · ·							
æ		Less direct expense		Ь	2,149,7	05	-600,82					-600,822
hei		: Net income or (loss) : Gross income from g		-	ents •	_	-000,82	. 2				-000,822
5	Ju	See Part IV, line 19		CS]							
				a								
		Less direct expense : Net income or (loss)		b activit	les •							
		Gross sales of invent	ory, less									
		returns and allowand	ces	a								
	ь	Less cost of goods s	sold	b		\dashv						
	c	Net income or (loss)	from sales of	ınvent	tory ▶							
		Miscellaneous	Revenue		Business Code							
	11	a										
	ь									-		
	D	•										
	c					+				-		
	•											
	d	All other revenue .				+		0	(0	0
		Total. Add lines 11a			•							
	12	: Total revenue. See	Instructions					0				
							74,435,46	07	1,649,731	<u> </u>	4,975	7,808,072 Form 990 (2018)

16 Occupancy

23 Insurance .

b c d

20 Interest

21 Payments to affiliates . . .

expenses on Schedule O)

e All other expenses

17 Travel

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX										
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						
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	192,719	192,719								
2 Grants and other assistance to domestic individuals See Part IV, line 22										
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	381,380	381,380								
4 Benefits paid to or for members										
5 Compensation of current officers, directors, trustees, and key employees	3,066,812	1,924,609	440,381	701,822						
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)										
7 Other salaries and wages	23,263,247	16,565,471	2,392,577	4,305,199						
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	403,789	315,621	43,789	44,379						
9 Other employee benefits	6,831,928	4,964,115	612,180	1,255,633						
10 Payroll taxes	1,571,237	1,162,715	188,549	219,973						
11 Fees for services (non-employees)										
a Management										
b Legal	211,167	131,583	77,863	1,721						
c Accounting	420,439	239,303	181,136	0						
d Lobbying	0	0								
e Professional fundraising services See Part IV, line 17	502,367			502,367						
f Investment management fees	176,059	130,284	21,127	24,648						
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,532,879	1,614,762	918,117	0						
12 Advertising and promotion	503,972	452,604	20,460	30,908						
13 Office expenses	3,278,290	1,563,775	1,153,577	560,938						
14 Information technology	836,327	630,393	115,135	90,799						
15 Royalties										

2,727,092

2,709,389

6,472,761

1,308,461

57,847,551

547,863

308,410

148,826

2,281,295

2,571,530

5,982,054

1,110,790

42,485,280

306,803

121,451

148,826

184,638

69,983

137,665

61,378

186,457

0

6,805,012

261,159

67,876

353,042

136,293

8,557,259

Form **990** (2018)

241,060

11 Fees for services (non-employees)											
a Management											
b Legal											
c Accounting											
d Labburg											

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 .

Page **11**

Form 990 (2018)

21

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34

Liabilities 22

Assets or Fund Balances

Net

	Beginning of year		End of year
1 Cash-non-interest-bearing	17,301,994	1	21,476,549
2 Savings and temporary cash investments	5,935,726	2	7,617,800
3 Pledges and grants receivable, net	25,926,387	3	29,548,194
4 Accounts receivable, net	0	4	
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
6 Loans and other receivables from other disqualified persons (as defined unde	r		

			trustees, key employees, and highest compensated employees Complete Part II of Schedule L										
	6	Loans and other receivables from other disqualit section 4958(f)(1)), persons described in section contributing employers and sponsoring organization voluntary employees' beneficiary organizations. Part II of Schedule L	n 4958 itions c (see in	(c)(3)(B), and if section 501(c)(9) structions) Complete		6							
ete	7	Notes and loans receivable, net			0	7							
Assets	8	Inventories for sale or use			0	8							
4	9	Prepaid expenses and deferred charges			2,316,950	9							
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	34,704,247									
	b	Less accumulated depreciation	10 b	24,935,692	9,132,261	10c							
	11	Investments—publicly traded securities .			68,751,883	11	6						
	12	Investments—other securities See Part IV, line	11 .		61,185,731	12	5						
	13	Investments—program-related See Part IV, line	0	13									
	14	Intangible assets			14								
1							1						

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

persons Complete Part II of Schedule L .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

and other liabilities not included on lines 17 - 24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

complete lines 27 through 29, and lines 33 and 34.

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

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

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

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

SS	8	Inventories for sale or use		0	8		
4	9	Prepaid expenses and deferred charges	2,316,950	9	2,301,434		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D					
	ь	Less accumulated depreciation	10 b	24,935,692	9,132,261	10c	9,768,555
	11	Investments—publicly traded securities .	68,751,883	11	61,303,742		
	12	Investments—other securities See Part IV, line	11 .		61,185,731	12	57,285,030
	13	Investments—program-related See Part IV, line	11 .		0	13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			0	15	0
	16	Total assets.Add lines 1 through 15 (must equ	190,550,932	16	189,301,304		
	17	Accounts payable and accrued expenses	4,236,290	17	5,001,739		
	18	Grants payable	0	18			

10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	34,704,247			
b	Less accumulated depreciation	10b	24,935,692	9,132,261	10c	9,768,555
11	Investments—publicly traded securities .			68,751,883	11	61,303,742
12	Investments—other securities See Part IV, line	11 .		61,185,731	12	57,285,030
13	Investments—program-related See Part IV, line	11 .		0	13	
14	Intangible assets				14	
15	Other assets See Part IV, line 11			0	15	0
16	Total assets.Add lines 1 through 15 (must equ	al line	34)	190,550,932	16	189,301,304
17	Accounts payable and accrued expenses			4,236,290	17	5,001,739
18	Grants payable			0	18	
19	Deferred revenue			1,257,665	19	797,818
20	Tax-exempt bond liabilities			0	20	

0

0

27,119,863

32.613.818

28.023.000

60,615,840

69.298.274

157,937,114

190,550,932

21

22 0 23

24

25

26

27

28

29

30

31 32

33

34

27.176.127

32.975.684

26.625.682

53,964,664

75.735.274

156,325,620

189,301,304

Form **990** (2018)

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

3a

3b

No

Form 990 (2018)

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 18007697

Software Version: 2018v3.1

EIN: 13-5563393

Name: AMERICAN JEWISH COMMITTEE

Form 990 (2018)

Form 990, Part III, Line 4a:

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

GOVERNMENT AND INTERNATIONAL AFFAIRS. AIC EXCELS IN RELATIONSHIP BUILDING AND ADVOCACY AT THE HIGHEST LEVELS OF GOVERNMENT. AIC UNDERSTANDS

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. THESE RELATIONSHIPS ALLOW AJC TO PLAY A MEANINGFUL ROLE IN ADVOCATING FOR LEGISLATIVE AND EXECUTIVE ACTION BOTH IN WASHINGTON DC AND ACROSS THE WORLD AJC HAS PLAYED A VITAL ROLE IN EDUCATING MEMBERS OF GOVERNMENT'S ON ISSUES RANGING FROM COMBATING ANTISEMITISM TO PROMOTING ISRAEL'S PLACE IN THE WORLD MOREOVER, PROJECT INTERCHANGE, SENDS OVER 20 COHORTS

OF INFLUENTIAL DECISION MAKERS, JOURNALISTS, RELIGIOUS AND COMMUNITY LEADERS TO ISRAEL AND TO LEARN ABOUT THE JEWISH STATE

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 INTER-

GROUP ORGANIZATIONS. AS WELL AS CIVIL SOCIETY GENERALLY, IN ORDER TO BUILD COALITIONS AND MOBILIZE THE JEWISH COMMUNITY TO ADVOCATE ON AJC'S

Form 990, Part III, Line 4b:

THE UNITED STATES AND ABROAD

PRIORITY ISSUES IN 2018, THESE ISSUES INCLUDED AFFIRMING ISRAEL'S PLACE IN THE WORLD, COMBATING GLOBAL ANTISEMITISM, COUNTERING THE SPREAD OF RADICALISM AND EXTREMISM, AND FOSTERING AMERICAN GLOBAL LEADERSHIP REGIONAL OFFICES PERIODICALLY ENGAGE IN NATIONAL AMPAIGNS TO RAISE PUBLIC AWARENESS OF AIC PRIORITIES. SUCH AS ASKING THE ADMINISTRATION TO CREATE A SPECIAL ENVOY ON ANTISEMITISM AND PASSING HATE CRIME LEGISLATION IN

THE US AJC ALSO HAS CREATED THE LFT (LEADERS FOR TOMORROW) PROGRAM WHICH TRAINS HIGH SCHOOL STUDENTS ON HOW TO ADVOCATE FOR ISRAEL ON CAMPUS AND SPEAK OUT AGAINST ANTISEMITISM IN 2018. THE PROGRAM GREW TO BE PRESENT IN EIGHT U.S. CITIES WITH PLANS UNDERWAY TO EXPAND IT BOTH IN

Form 990, Part III, Line 4c: COMMUNICATIONS AJC ALSO RELIES ON PUBLIC ADVOCACY TO ACCOMPLISH OUR GOALS WE RELY ON OUR ACTIVE EXPANSIVE SOCIAL MEDIA ACCOUNTS AS WELL AS OUR MEDIA RELATIONS DEPARTMENT TO EDUCATE THE WORLD ABOUT OUR POSITIONS AND BUILD PUBLIC SUPPORT FOR OUR INITIATIVES. AJC OP EDS APPEAR IN DIFFERENT LANGUAGES AROUND THE GLOBE AND OUR VIDEOS HAVE THOUSANDS OF WATCHERS AJC EXPERTS ARE WIDELY CITED IN LEADING MEDIA PUBLICATIONS

AROUND THE GLOBE IN 2018, OUR #SHOWUPFORSHABBAT CAMPAIGN IN THE WAKE OF THE PITTSBURGH SHOOTING WAS VIEWED BY OVER 250 MILLION PEOPLE

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

FRANK LINDE

MATTHEW J COEN

HENRY DUBINSKY

LINDA MIRELS

ROBERT L NEWMARK

CHAIR, AUDIT COMMITTEE

ASSOCIATE TREASURER/BUDGET COMMITTEE

CHAIR, MARKETING & COMMUNICATIONS

ASSOCIATE CHAIR, BOARD OF TRUSTEES

CHAIR, LEADERSHIP DEVELOPMENT

	1 6 1					,		1	1	
	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
DAVID HARRIS	60 0	x		x				705,797	0	168,766
CHIEF EXECUTIVE OFFICER (SEE SCHEDULE J)	0 1	_ ^		^				703,797		108,700
JOHN M SHAPIRO	20 0									
PRESIDENT	0 0	X		Х				0	0	0
HADDIET D SCHIETEED	12 0									

PRESIDENT	0 0						
HARRIET P SCHLEIFER	12 0						
CHAIR, BOARD OF GOVERNORS	0 0	X	X		0	0	
MATTHEW BRONFMAN	2 0						
CHAIR, BOARD OF TRUSTEES	0 0	X	X		0	0	
SUZANNE D JAFFE	10 0		Ī				

HARRIET P SCHLEIFER	12 0		V				
CHAIR, BOARD OF GOVERNORS	0.0	^	^			0	
MATTHEW BRONFMAN	2 0		<		0	0	
CHAIR, BOARD OF TRUSTEES	0.0	^	^			0	
SUZANNE D JAFFE	10 0	V	<				
TREASURER/SECRETARY	0.0	^	۸			\	

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CHAIR, BOARD OF GOVERNORS	0.0							
MATTHEW BRONFMAN	2 0	V	V					
CHAIR, BOARD OF TRUSTEES	0 0	Α	^			0	0	0
SUZANNE D JAFFE	10 0							
		X	Х			0	0	0

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

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

	any hours	director/trustee)						organization (W-	organizations	from the
	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
MICHAEL TICHNOR	5 0									
CHAIR, REGIONAL OFFICES COMMITTEE	0.0	×						0	0	
STEVEN J WISCH	5 0									
ASSOCIATE CHAIR, BOARD OF TRUSTEES	0.0	×							0	
STEVEN L ZELKOWITZ	5 0								0	
CHAIR, PROGRAM COORDINATING COMMITTEE	0.0	×							0	
RENE-PIERRE AZRIA	2 0									
EC MEMBER	0.0	×							0	
ROBERTA S BARUCH	2 0									

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ROBERTA S BARUCH
EC MEMBER
RICHARD L BERKMAN

EC MEMBER

NED DUBILO

EC MEMBER

EC MEMBER

EC MEMBER

EC MEMBER

MARTIN KRALL

MARVIN ISRAELOW

ANTHONY E MEYER

and Independent Contractors

(A) (D) (B) (C) (E) (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

Officer

Institutional

Individual trustee or director

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0 1

45 0

0 1

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any hours

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

	for related organizations below dotted line)
BEN A PLOTKIN	5 0
EC MEMBER	0 0
DEBRA SMITH SAIDOFF	5 0
EC MEMBER	0 0
JEFEREY E STONE	5 0

and Independent Contractors

EC MEMBER

DAVID W INLANDER

ROBERT E LAPIN

KIM J PIMLEY

ALLAN J REICH

RICHARD M HYNE

MARC D STERN

JULIE SCHAIR

GENERAL COUNSEL

CHAIR, NATIONAL POLICY

CHIEF FINANCIAL OFFICER

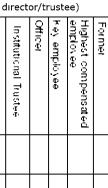
CHAIR, INTERRELIGIOUS AFFAIRS

CHAIR, CONTEMPORARY JEWISH LIFE

CHAIR, INTERNATIONAL RELATIONS

ASSOCIATE EXECUTIVE DIRECTOR/MANAGING

DIRECTOR, RESOURCE DEVELOPMENT



organization (W-

2/1099-MISC)

0

ol

293,524

239,556

284,803

organizations

(W- 2/1099-

MISC)

from the

organization and

related

organizations

Ω

0

42,824

40,503

54,262

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

Officer

key employee

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

	for related organizations below dotted line)
JASON ISAACSON	45 0
ASSISTANT EXEC DIRECTOR FOR	•••••
POLICY/MANAGING DIRECTOR OF THE OGIA	0.0
DANIEL ELBAUM	45 0
	•••••
CHIEF ADVOCACY OFFICER	0 0
STEVE BAYME	40 0

and Independent Contractors

STEVE BAYME

JANET BECKER

AFFAIRS

RABBI DAVID ROSEN

ROBIN LEVENSTON

ROBERT LEIKIND

DINA SIEGEL VANN

DIRECTOR, BILLA

MICHAEL GILBERT

DIR, CONTEMPORARY JEWISH LIFE

ASSISTANT EXECUTIVE DIRECTOR/MANAGING

DIRECTOR, STRATEGIC IMPLEMENTATION & HR

DIRECTOR OF INTERNATIONAL INTERRELIGIOUS

EXECUTIVE DIRECTOR, PROJECT INTERCHANGE

DIRECTOR REGIONAL OFFICE ADVANCEMENT

REGIONAL DIRECTOR, AJC BOSTON

Institutional

indradual trustee or director

director

0.0

45 0

0 0

40.0

0 0

40 0

0.0 40 0

0 0

Former

Highest compensated employee

2/1099-MISC) 265,831 289,614

267,566

279,445

241,226

223,544

215,084

212,492

211,777

(W- 2/1099-

MISC)

organization and

related

organizations

39,594

12,067

39,775

42,885

92,864

8,097

51,169

41,377

45,973

SCHEDULI Form 990 or 90EZ)		Complete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable 990 or Form 99	organization or trust. 00-EZ.	a section	2018		
epartment of the Tro ternal Revenue Ser	-ice	► Go to	www.irs.gov/Forms	9 <u>90</u> for the late	est information		Open to Public Inspection		
ame of the org MERICAN JEWISH							mployer identification number		
Part I Re	ason for Pub	lic Charity Stat	us (All organization	s must comple	te this part.) S	13-5563393 See instructions.			
			e it is (For lines 1 thro						
L 🗌 A ch	urch, conventior	n of churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).			
2 🔲 A sc	hool described in	n section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))				
A ho	spital or a coope	erative hospital ser	vice organization desci	rıbed ın section	170(b)(1)(A)(iii).			
	edical research o e, city, and stat	-	ed in conjunction with	a hospital descr	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's		
	rganization opei 1)(A)(iv). (Coi		t of a college or univer	rsity owned or o	perated by a gov	ernmental unit descri	bed in section 170		
		•	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).			
		normally receives (A)(vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	ınıt or from the gener	al public described ii		
B ☐ A co	mmunity trust d	lescribed in sectio	170(b)(1)(A)(vi)	(Complete Part I	I)				
			escribed in 170(b)(1) ee instructions Enter				lege or university or		
from inve	activities relate stment income a	ed to its exempt fur	(1) more than 331/3% actions—subject to certiness taxable income (leading)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross		
•			d exclusively to test for	r public safety S	ee section 509	(a)(4).			
mor	publicly suppo	rted organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509 (a)(2). See section 509(a			
Typo	e I. A supporting nization(s) the p	g organization oper	ated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by			
man	agement of the		ervised or controlled in ation vested in the sand C.						
			supporting organizations) You must com		•	, -	ated with, its		
Type	e III non-funct	tionally integrate ed The organizatio	d. A supporting organi n generally must satis rt IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported orgai			
	•	•	ved a written determin	•		pe I, Type II, Type II	I functionally		
		III non-functionally orted organizations	integrated supporting	organization	,		·		
			ipported organization((m) Amount of	(A		
` '	of supported nization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)		
				Yes	No				
tal									
	Doduction Act	Notice, see the I	netructions for	L Cat No 1128!	5F .	 Schedule A (Form 9	00 or 000-E7\ 201		

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Schedule A (Form 990 or 990-EZ) 2018

(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.)

S	ection A. Public Support						
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and		.,				
	membership fees received (Do not include any "unusual grant")	48,355,580	47,969,581	67,120,436	52,529,883	64,972,689	280,948,169
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						0
	the organization without charge						O
4	Total. Add lines 1 through 3	48,355,580	47,969,581	67,120,436	52,529,883	64,972,689	280,948,169
5	The portion of total contributions by						
	each person (other than a governmental unit or publicly						
	supported organization) included on						34,158,663
	line 1 that exceeds 2% of the						, ,
	amount shown on line 11, column						
-	(f) Public support. Subtract line 5					+	
	from line 4						246,789,506
S	ection B. Total Support						
	Calendar year	(a)2014	(b) 2015	(c)2016	(d) 2017	(e)2018	(f)Total
_	(or fiscal year beginning in) ► Amounts from line 4	48,355,580	47,969,581	67,120,436	52,529,883	64,972,689	280,948,169
8	Gross income from interest,	46,333,360	47,909,361	07,120,430	32,329,883	04,972,009	280,948,109
٠	dividends, payments received on						
	securities loans, rents, royalties	1,893,473	1,939,512	2,087,712	2,732,041	3,364,386	12,017,124
	and income from similar sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried on						0
	the business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital	1,623,124	1,991,221	1,396,717	1,254,092	1,548,883	7,814,037
11	assets (Explain in Part VI) Total support. Add lines 7 through						
	10						300,779,330
12	Gross receipts from related activities,	etc (see instructio	ns)			12	6,468,229
13	First five years. If the Form 990 is fo	_			-	· · · · · <u>-</u>	nization,
	check this box and stop here					<u></u>	
	ection C. Computation of Public						
	Public support percentage for 2018 (lin			olumn (f))		14	82 05 %
	Public support percentage for 2017 Sc					15	88 98 %
16a	33 1/3% support test—2018. If the	organization did n	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, check this b	ox

8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,893,473	1,939,512	2,087,712	2,732,041	3,364,386	12,017,124
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	1.623.124	1.991.221	1.396.717	1.254.092	1.548.883	7.814.037

b 33 1/3% support test-2017. 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-2018. 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—2017. 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 IIII Support Schedule for	Organization	s Described in	Section 509(a	a)(2)		
	(Complete only if you c	hecked the box	on line 10 of Pa	art I or if the or	ganization failed		er Part II. If
	the organization fails to	qualify under	the tests listed b	pelow, please co	omplete Part II.))	
Se	ection A. Public Support		T	Г			1
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
•	the organization without charge						
6 72	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and						
/ a	3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ection B. Total Support						
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
0	(or fiscal year beginning in) ► Amounts from line 6						
L0a	Gross income from interest,						
LUa	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
Ь	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	ı ı's fırst, second. th	urd, fourth, or fift	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	ntage				
15	Public support percentage for 2018 (lin	e 8, column (f) d	ıvıded by line 13,	column (f))		15	
16	Public support percentage from 2017 S	ichedule A, Part I	II, line 15			16	
Se	ection D. Computation of Investi	ment Income	Percentage				
17	Investment income percentage for 201			lıne 13, column (f))	17	
18	Investment income percentage from 2	017 Schedule A,	Part III, line 17			18	
	331/3% support tests—2018. If the		•	on line 14, and lir	ne 15 is more than		e 17 ıs not
	more than 33 1/3%, check this box and						▶□
	33 1/3% support tests—2017. If the						
J	not more than 33 1/3%, check this box	-			*		▶ □
20	Private foundation. If the organization	-	-				▶□

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Page 4

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

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)

answer line 10b below

the organization had excess business holdings)

Schedule A (Form 990 or 990-EZ) 2018

Section A. All Supporting Organizations Yes

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	
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) 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

2 3a 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

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 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 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 4b supervised by or in connection with its supported organizations 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 4c 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 5a amendment to the organizing document)

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (1) its supported organizations. (11) 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) 7

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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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

organization had an interest? If "Yes," provide detail in Part VI. 9b

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

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

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

9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding 10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pa	rt IV Supporting Organizations (continued)					
	cupper unity or gamma units (community)		Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?			<u> </u>		
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the		\vdash			
u	governing body of a supported organization?	11a				
h	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	110				
	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	\sqcup			
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					
S	ection C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
_	,, , , , , , , , , , , , , , , , , , , ,			<u> </u>		
	ection D. All Type III Supporting Organizations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	j				
		1	\vdash			
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	3				
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	ions)				
	The organization satisfied the Activities Test Complete line 2 below	-				
	b					
	c	ınstru	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.		\vdash			
	 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? Provide details in Part VI. 	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	26				

m -	
/I) See	
ıgh E	
(B) Current Year	
(optional)	

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2018

Page 6

	Check here if the organization satisfied the Integral Part Test as a qualifying trust on instructions. All other Type III non-functionally integrated supporting organizations in		
~		(A) Prior Year	

	instructions. All other Type III non-functionally integrated supporting organiza	tions i	must complete Sections A	through E
	Section A - Adjusted Net Income		(A) Prior Year	(B) C (o
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		

4 5

Add lines 1 through 3

Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions)

1

5

7

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)

Section B - Minimum Asset Amount

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)

a Average monthly value of securities **b** Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c)

e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d

Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)

5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 035 6

7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

8

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

4

Enter greater of line 2 or line 3

5 Income tax imposed in prior year

temporary reduction (see instructions)

instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

5

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2 3 4

6

7

8

1

1a

1b

1c 1d

2

3

4

5

6

7

8

1

6

(A) Prior Year

a Applied to underdistributions of prior years

b Applied to 2018 distributable amount c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions 6 Remaining underdistributions for 2018 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 2019. Add lines

31 and 4c 8 Breakdown of line 7 a Excess from 2014.

Schedule A (Form 990 or 990-EZ) (2018)

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Page 8 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI Section A, lines 1, 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, Part IV, Section D, 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 Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation Schedule A. Part II. Line 10 DESCRIPTION - LEASE TERMINATION, COLUMN A - , COLUMN B - 545877 0, COLUMN C - , COLUMN D -, COLUMN E - , COLUMN F - 545877 0, DESCRIPTION - OTHER INCOME, COLUMN A - , COLUMN B - 8 Other Income 02 0, COLUMN C - , COLUMN D - , COLUMN E - , COLUMN F - 802 0, DESCRIPTION - GROSS INCOME FROM FUNDRAISING EVENTS NOT INCLUDING CONTRIBUTIONS REPORTED ON PART VIII, LINE 1C. COLUMN A - 1623124 0. COLUMN B - 1444542 0. COLUMN C - 1396717 0. COLUMN D - 1254092 0. COLUMN E

- 1548883 0, COLUMN F - 7267358 0,

Schedule A (Form 990 or 990-EZ) 2018

efile GRAPHIC print - DO NOT PROCESS As Filed Data SCHEDULE C Political Campaign ar

(Form 990 or 990-

Department of the Treasury

EZ)

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

DLN: 93493227019099

Open to Public Inspection

mem	al Revenue Service								
		on Form 990, Part IV, Line 3, or Form		e 46 (Politic	al Campaigi	n Activities), then			
		implete Parts I-A and B. Do not complete 501(c)(3)) organizations. Complete Part		Do not com	plete Part I-B	}			
• 5	 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 								
	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								
		at have filed Form 5766 (election under at have NOT filed Form 5768 (election u							
f the	e organization answered "Yes" o	on Form 990, Part IV, Line 5 (Proxy Ta							
	xy Tax) (see separate instruction								
	Section 501(c)(4), (5), or (6) organ	Zations Complete Part III		T E	mplover ide	entification number			
	ERICAN JEWISH COMMITTEE								
Do:	t I-A Complete if the orga	anization is exempt under section	on FO1(s) or is		.3-5563393				
		·					_		
1	"political campaign activities")	nization's direct and indirect political ca	mpaign activities in	Part IV (see	e instructions	, for definition of			
2	Political campaign activity expen	ditures (see instructions)			>	\$			
3	Volunteer hours for political cam	paign activities (see instructions)							
Par	t I-B Complete if the orga	anization is exempt under section	on 501(c)(3).						
1	Enter the amount of any excise t	ax incurred by the organization under s	section 4955		>	\$			
2	Enter the amount of any excise t	ax incurred by organization managers i	under section 4955		•	\$			
3	If the organization incurred a sec	ction 4955 tax, did it file Form 4720 for	this year?			☐ Yes ☐ N	О		
4a	Was a correction made?					☐ Yes ☐ N	О		
b	If "Yes," describe in Part IV								
Par	t I-C Complete if the orga	anization is exempt under secti	on 501(c), exce	ept section	n 501 (c)(3	;).			
1	Enter the amount directly expend	ded by the filing organization for section	n 527 exempt funct	ion activities	s >	\$			
2	Enter the amount of the filing or function activities	ganization's funds contributed to other o	organizations for se	ection 527 ex	xempt ▶	\$			
3	Total exempt function expenditu	res Add lines 1 and 2 Enter here and c	on Form 1120-POL,	line 17b	>	\$			
4	Did the filing organization file Fo	rm 1120-POL for this year?				🗌 Yes 🔲 N	o		
5	organization made payments Fo of political contributions received	employer identification number (EIN) o or each organization listed, enter the am if that were promptly and directly deliven tee (PAC) If additional space is needed	nount paid from the red to a separate p	filing organ olitical orgar	ızatıon's fund nızatıon, such	ls Also enter the amount			
	(a) Name	(b) Address	(c) EIN		ınt paıd from				
					ganızatıon's none, enter	contributions receive and promptly and			
					-0-	directly delivered to			
						separate political organization If none	_		
						enter -0-	-,		
1									
2									
						_	_		
3									
4									
5									

Grassroots ceiling amount

	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file Form 5768 (election under section 501(h)).	d			F	age u
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)			(b)	
activi	+v	Yes	No		Amou	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?	Yes				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
С	Media advertisements?		No			
d	Mailings to members, legislators, or the public?	Yes				12,96
е	Publications, or published or broadcast statements?		No			
f	Grants to other organizations for lobbying purposes?		No			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				68,68
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	Other activities?		No			
j	Total Add lines 1c through 1i					81,65
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6).	5), or	section	n		
	301(c)(0).				Yes	No
1	Were substantially all (90% or more) 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 carry over lobbying and political expenditures from the prior year?			3		
Par	tIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	5), or	section	n 5	01(c)(6)
	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part I	II-A,	line 3	is		
1	answered "Yes." Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	-				
_	expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
	expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	rt IV Supplemental Information					
Prov	vide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Fructions), and Part II-B, line 1. Also, complete this part for any additional information	art II-A	, lines :	Lanc	2 (se	e
	Return Reference Explanation					
Sche	dule C, Part II-B, Line 1 DETAILED DURING 2018, AJC SOUGHT TO INFLUENCE STATE, FEDERAL, AND NATIONAL	POL ICY	THROU	IGH [DIREC	т
	RIPTION OF THE LOBBYING CONTACT WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS A	AT THE S WITH TH DING EX S LEGIS SUPPO FROM, A ENSIVE	STATE A HESE IN ISTING LATION RT FOR IND SAI REFOR	AND I IDIVI I OR I (IN I U S NCTI	EDER DUAL PENDI CLUDI -ISRA ONS	AL S IN NG NG
	DURING 2018, AJC SOUGHT TO INFLUENCE STATE, FEDERAL, AND NATIONAL CONTACT WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS A LEVEL AJC STAFF AND LAY LEADERS HELD MEETINGS ON A REGULAR BASIS CONTACTING FEDERAL AND STATE AGENCY AND ELECTED OFFICIALS REGARI LEGISLATION, AJC'S ACTIVITIES FOCUSED PRINCIPALLY ON FOREIGN AFFAIR SANCTIONING HEZBOLLAH AND HAMAS AS TERRORIST ORGANIZATIONS AND COOPERATION), MEASURES DIRECTED AGAINST BOYCOTT OF, DIVESTMENT AGAINST ISRAEL, IMMIGRATION POLICY (INCLUDING SUPPORT OF COMPREH INITIATIVES RELATING TO CIVIL RIGHTS, CIVIL LIBERTIES, AND RELIGIOUS	AT THE S WITH TH DING EX S LEGIS SUPPO FROM, A ENSIVE	STATE A HESE IN ISTING LATION RT FOR IND SAI REFOR	AND I IDIVI I OR I (IN . U S NCTI	EDER DUAL PENDI CLUDI -ISRA ONS	AL S IN NG NG

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

(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to <u>www.irs.qov/Form990</u> for the latest information.

DLN: 93493227019099OMB No 1545-0047

2018

Open to Public Inspection

	me of the organization FRICAN JEWISH COMMITTEE			Employer identification number
AIME	RICAN JEWISH COMMITTEE			13-5563393
Pa	organizations Maintaining Donor Advi			or Accounts.
	Complete if the organization answered "Ye		art IV, line 6. advised funds	(b)Funds and other accounts
1	Total number at end of year	(a) Bollor	advisca ranas	(b) 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			
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex			Ivised funds are the
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?			be used only for
Pa	rt III Conservation Easements. Complete if th	ie organization ans	swered "Yes" on Forr	
1	Purpose(s) of conservation easements held by the organ	nization (check all the	at apply)	
	Preservation of land for public use (e g , recreation	or education)	Preservation of an	historically important land area
	Protection of natural habitat		Preservation of a d	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservatio	n contribution in the for	rm of a conservation Held at the End of the Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
c	Number of conservation easements on a certified historic	c structure included i	n (a)	2c
d	Number of conservation easements included in (c) acquistructure listed in the National Register	red after 7/25/06, ar	nd not on a historic	2d
3	Number of conservation easements modified, transferre tax year ▶	d, released, extingui	shed, or terminated by	the organization during the
4	Number of states where property subject to conservatio	n easement is locate	d ▶	
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		g, inspection, handling	of violations,
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of viol	ations, and enforcing co	
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violation	s, and 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 red	quirements of section 1	70(h)(4)(B)(ı)
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 orga		nse statement, and
Par	t III Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historica		er Similar 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 finan	6 (ASC 958), not to public exhibition, edi	report in its revenue sta ucation, or research in f	
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publifollowing amounts relating to these items			
(i) Revenue included on Form 990, Part VIII, line 1			▶ \$
(i	i)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:			
а	Revenue included on Form 990, Part VIII, line 1	,	-	▶ \$
b	Assets included in Form 990, Part X			- \$

Cat No 52283D

Schedule D (Form 990) 2018

Par	t III	Organizations Ma	aintaining Colle	ections of Ar	t, Histori	cal T	reası	ires, or Other	Similar As	sets (conti	nued)	
3		the organization's acq (check all that apply)	uisition, accession,	and other reco	ords, check	any of	the fo	llowing that are a	significant u	se of its coll	ection	
а		Public exhibition			d		Loan	or exchange pro	grams			
b		Scholarly research			e		Othe	r				
c		Preservation for future	generations									
4	Provid Part X	de a description of the G	organization's colle	ections and expl	ain how the	ey furtl	ner the	e organization's e	xempt purpos	se in		
5		g the year, did the orga s to be sold to raise fur							nılar	☐ Yes	□ N	o
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.			Form 990	, Part	IV, lı	ne 9, or report	ed an amou	nt on Form	า 990,	Part
1a		e organization an agent ded on Form 990, Part)		n or other interi	mediary for	contri	bution	s or other assets	not	Yes	□ N	o
b	If "Ye	es," explain the arrange	ement in Part XIII a	and complete th	ne following	table			Αr	nount		_
С	Begin	ning balance						1c				_
d	Addıtı	ions during the year						1d				_
e	Dıstrıl	butions during the year	-					1e				_
f	Endın	ig balance						1f				_
2a	Did +h	ne organization include	an amount on For	m 000 Part V I	line 21 for	occrou	or cu	istodial associat li	ability?	□ vaa	□ N	_
_		_							•		ШΝ	U
b		es," explain the arrange			•			•				
Pa	rt V	Endowment Fund	is. Complete ii t	(a)Current year		rior yea		(c)Two years back	(d)Three year		our year	re back
1a	Beainn	ing of year balance .		114,677,2		81,40		71,657,000		61,265		436,448
	-	outions	· · · ·	5,099,8		24,283		7,982,610	<u> </u>	95,237		484,827
		vestment earnings, gair	s and losses	-10,972,		13,452		5,018,535		10,869		923,814
		or scholarships	-	162,3	364	335	5,807	413,428	3 4	147,813		405,072
		expenditures for facilities	. -				-	,		,		
٠		ograms		3,409,4	144	3,805	5,812	2,702,171	. 3,5	39,262	2,	765,854
f	Admini	strative expenses .	[359,:	150	318	3,081	141,207	' 1	.01,558		112,898
g	End of	year balance	[104,873,	778	114,677	7,296	81,401,339	71,6	557,000	79,	561,265
2	Provid	de the estimated percei	ntage of the currer	nt year end bala	nce (line 1	g, colu	mn (a)) held as	•	•		
а	Board	d designated or quasi-e	ndowment ▶	18 7 %								
ь	Perma	anent endowment 🕨	72 23 %									
С	Temp	orarily restricted endov	vment ► 9 07	7 %								
-		ercentages on lines 2a		l equal 100%								
3a	Are th	here endowment funds	not in the possessi	on of the organ	nization that	t are h	eld an	d administered fo	r the			
	_	nization by									Yes	No
		nrelated organizations				•				3a(i)	 	No
L		elated organizations .				ه . اکامانام	, .			3a(ii)	_	<u> </u>
		es" on 3a(II), are the rel Tibe In Part XIII the Inte	-				•			3b	Yes	<u> </u>
4					ndowment I	unus						
Fel	rt VI	Land, Buildings, Complete if the org			Form 990	. Part	TV li	ne 11a. See Fo	rm 990 Par	t X. line 1	0.	
	Descri	ption of property	(a) Cost or othe (investmen	r basis (b)	Cost or other			(c) Accumulated			ook valu	e
	Land					4:	30,126					430,126
	Building						32,814		13,597,370			1,385,444
		old improvements					36,365		1,617,669			2,018,696
		nent					54,942		9,720,653			2,934,289
u	-quipii	icinc i i i		ı		12,0	, 5 .2	I	5,.25,000			-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

art VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	trie organization ans	swered "Yes" on I	rorm 990, Part IV, line 11b).
(a) Description of security or category (including name of security)	(b) Book value		c) Method of valuation or end-of-year market value	
.) Financial derivatives		Cost	5. End 5. year market value	
2) Closely-held equity interests				
) long/short equities	16,872,22	7	F	
state of Israel bonds	127,45	5	F	
multistrategy hedge funds	9,455,14	Э	F	
) debt securities	5,644,60	5	F	
) fixed income mutual funds	8,546,54	7	F	
equity funds	1,212,90	1	F	
) 1-3 year us treasury index fund	15,426,14		F	
)	13,420,14	<u> </u>		
tal. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 57,285,03	0		
Investments—Program Related.	•		000 Part V June 13	
Complete if the organization answered 'Yes' on (a) Description of investment	(b) Book valu		c) Method of valuation	
			or end-of-year market value	
)				
)				
)				
)				
r)				
tal. (Column (b) must equal Form 990, Part X, col (B) line 13)	ed 'Yes' on Form 990.	Part IV line 11d So	ee Form 990. Part X. line 15	
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description		Part IV, line 11d Se	ee Form 990, Part X, line 15	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answers (a) Description		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answers (a) Description		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answers (a) Description)))))))))		Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) Description (Part IV, line 11d Se		value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answers (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) Description (on		(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) Description (h) Description (answered 'Yes' on F		(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description below: tal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	answered 'Yes' on F		(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description be a complete if the organization answere (a) Description column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	answered 'Yes' on F	Form 990, Part IV	(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description tal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes crued unfunded pension liability	answered 'Yes' on F		(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description be a complete if the organization answere (a) Description column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes crued unfunded pension liability her retirement benefits	answered 'Yes' on F		(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) Description (h) Description (h) Description (h) Description of liability	answered 'Yes' on F	20,019,837 3,410,523 1,913,179 1,798,224	(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) Description (g) Description (g) Description of liability (g) Description	answered 'Yes' on F	20,019,837 3,410,523 1,913,179	(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) Description (g) Description of liability (her retirement benefits aritable gift annuities is eobligations curity deposits	answered 'Yes' on F	20,019,837 3,410,523 1,913,179 1,798,224	(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) Description (g) Description (g) Description (g) Description of liability (g) Description of liability (g) Description of liability (g) Pederal income taxes (g) Description of liability (her retirement benefits (her retirement benefits)	answered 'Yes' on F	20,019,837 3,410,523 1,913,179 1,798,224	(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description (b) Description (c) Description (a) Description (b) Description (c) Description (c) Description (d) Description (e) Description (f) Description (g) Description (g) Description (g) Description (h) Ine 15) (h) Description of liability (h) Federal income taxes (g) Description of liability (h) Descrip	answered 'Yes' on F	20,019,837 3,410,523 1,913,179 1,798,224	(b) Book	value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13) art IX Other Assets. Complete if the organization answere (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) Description (g) Description of liability (h) Description of liability (h) Description of liability (h) Pederal income taxes (g) Description of liability (h) Pederal income taxes (h) Description of liability (h) Pederal gift annuities (h) Description of liability	answered 'Yes' on F	20,019,837 3,410,523 1,913,179 1,798,224	(b) Book	value

Schedule D (Form 990) 2018

Pai		e venue per Audited Financial Staten Jization answered 'Yes' on Form 990, Pa		_	Return	
1		support per audited financial statements .			1	
2	Amounts included on line 1 but n	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	investments	2a			
b	Donated services and use of facili	nties	2b			
c	Recoveries of prior year grants		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 VIII, line 12, but not on line 1				
а	Investment expenses not include	ed 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 4	c. (This must equal Form 990, Part I, line 12) .		5	
Par	t XII Reconciliation of Ex	penses per Audited Financial State	ments	With Expenses pe	r Return.	
1		ization answered 'Yes' on Form 990, Pa			1	
2	Amounts included on line 1 but n				1	
		, ,	ء ا	I		
a	Donated services and use of facili		2a 2b		_	
b	Prior year adjustments		F		_	
С.	Other losses		2c		_	
d	Other (Describe in Part XIII)		2d		\dashv \Box	
e	Add lines 2a through 2d				2e	
3					3	
4	· ·	Part IX, line 25, but not on line 1:	1.	I		
a	•	ed on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIII)		4b		⊣ .	
С					4c	
5		4c. (This must equal Form 990, Part I, line 1	8).		5	
	t XIII Supplemental Info					
		Part II, lines 3, 5, and 9, Part III, lines 1a and s 2d and 4b Also complete this part to provide			art V, line 4, Pa	rt X, line 2, Part
	Return Reference		Ex	planation		
See A	Addıtıonal Data Table					
		+				

Page **4**

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: 18007697
Software Version: 2018v3.1

EIN: 13-5563393

Name: AMERICAN JEWISH COMMITTEE

Supplemental Information

liability

Supplemental Information	
Return Reference	Explanation
	Accrued unfunded pension liability of \$20,019,837 represents the excess of pension benefit obligation over the assets of the frozen pension plan

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

_ _ _

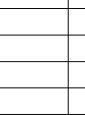
	le GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493227							
SCHEDULE F (Form 990)	tatement of	Activities (Outside the Uni	ted States	OMB No 1545-0047			
	Complete if the organ		res" to Form 990, Part IV, I o Form 990.	ine 14b, 15, or 16.	2018			
Department of the Treasury Internal Revenue Service	Zilopection							
Name of the organization AMERICAN JEWISH COMMITTEE					ntification number			
General Informa Form 990, Part IV,		s Outside the U	Inited States. Comple	te if the organization	answered "Yes" to			
For grantmakers. Does to other assistance, the grant to award the grants or assistance.	tees' eligibility for t			-	✓ Yes □ No			
2 For grantmakers. Described outside the United States		anızatıon's proce	dures for monitoring the	use of its grants and o				
3 Activites per Region (The fo	ollowing Part I, line 3	table can be dupli	cated if additional space is	needed)				
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a (f) Total expenditures for and investments in region			
See Add'l Data								
3a Sub-total b Total from continuation sheet		3 87			24,668,795			
Part I c Totals (add lines 3a and 3b)	1	3 87			24,668,795			

Page 2

Part II	Grants a	ind Other As	sistance to Organ	izations or	Entitie	es Outside the	e Uni	ted States.	Comple	ete if the organization	n answered "Yes" t	o Form 990, Part
	IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.											

any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (q) Amount (h) Description (i) Method of of non-cash organization section cash grant cash of non-cash valuation grant and EIN (If (book, FMV, disbursement assistance assistance applicable) appraisal, other) See Add'l Data





13	
Schedule F (Form 990) 2018	

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

Schedule F (Form 990) 2018							Page 3
Part IIII Grants and Oth	her Assistance to	Individuals	Outside the Unite	ed States. Complete if	f the organization an	nswered "Yes" to Form 9	90, Part IV, line 16.
Part III can be c	duplicated if addition	<u>onal space is n</u>	ieeded.				
(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)
				!			
				!			

Schedule F (Form 990) 2018

Sched	dule F (Form 990) 2018		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, don't file with Form 990)		□ 7
		∐ 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, don't file with Form 990)	☐ Yes	✓ No

Schedule F (Form 990)	2018 Page 5
Provide t amounts method) any addi	nental Information he information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide cional information (see instructions). pplemental Information
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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 3 FOREIGN INVESTMENTS	AJC INVESTS IN SEVERAL ENTITIES THAT ARE LEGALLY DOMICILED IN FOREIGN JURISDICTIONS THE 2018 END OF YEAR VALUE OF INVESTMENTS DOMICILED IN CENTRAL AMERICA/CARIBBEAN AND IN MIDDLE EAST/NORTH AFRICA WERE \$15,951,486 AND 1,651,709, RESPECTIVELY

990 Schedule F, Supplemental Information

Return Reference

	· ·
Schedule F, Part I, Line 2	AJC'S GRANT RECIPIENTS CERTIFY THAT THE GRANTS WILL BE USED IN COMPLIANCE WITH ANY
PROCEDURES FOR	APPLICABLE UNITED STATES (US) LAWS, US AND INTERNATIONAL STATUTES, REGULATIONS, RULES
MONITORING USE OF	AND EXECUTIVE ORDERS, INCLUDING ALL ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS,
GRANT FUNDS	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

Explanation

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: 18007697 **Software Version:** 2018v3.1 **EIN:** 13-5563393

Name: AMERICAN JEWISH COMMITTEE

IADVOCACY.

3,907,819

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of 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) Total expenditures for region
Central America and the Caribbean	0	0	Investments		15,951,486

26 Program Services

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 2.581.915 Middle East and North Africa 11 Investments 1,651,709

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) Europe (Including Iceland and 22.165 26 |Grantmaking Greenland) Sub-Saharan Africa 89,215 0 |Grantmaking

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) East Asia and the Pacific IADVOCACY 125.421 1 Program Services Middle East and North Africa 11 Grantmaking 270,000

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 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 39.103 North America (Canada & 0 Program Services IADVOCACY 29,962 Mexico only)

(i) Method of (b) IRS code (h) Description (f) Manner of (a) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region cash non-cash (book, FMV, and EIN(ıf cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Grant to support a 95,000 WIRE TRANSFER land North lioint Jewish-Africa Israelı Arab hıgh School choir project, designed to bring about inter-group understanding Middle East Grant designated 70,000 WIRE TRANSFER land North to purchase 1,940

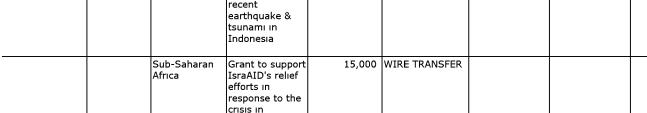
Form 990 Schedule F Part II - Grants or Entities Outside The United States

6-person tents for Syrians displaced by the fighting

Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation ¹(e) Amount of (a) Name of section (d) Purpose of grant (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Grant to fund 69,215 WIRE TRANSFER Africa Holocaust Education lın South Africa Middle East Grant designated to 25.000 WIRE TRANSFER land North support IsraAID'S Africa relief efforts in response to the destruction caused by Typhoon Ompong/Mangkhut in the Philippines

(I) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section Ωf (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Grant to support 25,000 WIRE TRANSFER and North IsraAID's relief Africa lefforts in response to the destruction caused by the recent earthquake & tsunamı ın Indonesia



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

Vanuatu

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (g) 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) Middle East Grant to support I 15,000 WIRE TRANSFER and North IsraAID's relief Africa lefforts in response to the Volcan de Fuego eruption in Guatemala Middle East Grant 15,000 WIRE TRANSFER and North designated to Africa support IsraAID's relief lefforts in response to

flooding in Kerala, India

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) 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 (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East and Contribution 15,000 WIRE TRANSFER North Africa Idesignated for the Burning Bush Marketing Project in South Africa AJC Contribution 10,000 WIRE TRANSFER Europe (Including lfor Belzec Iceland and Memorial Project Greenland) on Holocaust studies

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV. cash non-cash and EIN(If cash grant non-cash organization grant disbursement assistance appraisal, applicable) assistance other) Grant to support 10,000 WIRE TRANSFER Europe l(Includina project Defending Iceland and Independent Civil Greenland) Society from Rampant Authoritarianism Middle East and Grant to support 10,000 WIRE TRANSFER IsraAID's relief

North Africa

lefforts in response to Typhoon Urduia lin the Philippines

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

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

licensing

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

DLN: 93493227019099 OMB No 1545-0047

Open to Public Inspection

ame of the organization						Employer ide	ntification number
MERICAN JEWISH COMMITTEE						13-5563393	
Part I Fundraising Activ Form 990-EZ filers		_		answered "Yes" on Fo part.	rm 990,	Part IV, line 1	7.
Indicate whether the organize	ation raised funds th	rough any	of the fo	llowing activities Check	all that a	oply	
a 🗹 Mail solicitations			е	✓ Solicitation of non-	governm	ent grants	
b Internet and email solicit	ations		f	Solicitation of gove	ernment <u>c</u>	grants	
c Phone solicitations			g	Special fundraising	events		
d 🗹 In-person solicitations							
2a Did the organization have a vor key employees listed in Fo						· —	es 🗌 No
b If "Yes," list the ten highest p to be compensated at least \$			idraisers)	pursuant to agreements	under wh	nich the fundraise	er is
i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	or re fundra	nount paid to etained by) liser listed in col (i)	(vi) Amount paid to (or retained by) organization
	MATI	Yes	No				
AB DATA P O BOX 170062	MAIL SOLICITATION & PROGRAM ADVOCACY	Yes		736,186		502,367	233,819
MILWAUKEE, WI 532178000							
otal			>	736,186		502,367	233,819
List all states in which the orga	nization is registered	d or licens	ad to solu	cit contributions or has b		·	·

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

Sche	dule G (Form 990 or 990-EZ) 2018				P.	age 3
11	Does the organization conduct gaming	activities with nonmembers?		Yes	□No	
12	Is the organization a grantor, beneficial formed to administer charitable gamin	ry or trustee of a trust or a member of a partnership or ot 3 [?]	her entity	□Yes	_	
13	Indicate the percentage of gaming act	vity conducted in		- 133		
а	The organization's facility		13a	a		%
b	An outside facility		13i)		%
14	Enter the name and address of the per	son who prepares the organization's gaming/special event	s books and records	5		
	Name •					
	Address ►					
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives ga	ming	□Yes	□No	
b		evenue received by the organization > \$	and the			
c	If "Yes," enter name and address of th	e third party				
	Name ►					
	Address ►					
16	Gaming manager information					
	Name ▶					
	Gaming manager compensation ► \$					
	Description of services provided ▶					
	☐ Director/officer	☐ Employee ☐ Independent co	ntractor			
17	Mandatory distributions					
а	•	e law to make charitable distributions from the gaming pro	oceeds to	П.,	П.,	
b		red under state law distributed to other exempt organizat	ions or spent	☐Yes	∐ No	
_	in the organization's own exempt activ	· · · · · · · · · · · · · · · · · · ·				
Par		on. Provide the explanations required by Part I, line 5c, 16, and 17b, as applicable. Also provide any ad				i.
	Return Reference	Explanation	<u> </u>			
Sche	dule G, Part I, Line 2b(v) AB DATA	AMOUNTS IN COLUMN (V) REPRESENT PAYMENTS TO PRIFUNDRAISING AND PROGRAMMATIC SERVICES AND REIF SUCH AS PRINTING, PAPER, ENVELOPES, ETC				 S,
	dule G, Part II, Line 9(d) Other direct aising event expenses	AJC REPORTS ALL EXPENDITURES RELATED TO ITS SPECEXPENSES" ON SCHEDULE G, PART II, LINE 9 COSTS OF FREQUENTLY INVOICED AS ONE FEE BY THE VENDOR, SCOSTS ARE BUNDLED AND FURTHER CATEGORIZATION OF THE STREET OF THE S	RUNNING THESE S THAT THE RENTAL ON SCHEDULE G, PA	PECIAL EVEN	TS ARE OTHER	
Sche	dule G, Part I, Line 2b(III) AB DATA	Checks are mailed directly to AB Data's PO Box in Milwau checks from the PO Box and hands the checks to the persphysically open up every single piece of mail and enter the system once the donations are entered into the record-k directly into AJC's bank account on a monthly basis, AJC account to a report provided by AB Data which lists all the	sonnel for data entry ie donations into AB eeping system, the 's Accounting Depai	The data e Data's recor y are then de	ntry perso d-keeping posited	nnel I

DLN: 93493227019099 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasurv Internal Revenue Service Name of the organization Employer identification number AMERICAN JEWISH COMMITTEE 13-5563393 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018	edule I (Form 990) 2018					Page 2
Part III Grants and Other Ass Part III can be duplicat				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)						
(4)						
(5)						
(6)						
(7)			·			
Part IV Supplemental I	Informatic	on. Provide the in	formation required in	Part I, line 2; Part III	I, column (b); and any other a	additional information.
Return Reference	Explanatio	on				
Procedures for monitoring use of grant funds	RULES AND ORDERS NO	S GRANT RECIPIENTS CERTIFY THAT THE GRANTS WILL BE USED IN COMPLIANCE WITH ANY APPLICABLE UNITED STATES LAWS, STATUTES, REGULATIONS, ES AND EXECUTIVE ORDERS, INCLUDING ALL ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, REGULATIONS, RULES AND EXECUTIVE SERS NO FUNDS WILL BE USED IN PARTISAN FASHION TO SUPPORT OR OPPOSE CANDIDATES FOR PUBLIC OFFICE IN MOST OF THE CASES AJC REQUIRES THE IPIENTS TO SUBMIT NARRATIVE AND FINANCIAL REPORTS				

Additional Data

Hias Inc

1300 Spring Street NW

Washington, DC 20910

2900 Bedford Avenue

Brooklyn, NY 11210

RFCUNY- BROOKLYN COLLEGE

Software ID: 18007697 Software Version: 2018v3.1 **EIN:** 13-5563393 Name: AMERICAN JEWISH COMMITTEE Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

13-5633307

11-1904329

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,

(a) Name and address of	(D) FIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(T) Method of Valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

44,600

30,000

	.i iiiiiciics.
(a) Name and address of organization (b) EIN (c) IRC section if applicable (d) Amount of cash organization (e) Amount of non- (f) Meth organization (b) EIN (c) IRC section organization (d) Amount of cash organization (e) Amount of cash organization (d) Amount of cash organization (e) Amount of cash organization (f) Meth organization (d) Amount of cash organization (e) Amount of cash organization (d) Amount of c	hod of valua FMV, appra

501(c)(3) tax exempt

501(c)(3) tax exempt

Description of ash assistance	(h) Purpose of grant or assistance

- (g) D non-ca
- - - Grant to support
- trainings on asylum representation for attorneys in Israel to

Israel

seekers & migrants in

Grant to support the

project of the Human

Rights in Iran Unit at CUNY- Brooklyn College

- - support African asylum

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Charitable / educational January Theological Commen 12 0007640 E01/a)/2) base assemble 20.060

treatment for use in US asylum proceedings

3080 Broadway New York, NY 10027	13-088/640	SOI(C)(3) tax exempt	29,066	0		purposes consistent with Edward M Chase's will
Physicians for Human Rights	22-2488437	501(c)(3) tax exempt	28,000	0		Grant to support project

establishing new 2 Arrow Street Cambridge, MA 02138 medical school clinics that will facilitate the provision of forensic documentation of ill

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

(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 Asvlum Access 20-3642040 25.325 501(c)(3) tax exempt Grant for a project 555 12th Street preventing arbitrary detention of asylum seekers in Mexico

and clothing for those left homeless

Oakland, CA 94607 Hellenic American Leadership 26-4103685 501(c)(3) tax exempt 10.000

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

Council

Grant to support the fire relief efforts in Greece, 22 W Washington St covering expenses Chicago, IL 60602 related to food, housing.

efil	e GRAPHIC pr	int - DO NOT PROCESS As F	iled Dat	a -	DLN: 934	9322	7019	099
Sch	edule J	Comp	ensat	ion Information	OM	IB No	1545-0	0047
(For	n 990)	For certain Officers, Di	rectors, T	rustees, Key Employees, and Hig	hest			
			Compensa	ated Employees vered "Yes" on Form 990, Part IV,	line 23	20	18	₹
			▶ Attach	to Form 990.				
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/For</u>	<u>m990</u> for	instructions and the latest inform	nation.		to Pul ectio	
	ne of the organiza				Employer identificat			
AME	RICAN JEWISH COM	MITTEE			13-5563393			
Pa	rt I Questi	ons Regarding Compensation						
							Yes	No
1a		piate box(es) if the organization proviection A, line 1a Complete Part III to						
		or charter travel		Housing allowance or residence for	personal use			
	_	companions	님	Payments for business use of person				
		ification and gross-up payments	님	Health or social club dues or initiation				
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	reur, cner)			
b		es in line 1a are checked, did the orga Il of the expenses described above? If			nent or reimbursement	1b	Yes	
2		tion require substantiation prior to reiles, officers, including the CEO/Executi			. 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/Executi	ve Directo	r, regarding the items checked in line	e la?			
3		f any, of the following the filing organ			ne			
	_	EO/Executive Director Check all that a d organization to establish compensati		•	n Part III			
	✓ Compens	han a ann an abh a a		Works a small constant contract				
		tion committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	7	Approval by the board or compensa	tion committee			
4		did any person listed on Form 990, Pa						
4	related organiza		art VII, Se	ction A, line Ta, with respect to the h	iling organization of a			
а	Receive a sever	ance payment or change-of-control pa	ment?			4a		No
b		receive payment from, a supplement		ıfıed retırement plan?		4b	Yes	
c						4c		No
	If "Yes" to any o	f lines 4a-c, list the persons and provi	de the app	olicable amounts for each item in Part	: III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) orgai	nizations	must complete lines 5-9.				
5		d on Form 990, Part VII, Section A, lir		•				
	compensation c	ontingent on the revenues of						
а	The organization	7				5a		No
b	Any related orga					5b		No
_	-	5a or 5b, describe in Part III						
6		d on Form 990, Part VII, Section A, Iir ontingent on the net earnings of	ie 1a, did	the organization pay or accrue any				
а	The organization					6a		No
b	Any related orga	nization? 6a or 6b, describe in Part III				6b		No_
7	•	•	السياسية ما	the eventual provide and the second	4			
7		d on Form 990, Part VII, Section A, lir escribed in lines 5 and 67 If "Yes," des			u	7		No
8		nts reported on Form 990, Part VII, pa itial contract exception described in Re			escribe	8		No
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow the i	ebuttable	presumption procedure described in	Regulations section	9		140
For I	Danerwork Redi	ction Act Notice, see the Instruction	ns for Fo	orm 990 Cat No 5	0053T Schedule 1	(Form	990)	2018

Part II Officers, Directors, Trustees, Key Employees, and Hig							
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	(B) Break	kdown of W-2 and/c compensation		and other	(D) Nontaxable benefits	columns	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation	!	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table						1	
					'		
					1		
					-		
					-		
					<u> </u>		
			1			<u> </u>	
					1		
<u> </u>	+				+'		

Part III Supplemental Inform	nation
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
SUPPLEMENTAL NÓNQUALIFÌEĎ RETIREMENT PLAN	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 2018 CALENDAR YEAR'S TAXABLE BENEFITS OF \$107,144 UNDER THE PLAN, AJC ACCRUED AN ADDITIONAL \$107,144 IN CALENDAR YEAR 2018 THIS AMOUNT IS DEFERRED AND REPORTED ON SCHEDULE J, PART II, COLUMN C
	FIRST CLASS AIRLINE TICKETS ARE TYPICALLY BOOKED FOR DAVID HARRIS AJC PAYS FOR ALL THE TRAVEL COSTS OF HIS WIFE WHO ACCOMPANIES DAVID 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
Schedule J, Part I, Line 1a Travel for companions	see responses to line 1A above
ındemnıfication and gross-up payments	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 2018 CALENDAR YEAR'S TAXABLE BENEFITS OF \$107,144 UNDER THE PLAN, AJC ACCRUED AN ADDITIONAL \$107,144 IN CALENDAR YEAR 2018 THIS AMOUNT IS DEFERRED AND REPORTED ON SCHEDULE J, PART II,

Page 3

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

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 2018 CALENDAR YEAR'S TAXABLE BENEFITS OF \$107,144 JUNDER THE PLAN, AJC ACCRUED AN ADDITIONAL \$107,144 IN CALENDAR YEAR 2018 THIS AMOUNT IS DEFERRED AND REPORTED ON SCHEDULE J, PART II, ICOLUMN C

DIRECTOR REGIONAL OFFICE ADVANCEMENT **Software ID:** 18007697

Software Version: 2018v3.1

EIN: 13-5563393

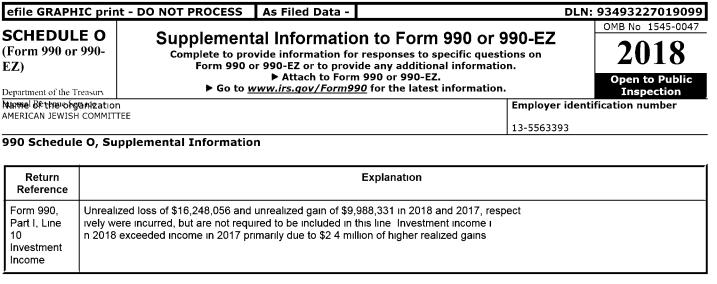
Name: AMERICAN JEWISH COMMITTEE

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

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) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
1DAVID HARRIS	(ı)	568,933	0	136,864	115,394	53,372	874,563	0	
CHIEF EXECUTIVE OFFICER (SEE SCHEDULE J)	(11)	0	0	0	0	0	0	0	
1RICHARD M HYNE	(1)	293,524	0	0	8,250	34,574	336,348	0	
CHIEF FINANCIAL OFFICER	(11)	0	0	0	0	0	0	0	
2MARC D STERN	(1)	233,032	0	6,524	7,249	33,254	280,059	0	
GENERAL COUNSEL	(11)	0	0	0	0	0	0	0	
3 JULIE SCHAIR	(1)	283,295	0	1,508	8,250	46,012	339,065	0	
ASSOCIATE EXECUTIVE DIRECTOR/MANAGING DIRECTOR, RESOURCE DEVELOPMENT	(11)	0	0	0	0	0	0	0	
4JASON ISAACSON	(1)	258,427	0	7,404	7,962	31,632	305,425	0	
ASSISTANT EXEC DIRECTOR FOR POLICY/MANAGING DIRECTOR OF THE OGIA	(11)	0	0	0	0	0	0	0	
5DANIEL ELBAUM	(1)	286,630	0	2,984	8,250	3,817	301,681	0	
CHIEF ADVOCACY OFFICER	(11)	0	0	0	0	0	0	0	
6 STEVE BAYME	(1)	260,266	0	7,300	8,021	31,754	307,341	0	
DIR, CONTEMPORARY JEWISH LIFE	(11)	0	0	0	0	0	0	0	
7JANET BECKER	(1)	271,706	0	7,739	8,250	34,635	322,330	0	
ASSISTANT EXECUTIVE DIRECTOR/MANAGING DIRECTOR, STRATEGIC IMPLEMENTATION & HR	(11)	0	0	0	0	0	0	0	
8 RABBI DAVID ROSEN	(1)	241,226	0	0	0	92,864	334,090	0	
DIRECTOR OF INTERNATIONAL INTERRELIGIOUS AFFAIRS	(11)	0	0	0	0	0	0	0	
9ROBIN LEVENSTON	(1)	222,821	0	723	6,720	1,377	231,641	0	
EXECUTIVE DIRECTOR, PROJECT INTERCHANGE	(11)	0	0	0	0	0	0	0	
10ROBERT LEIKIND	(1)	209,224	0	5,860	6,456	44,713	266,253	0	
REGIONAL DIRECTOR, AJC BOSTON	(11)	0	0	0	0	0	0	0	
11DINA SIEGEL VANN	(1)	209,444	0	3,048	6,588	34,789	253,869	0	
DIRECTOR, BILLA	(11)	0	0	0	0	0	0	0	
12MICHAEL GILBERT	(1)	208,827	0	2,950	6,397	39,576	257,750	0	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493227019099 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** AMERICAN JEWISH COMMITTEE 13-5563393 Part I Types of Property (b) (a) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art—Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 145 1,827,954 Market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . 14 Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (_____ Other ▶ (______) 26 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Νo b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page 2					
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Pa I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
Return Reference	Explanation					
Schedule M, Part I EXPLANATIONS OF REPORTING METHOD FOR NUMBERS OF CONTRIBUTIONS	THE ORGANIZATION RECEIVED 145 SEPARATE GIFTS OF PUBLICLY TRADED SECURITIES					
	Schedule M (Form 990) (2018)					



990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part I, Line 15 SALARIES, OTHER COMPENSATION & EMPLOYEE BENEFITS	SALARIES, OTHER COMPENSATION & EMPLOYEE BENEFITS IN 2018 INCREASED OVER 2017 DUE TO ANNUAL SALARY INCREASES, INCREASES IN HEALTHCARE COSTS, AND A SMALL INCREASE IN HEADCOUNT

Return Explanation
Reference

Form 990, Part I,
Line 8

CONTRIBUTIONS AND GRANTS IS MAINLY DUE TO TIME-RESTRICTED AND ENDOWMENT GI
FTS RECEIVED FROM MAJOR DONORS TOTALING \$10 MILLION THESE GIFTS ARE NOT AVAILABLE TO SUPP
CONTRIBUTIONS
ORT CURRENT OPERATIONS BUT WILL BENEFIT AJC IN FUTURE YEARS
AND GRANTS

Return Reference	Explanation
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 4,248,528 including grants of \$ 27,855)(Revenue \$ 164,974) AJC'S 2018 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 ANTISEMITISM AND EXTREMISM, AND F OR THE WELL-BEING 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 THIS VITAL ISSUE AJC IS WORKING TO BRING TOGETHER THESE TWO COMMUNITIES TO BOTH STRENGTHEN THE TIES BETWEEN THE TW O LARGEST JEWISH COMMUNITIES IN THE WORLD, BUT ALSO STRENGTHEN THE AMERICAN - ISRAELI RELA TIONSHIP

Return Explanation
Reference

Form 990,
Part VI, Line
6 Classes of members or stockholders

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

stockholders electing members of governing body

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

7b Decisions
requiring
approval by
members or
stockholders

Return Explanation Reference

990 Schedule O, Supplemental Information

body

Form 990. THE RETURN WAS PREPARED INTERNALLY AND THEN REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM BAS Part VI. Line ED ON INFORMATION PROVIDED BY AJC'S STAFF THE DRAFT WAS THEN REVIEWED BY AJC'S AUDIT COMM 11b Review ITTEE, AND SUBSEQUENTLY PROVIDED TO AJC'S EXECUTIVE COUNCIL PRIOR TO FILING WITH THE IRS of form 990 PURSUANT TO AJC'S BYLAWS. THE EXECUTIVE COUNCIL CONSTITUTES AJC'S BOARD OF DIRECTORS AS TH by governing AT TERM IS USED IN THE NEW YORK 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, MEMBERS OF THE INVESTMENT COMMITTEE, OFFICERS, AND EMPLOYEES STIPULATING THAT NO INDIVI DUAL MAY PARTICIPATE IN A DISCUSSION OR DECISION ON ANY MATTER IN WHICH HE OR SHE HAS A MA TERIAL FINANCIAL INTEREST, AND HE OR SHE MUST DISCLOSE ANY POTENTIAL CONFLICTS ALL MEMBER S OF THE EXECUTIVE COUNCIL, OFFICERS, KEY EMPLOYEES WHO HAVE SIGNING AUTHORITY, AND OTHER EMPLOYEES ARE REQUIRED TO CERTIFY COMPLIANCE WITH THE APPROPRIATE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS AND TO INDICATE WHETHER THE ORGANIZATION DOES BUSINESS WITH AN ENTITY IN WHICH THEY HAVE A MATERIAL FINANCIAL INTEREST RESTRICTIONS IMPOSED ON PERSONS WITH A CONFLICT INCLUDE REFRAINING FROM PARTICIPATING IN DELIBERATIONS AND DISCUSSIONS, AS WELL AS ANY DECISION, RELATING TO THE ALLEGED CONFLICT

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	IN 2018, AJC HIRED A COMPENSATION CONSULTANT WHO CONDUCTED A SALARY REVIEW OF CHIEF EXECUT IVE OFFICER COMPENSATION, REVIEWING FAIR MARKET COMPARABLE FOR POSITIONS AT SIMILARLY SITU ATED ORGANIZATIONS THE CHIEF EXECUTIVE OFFICER'S MULTI-YEAR CONTRACT WAS REVIEWED AND APP ROVED BY AN INDEPENDENT COMPENSATION COMMITTEE AND SUBSEQUENTLY APPROVED BY THE EXECUTIVE COUNCIL THE ORGANIZATION MAINTAINS RECORDS REGARDING THE COMPENSATION SETTING PROCESS CO MPENSATION OF OTHER KEY EMPLOYEES FOR THE PAST SEVERAL YEARS HAS BEEN TIED TO THE SALARY I NCREASES NEGOTIATED WITH AJC'S LABOR UNIONS, EXCEPT FOR THOSE WHO HAVE RECEIVED PROMOTIONS AND/OR INCREASED RESPONSIBILITIES ALL DETERMINATIONS OF COMPENSATION ARE CONTEMPORANEOUS LY DOCUMENTED IN WRITING

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	In 2018, 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 salaries of relevant senior management. The review from 2015 will be performed once again in 202. O ALL DETERMINATIONS OF COMPENSATION ARE CONTEMPORANEOUSLY DOCUMENTED IN WRITING.

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)	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 2018 CALENDAR YEAR'S TAXABLE BENEFITS OF \$107,144 UNDER THE PLAN, AJC ACCRUED AN ADDITION AL \$107,144 IN CALENDAR YEAR 2018 THIS AMOUNT IS DEFERRED AND REPORTED ON SCHEDULE J, PAR T II, COLUMN C

Return Explanation

Section A

Form 990, AJC'S EXECUTIVE COUNCIL SERVES AS ITS FIDUCIARY BOARD
Part VII,

Return Reference	Explanation
Line 18 PAYMENTS OF	THESE EXPENSES RELATED TO THE TRAVEL AND MEETING COSTS OF AJC PROJECT INTERCHANGE SEMINARS INVOLVING ELECTED OFFICIALS DURING 2018 PROJECT INTERCHANGE IS AN EDUCATIONAL, NONPARTIS AN AND APOLITICAL INITIATIVE WHERE DIVERSE GROUPS OF PEOPLE ARE BROUGHT TO ISRAEL TO GAIN A BETTER UNDERSTANDING OF THE COUNTRY NO PAYMENTS WERE MADE TO SWAY PUBLIC OPINIONS

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 OBLIGATION285878, CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT1665476,

Return Reference	Explanation
Schedule R, Part II Part II	THE FORM 990 INCLUDES ALL ACTIVITY OF OUR FOREIGN AFFILIATES SINCE THE ACTIVITIES ARE COND UCTED SOLELY BY AJC EMPLOYEES AND THE AFFILIATES EXIST AS FLOW-THROUGH ENTITIES FOR PURPOS ES OF ACTING WITHIN THE FOREIGN COUNTRIES IN ADDITION, SHOWING ALL ACTIVITY PROVIDES A MO RE ACCURATE AND COMPLETE PICTURE OF AJC AND ENHANCES THE TRANSPARENCY OF OUR REPORTING AS OPPOSED TO REPORTING ONLY OUR U S ACTIVITIES FOR EACH OF AJC'S FOREIGN AFFILIATES, AJC H AS CONTRACTED WITH LOCAL ACCOUNTING FIRMS TO COMPILE FINANCIAL INFORMATION AND PREPARE LOC AL REGULATORY FILINGS ALL RECORDS ARE MAINTAINED IN THE UNITED STATES ADDITIONALLY, PERI ODICALLY, AJC STAFF IN THE FINANCE, LEGAL AND ADMINISTRATIVE AREAS VISIT THE FOREIGN OFFIC ES TO REVIEW INTERNAL CONTROLS AND MONITOR COMPLIANCE WITH LOCAL REGULATIONS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493227019099 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2018 (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury

Internal Revenue Service Name of the organization Inspection

Employer identification number

AMERICAN JEWISH COMMITTEE							13-5	563393				
Part I Identification of Disregarded Entities Com	plete if the organ	ızatıon answe	red "Yes	" on Form 9	990, Part	IV, line 3	3.					
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity		(b) Primary activity		(c) Legal domicile (stat or foreign country)		(d) (state Total incon untry)		(e) End-of-year as	ssets	(f) Direct controlli entity		
Part II Identification of Related Tax-Exempt Organ related tax-exempt organizations during the tax		te if the orga	nızatıon	answered "	Yes" on F	orm 990,	Part I\	/, line 34 be	cause if	t had one or i	nore	
(a) Name, address, and EIN of related organization	Prim	(b) ary activity	Legal do	(c) omicile (state ign country)	Exempt Co	l) de section	Public (if secti	(e) charity status ion 501(c)(3))	Dire	(f) ect controlling entity	Section (13) cor entil	512(b) ntrolled ity?
(1)INSTITUTE OF HUMAN RELATIONS 165 EAST 56TH STREET	FUNDRAISI	NG		NY					AJC	AJC		No
NEW YORK, NY 10022 23-7389215												
(2)TRANS-ATLANTIC INSTITUTE	ADVOCACY			BE					AJC		Yes	
(3)AJC BERLIN	ADVOCACY			GM					AJC		Yes	
(4)FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE	ADVOCACY			PL					AJC		Yes	
(5)AJC FRANCE	ADVOCACY			FR					AJC		Yes	
(6)AJC JERUSALEM	ADVOCACY			IS					AJC		Yes	
For Paperwork Reduction Act Notice, see the Instructions fo	r Form 990.		Ca	t No 50135	iY				Schee	dule R (Form	990) 20	18

		1	1		1	1	1 .							
(a) Name, address, and E related organizatio	EIN of on	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomina income(rela unrelated excluded fr tax unde sections 51	ted, total incom l, om r		(H Disprop alloca	rtionate	(1) Code V-UB amount in b 20 of Schedule K- (Form 1065	ox mar par 1	(j) eral or naging tner?	(I Perce owne	k) entage ership
								Yes	No		Yes	No		
												+		
Part IV Identification of Related Organization because it had one or more rel							wered "Yes	" on Fo	orm 9	90, Part I\	/, line	34		
(a)	(b)	T .	(c)		(d)	(e)	(f)	1	(g)	1	(h)		(1)
Name, address, and EIN of related organization	Primary activity		Logal											512(l
	, ,	d (state	Legal omicile or foreign ountry)		entity (Type of entity (C corp, S corp, or trust)	Share of total income		of end- year assets	-of- Perd	entage nership	L	ection L3) cor enti	ty?
-	INVESTMENT	d (state	omicile		entity ((C corp, S corp,			year	-of- Perd	entage		ection 13) cor enti Yes Yes	ty?
(1)CHARITABLE REMAINDER TRUSTS (2) 5 RED GROUND ROAD		d (state	omicile or foreign ountry)		tt controlling entity ((C corp, S corp,			year	-of- Perd	entage		enti Yes	ty?
(1)CHARITABLE REMAINDER TRUSTS (2) 6 RED GROUND ROAD OLD WESTBURY, NY 11568		d (state	omicile or foreign ountry)		tt controlling entity ((C corp, S corp,			year	-of- Perd	entage	,	enti Yes	ty?
(1)CHARITABLE REMAINDER TRUSTS (2) 6 RED GROUND ROAD 0LD WESTBURY, NY 11568 (2)CHARITABLE REMAINDER TRUST 7586 GLENDEVON LANE	INVESTMENT	d (state	omicile or foreign ountry) NY	AJC	t controlling entity ((C corp, S corp,			year	-of- Perd	entage	,	Yes Yes	ty?
(1)CHARITABLE REMAINDER TRUSTS (2) 6 RED GROUND ROAD 0LD WESTBURY, NY 11568 (2)CHARITABLE REMAINDER TRUST 7586 GLENDEVON LANE	INVESTMENT	d (state	omicile or foreign ountry) NY	AJC	t controlling entity ((C corp, S corp,			year	-of- Perd	entage	,	Yes Yes	ty?
(1)CHARITABLE REMAINDER TRUSTS (2) 6 RED GROUND ROAD 0LD WESTBURY, NY 11568 (2)CHARITABLE REMAINDER TRUST 7586 GLENDEVON LANE	INVESTMENT	d (state	omicile or foreign ountry) NY	AJC	t controlling entity ((C corp, S corp,			year	-of- Perd	entage	,	Yes Yes	ty?
(1)CHARITABLE REMAINDER TRUSTS (2) 6 RED GROUND ROAD 0LD WESTBURY, NY 11568 (2)CHARITABLE REMAINDER TRUST 7586 GLENDEVON LANE DELRAY BEACH, FL 33446	INVESTMENT	d (state	omicile or foreign ountry) NY	AJC	entity ((C corp, S corp,			year	-of- Perd	entage	,	Yes Yes	ty?
(1)CHARITABLE REMAINDER TRUSTS (2) 6 RED GROUND ROAD 0LD WESTBURY, NY 11568 (2)CHARITABLE REMAINDER TRUST 7586 GLENDEVON LANE	INVESTMENT	d (state	omicile or foreign ountry) NY	AJC	t controlling entity ((C corp, S corp,			year	-of- Perd	entage	,	Yes Yes	ty?
(1)CHARITABLE REMAINDER TRUSTS (2) 6 RED GROUND ROAD 0LD WESTBURY, NY 11568 (2)CHARITABLE REMAINDER TRUST 7586 GLENDEVON LANE	INVESTMENT	d (state	omicile or foreign ountry) NY	AJC	entity ((C corp, S corp,			year	-of- Perd	entage	,	Yes Yes	ty?

(1)AJC BERLIN

(2)AJC FRANCE

(3)AJC JERUSALEM

(5)TRANS-ATLANTIC INSTITUTE

(6) INSTITUTE OF HUMAN RELATIONS

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

Purchase of assets from related organization(s).

Page 3

Yes

Yes

1f

1g

1h

1i

1j

1k

11 Yes

1m

1n 10 Yes

1p 1a

1r

1s

Schedule R (Form 990) 2018

Method of determining amount involved

Yes

No

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. 1a 1b

1c 1d 1e

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

В

В

(b)

Transaction

type (a-s)

(c)

Amount involved

1,410,000

1,510,000

1,605,082

600,000

500.000

25,000

FMV

ΙFΜV

FMV

FMV

FMV

FMV

Name of related organization

(4) FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE

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		(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	Ar or	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		or ig ?	(k) Percentage ownership
İ			514)	Yes	No	ļ ,		Yes	No		Yes	No	
									_	Schedul	e R (Form	1 990)) 2018



Additional Data

AJC JERUSALEM

TRANS-ATLANTIC INSTITUTE

INSTITUTE OF HUMAN RELATIONS

(2)

(3)

(4)

(5)

Software ID: 18007697 **Software Version:** 2018v3.1 **EIN:** 13-5563393 Name: AMERICAN JEWISH COMMITTEE

FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE

		(a) Name of related organization	
(1)	AJC BERLIN		
(1)	AJC FRANCE		

Form 990, Schedule R, Part V - Transactions With Related Organizations

(b) Transaction

type(a-s)

В

В

В

С

(c) Amount Involved

1,410,000

1,510,000

500,000

25,000

Method of determining amount involved

FMV

FMV

(d)

FMV 1,605,082 600,000 FMV

> FMV FMV