

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2013, or tax year beginning _____, 2013, and ending _____, 20_____

2013

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

Name of exempt organization AMERICAN JEWISH COMMITTEE	Employer identification number 13-5563393
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Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	55,699,731
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration of Officer


- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

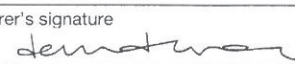
Sign Here  | 11/10/14 | CFO
Signature of officer | Date | Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature 	Date	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code				EIN
					Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name DEVIN L. DUNCAN	Preparer's signature 	Date 11/10/14	Check <input type="checkbox"/> if self-employed	PTIN P01249521
	Firm's name ▶ KPMG LLP			Firm's EIN ▶ 13-5565207	
	Firm's address ▶ 345 PARK AVENUE, NEW YORK, NY 10154-0102			Phone no. (212)758-9700	

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Do not enter Social Security numbers on this form as it may be made public.

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

A For the 2013 calendar year, or tax year beginning **2013**, and ending **20**

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization **AMERICAN JEWISH COMMITTEE**
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
165 EAST 56TH STREET
 City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 10022-2709

D Employer identification number
13-5563393

E Telephone number
(212)751-4000

G Gross receipts \$ **59,281,456**

F Name and address of principal officer: **DAVID A HARRIS**
165 EAST 56TH STREET, NEW YORK, NY 10022-2709

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.AJC.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1906**

M State of legal domicile: **NY**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>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.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	24
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	303
	6	Total number of volunteers (estimate if necessary)	6	1,908
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	4,182
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	-68
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 44,364,867	Current Year 51,994,897
	9	Program service revenue (Part VIII, line 2g)	25	405
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,112,955	2,652,739
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	409,986	1,051,690
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	47,887,833	55,699,731
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	786,693	285,024
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	26,108,207	26,621,130
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	343,390	273,407
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>7,014,596</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	16,090,652	16,380,257
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	43,328,942	43,559,818
	19	Revenue less expenses. Subtract line 18 from line 12	4,558,891	12,139,913
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 135,264,834	End of Year 156,195,599
	21	Total liabilities (Part X, line 26)	38,781,240	32,727,052
	22	Net assets or fund balances. Subtract line 21 from line 20	96,483,594	123,468,547

Part II 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.

Sign Here

Signature of officer: RICHARD HYNE, CFO Date: _____
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: DEVIN L. DUNCAN Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: P01249521
 Firm's name ▶ KPMG LLP Firm's EIN ▶ 13-5565207
 Firm's address ▶ 345 PARK AVENUE, NEW YORK, NY 10154-0102 Phone no. (212)758-9700

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2013)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

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. ADDITIONAL INFORMATION ON AJC'S MISSION IS AVAILABLE IN AJC'S ANNUAL REPORT, WHICH CAN BE FOUND ON AJC'S WEBSITE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 12,884,136 including grants of \$ 41,590) (Revenue \$)

REGIONAL OFFICES AND LOCAL ADVOCACY: AJC MAINTAINS MORE THAN 20 REGIONAL OFFICES THROUGHOUT THE U.S. THE OFFICES ESTABLISH KEY RELATIONSHIPS WITH PUBLIC OFFICIALS, CONGRESSIONAL REPRESENTATIVES AND LOCAL REPRESENTATIVES OF FOREIGN GOVERNMENTS, INTER-RELIGIOUS AND INTER-GROUP ORGANIZATIONS TO CREATE DIVERSE COALITIONS AND MOBILIZE THE JEWISH COMMUNITY ON AJC'S PRIORITY ISSUES. IN 2013, THESE ISSUES INCLUDE: COMBATTING IRAN'S NUCLEAR AMBITIONS, ISRAEL'S PLACE IN THE WORLD, ENERGY SECURITY AND IMMIGRATION REFORM.

4b (Code:) (Expenses \$ 12,783,136 including grants of \$ 170,734) (Revenue \$ 405)

INTERNATIONAL RELATIONS: AJC ADVOCATES ON ITS PRIORITY ISSUES WITH GOVERNMENTS AND CIVIL SOCIETY IN THE UNITED STATES AND INTERNATIONALLY IN ORDER TO AFFECT PUBLIC POLICIES OF CONCERN TO THE JEWISH PEOPLE. AJC MAINTAINS INTERNATIONAL INSTITUTES THAT COORDINATE AJC'S ADVOCACY THROUGHOUT THE WORLD, INCLUDING AFRICA, EUROPE, LATIN AMERICA AND ASIA. AJC STAFF MEMBERS ARE EXPERTS IN THEIR FIELDS AND WORK ACROSS NATIONAL BOUNDARIES WITH ELECTED OFFICIALS, DIPLOMATS AND OTHER SECTORS TO ADVOCATE ON AJC'S PRIORITY ISSUES. AJC PROFESSIONALS ALSO BUILD COALITIONS WITH FAITH, COMMUNITY AND OPINION LEADERS TO PROMOTE GREATER UNDERSTANDING AND DIALOGUE, BOTH IN THE COUNTRIES IN WHICH THEY WORK, THROUGH EXCHANGE PROGRAMS, AND THROUGH THEIR COORDINATION WITH SUCH PROGRAMS AS AJC'S PROJECT INTERCHANGE (EDUCATIONAL SEMINARS IN ISRAEL).

THESE ACTIVITIES INCLUDE: (1) EU - HEZBOLLAH CAMPAIGN: AJC PLAYED A KEY ROLE IN THE EUROPEAN UNION'S UNANIMOUS 2013 DECISION TO DESIGNATE THE "MILITARY WING" OF (CONTINUED ON SCHEDULE O)

4c (Code:) (Expenses \$ 2,871,879 including grants of \$ 14,000) (Revenue \$)

STRATEGIC COMMUNICATIONS AND PUBLIC RELATIONS: USING A VARIETY OF TRADITIONAL AND NEW MEDIA TOOLS, AJC COMMUNICATES NATIONALLY AND GLOBALLY TO CONVEY ITS ANALYSIS OF KEY POLITICAL EVENTS AND GALVANIZE SUPPORT FOR DEMOCRATIC ENGAGEMENT TO ENSURE MINORITY RIGHTS, COMBAT ANTI-SEMITISM AND SAFE GUARD THE LEGITIMACY OF ISRAEL.

AJC MOBILIZES AND INFORMS OPINION-MAKERS THROUGH PRINT AND WEB MEDIA, AS WELL AS THROUGH ACTIVE AND INFORMATIVE TWITTER AND FACEBOOK ACCOUNTS GEARED TOWARDS BOTH GLOBAL JEWISH CONCERNS AS WELL AS TOWARDS TOPICS SPECIFIC TO EACH REGION OR COUNTRY AN OFFICE OR INSTITUTE IS LOCATED. AJC ALSO POSTS ON ITS WEBSITE ALL ITS ACTIVE ADVOCACY CAMPAIGNS TO PROMOTE ENGAGEMENT. OTHER TOOLS INCLUDE TIMELY PRESS RELEASES, OP-EDS, AJC STAFF EXPERTS BLOGS AND ARTICLES PUBLISHED IN MAJOR MEDIA OUTLETS AND ONLINE AS WELL AS THE EXECUTIVE DIRECTOR'S REGULAR WEEKLY COMMENTARY ON THE CBS RADIO NETWORK.

4d Other program services (Describe in Schedule O.)

(Expenses \$ 4,208,440 including grants of \$ 58,700) (Revenue \$ 915,504)

4e Total program service expenses 32,747,591

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part VII</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IX</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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)? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<input type="checkbox"/>	<input type="checkbox"/>
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<input type="checkbox"/>	<input type="checkbox"/>
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<input type="checkbox"/>	<input type="checkbox"/>
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
26 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? <i>If so, complete Schedule L, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
27 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? <i>If "Yes," complete Schedule L, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c 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? <i>If "Yes," complete Schedule L, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	124		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	303		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	✓		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	✓		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	✓		
b	If "Yes," enter the name of the foreign country: ► <u>BE, GM, IS</u> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	✓		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			

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

Section 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 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.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	<input checked="" type="checkbox"/>	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<input checked="" type="checkbox"/>	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<input checked="" type="checkbox"/>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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		<input checked="" type="checkbox"/>

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	<input checked="" type="checkbox"/>	
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<input checked="" type="checkbox"/>	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
15b	Other officers or key employees of the organization		<input checked="" type="checkbox"/>
	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 a taxable entity during the year?		<input checked="" type="checkbox"/>
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► SEE SCHEDULE O
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► DANIEL GOLDWATER CONTROLLER, 165 EAST 56TH STREET, NEW YORK, NY 10022-2709, (212)891-1473, FAX: (212)750-0326

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DAVID HARRIS EXECUTIVE DIRECTOR	60 0	✓		✓			518,338	0	368,144	
(2) STANLEY BERGMAN PRESIDENT	20 0.1	✓		✓			0	0	0	
(3) RICHARD L BERKMAN CHAIR, BOARD OF GOVERNORS	10 0	✓		✓			0	0	0	
(4) NED DUBILO TREASURER/SECRETARY	10 0	✓		✓			0	0	0	
(5) MARVIN ISRAELOW CHAIR PROGRAM COORD CMTTEE	5 0	✓		✓			0	0	0	
(6) SUZANNE DENBO JAFFE ASST TREASURER/CHAIR BUDGET	5 1	✓		✓			0	0	0	
(7) ALAN MELAMED CHAIR, MARKETING & COMMUNICATIONS	5 0	✓		✓			0	0	0	
(8) KIM PIMLEY CHAIR, LEADERSHIP DEVELOPMENT	5 0	✓		✓			0	0	0	
(9) JOHN M SHAPIRO CHAIR, BOARD OF TRUSTEES	5 0.1	✓		✓			0	0	0	
(10) MICHAEL TICHNOR CHAIR, REGIONAL OFFICES	5 0	✓		✓			0	0	0	
(11) ROY J ZUCKERBERG ASST CHAIR, BOARD OF TRUSTEES	3 0.1	✓		✓			0	0	0	
(12) ROBERT H ELMAN PRESIDENT THRU 6/13	20 0.1	✓		✓			0	0	0	
(13) MICHAEL M DAVIS ASST TREASURER/CHAIR BUDGET THRU 6/13	5 0	✓		✓			0	0	0	
(14) DAVID ROUSSO CHAIR, ORG DEVELOPMENT THRU 6/13	5 0	✓		✓			0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) JANE SILVERMAN CHAIR, PROGRAM COORD CMTTEE THRU 6/13	5 0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(16) SHERRY A WEINMAN CHAIR, PUBLIC AFFAIRS THRU 6/13	5 0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(17) RENE PIERRE AZRIA BOARD MEMBER	2 0	<input checked="" type="checkbox"/>						0	0	0
(18) ROBERTA BARUCH BOARD MEMBER	2 0	<input checked="" type="checkbox"/>						0	0	0
(19) MATTHEW BRONFMAN BOARD MEMBER	2 0	<input checked="" type="checkbox"/>						0	0	0
(20) MICHAEL GOULD BOARD MEMBER	2 0.1	<input checked="" type="checkbox"/>						0	0	0
(21) CAROL GOWN CHAIR, NATIONAL POLICY	5 0	<input checked="" type="checkbox"/>						0	0	0
(22) DAVID INLANDER CHAIR, INTERRELIGIOUS AFFAIRS	5 0	<input checked="" type="checkbox"/>						0	0	0
(23) KENNETH R LEVINE BOARD MEMBER	2 0	<input checked="" type="checkbox"/>						0	0	0
(24) JOEL R MOGY BOARD MEMBER	2 0.1	<input checked="" type="checkbox"/>						0	0	0
(25) MARTIN KRALL BOARD MEMBER	2 0	<input checked="" type="checkbox"/>						0	0	0
1b Sub-total								518,338	0	368,144
c Total from continuation sheets to Part VII, Section A								2,841,702	0	423,607
d Total (add lines 1b and 1c)								3,360,040	0	791,751

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 56**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		<input checked="" type="checkbox"/>
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	<input checked="" type="checkbox"/>	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		<input checked="" type="checkbox"/>

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
AB DATA, PO BOX 170062, MILWAUKEE, WI 53217	MAIL FULFILLMENT	569,393
M & J LTD., 18 MEADOW STREET, LOCUST VALLEY, NY 11560	BLDG UPGRADES	410,520
TRIDENT SECURITY & RISK MGMT., PO BOX 6363, FAIR HAVEN, NJ 07704	BLDG SECURITY	389,922
PERFORMANCE MECHANICAL CORP, 1215 SECOND AVENUE, NEW HYDE PARK, NY 10016	BLDG ENGINEERS	319,883
PERFECT BUILDING MAINTENANCE, 360 LEXINGTON AVENUE, NEW YORK, NY 10017	BUILDING CLEANING SERVICE	230,306

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶ 12**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 145,353				
	b	Membership dues	1b 1,566,282				
	c	Fundraising events	1c 20,130,333				
	d	Related organizations	1d 20,000				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 30,132,929				
	g	Noncash contributions included in lines 1a-1f: \$	861,298				
	h	Total. Add lines 1a-1f	▶ 51,994,897				
Program Service Revenue			Business Code				
	2a	SALES OF PUBLICATIONS	511190	405	405		
	b	-----		0			
	c	-----		0			
	d	-----		0			
	e	-----		0			
	f	All other program service revenue .		0	0	0	
g	Total. Add lines 2a-2f	▶ 405					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	▶ 604,104		4,182	599,922	
	4	Income from investment of tax-exempt bond proceeds ▶	0				
	5	Royalties	▶ 0				
	6a	Gross rents	(i) Real	770,850			
			(ii) Personal				
			b Less: rental expenses	158,960			
	c	Rental income or (loss)	611,890	0			
	d	Net rental income or (loss)	▶ 611,890			611,890	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	3,193,353			
			(ii) Other				
			b Less: cost or other basis and sales expenses	1,144,718			
	c	Gain or (loss)	2,048,635	0			
	d	Net gain or (loss)	▶ 2,048,635			2,048,635	
	8a	Gross income from fundraising events (not including \$ 20,130,333 of contributions reported on line 1c). See Part IV, line 18	a 1,802,343				
	b	Less: direct expenses	b 2,278,047				
	c	Net income or (loss) from fundraising events . ▶	-475,704			-475,704	
	9a	Gross income from gaming activities. See Part IV, line 19	a				
b	Less: direct expenses	b					
c	Net income or (loss) from gaming activities . . ▶	0					
10a	Gross sales of inventory, less returns and allowances	a					
		b Less: cost of goods sold	b				
		c Net income or (loss) from sales of inventory . . ▶	0				
Miscellaneous Revenue		Business Code					
11a	SPONSORSHIP & REGISTRATION FEES	900099	915,504	915,504			
b	-----		0				
c	-----		0				
d	All other revenue		0	0	0		
e	Total. Add lines 11a-11d	▶ 915,504					
12	Total revenue. See instructions.	▶ 55,699,731	915,909	4,182	2,784,743		

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) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	88,533	88,533		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	196,491	196,491		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	2,976,646	1,771,359	617,322	587,965
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	18,320,417	13,636,907	950,347	3,733,163
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	427,840	222,477	141,187	64,176
9 Other employee benefits	3,539,222	2,899,090	17,906	622,226
10 Payroll taxes	1,357,005	936,333	217,121	203,551
11 Fees for services (non-employees):				
a Management	0			
b Legal	296,744	154,307	97,925	44,512
c Accounting	195,490	101,655	64,512	29,323
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	273,407			273,407
f Investment management fees	257,604	202,724	36,758	18,122
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,994,796	1,429,179	431,554	134,063
12 Advertising and promotion	837,187	808,344	6,332	22,511
13 Office expenses	2,998,804	2,027,064	477,449	494,291
14 Information technology	836,619	592,820	154,463	89,336
15 Royalties	0			
16 Occupancy	2,186,409	1,813,582	127,941	244,886
17 Travel	1,425,456	1,346,259	19,350	59,847
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	160,531	160,531		
19 Conferences, conventions, and meetings	4,017,083	3,712,634	69,522	234,927
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	993,715	516,732	327,926	149,057
23 Insurance	179,819	130,570	40,016	9,233
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 expenses on Schedule O.)				
a -----	0			
b -----	0			
c -----	0			
d -----	0			
e All other expenses	0	0	0	0
25 Total functional expenses. Add lines 1 through 24e	43,559,818	32,747,591	3,797,631	7,014,596
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	577,094	303,687		273,407

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	14,617,965	1	18,949,992
	2 Savings and temporary cash investments	5,899,658	2	6,323,286
	3 Pledges and grants receivable, net	11,221,100	3	18,718,252
	4 Accounts receivable, net		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 under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	377,804	9	585,141
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 26,444,187		
	b Less: accumulated depreciation	10b 19,289,012	6,661,655	10c 7,155,175
	11 Investments—publicly traded securities	31,664,881	11	33,206,787
	12 Investments—other securities. See Part IV, line 11	59,498,768	12	68,287,164
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	5,323,003	15	2,969,802
16 Total assets. Add lines 1 through 15 (must equal line 34)	135,264,834	16	156,195,599	
Liabilities	17 Accounts payable and accrued expenses	4,733,671	17	4,598,709
	18 Grants payable		18	
	19 Deferred revenue	775,500	19	823,867
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	33,272,069	25	27,304,476
	26 Total liabilities. Add lines 17 through 25	38,781,240	26	32,727,052
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	6,465,014	27	19,567,583
	28 Temporarily restricted net assets	31,221,860	28	43,863,516
	29 Permanently restricted net assets	58,796,720	29	60,037,448
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	96,483,594	33	123,468,547
34 Total liabilities and net assets/fund balances	135,264,834	34	156,195,599	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	55,699,731
2	Total expenses (must equal Part IX, column (A), line 25)	2	43,559,818
3	Revenue less expenses. Subtract line 2 from line 1	3	12,139,913
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	96,483,594
5	Net unrealized gains (losses) on investments	5	8,396,873
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	6,448,167
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	123,468,547

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		✓
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	✓	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	✓	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		✓
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.		

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) LINDA MIRELS ----- BOARD MEMBER	2 ----- 0	✓						0	0	0
(27) ALLAN J REICH ----- CHAIR, INTL RELATIONS	5 ----- 0	✓						0	0	0
(28) HARRIET SCHLEIFER ----- BOARD MEMBER	2 ----- 0	✓						0	0	0
(29) DOV S ZAKHEIM ----- CHAIR, CONTEMP JEWISH LIFE	5 ----- 0	✓						0	0	0
(30) JERRY H BIEDERMAN ----- CHAIR, INTERRELIGIOUS AFFAIRS THRU 6/13	5 ----- 0	✓						0	0	0
(31) HARRISON KEMPNER, JR. ----- BOARD MEMBER THRU 6/13	2 ----- 0	✓						0	0	0
(32) VICTORIA SCHONFELD ----- CHIEF OPERATING OFFICER	50 ----- 0			✓				322,183	0	21,707
(33) RICK HYNE ----- CHIEF FINANCIAL OFFICER	45 ----- 0			✓				242,592	0	34,282
(34) JULIE SCHAIR ----- DIR OF RESOURCE DEVELOPMENT	45 ----- 0				✓			237,077	0	39,677
(35) JANET BECKER ----- DIR, STRATEGIC IMPLEMENTATION & HR	45 ----- 0				✓			226,565	0	34,637
(36) JASON ISAACSON ----- ASSISTANT EXEC DIR/DIR, OGIA	45 ----- 0				✓			219,507	0	41,335
(37) STEVEN BAYME ----- DIR, CONTEMPORARY JEWISH LIFE	40 ----- 0				✓			218,226	0	30,140
(38) MARC D. STERN ----- GENERAL COUNSEL	45 ----- 0				✓			178,766	0	40,820
(39) DANIEL ELBAUM ----- ASST EXECUTIVE DIR FOR REGIONAL OFFICES	45 ----- 0				✓			194,319	0	8,331
(40) RABBI DAVID ROSEN ----- INTERNATIONAL DIRECTOR OF INTERRELIGIOUS AFFAIRS	40 ----- 0					✓		216,484	0	32,658
(41) MINDY ROSS ----- ASSISTANT EXEC DIR MARKETING & STRATEGIC COMMUNICATIONS	40 ----- 0					✓		211,111	0	37,611
(42) ROBERT LEIKIND ----- REGIONAL DIRECTOR, AJC BOSTON	40 ----- 0					✓		191,352	0	39,633
(43) SAMUEL WITKIN ----- EXEC DIR, PROJECT INTERCHANGE	40 ----- 0					✓		197,475	0	27,529

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(44) MICHAEL GILBERT ----- DIRECTOR REGIONAL OFFICE ADVANCEMENT	40 ----- 0					✓		186,045	0	35,247

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2013

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization AMERICAN JEWISH COMMITTEE	Employer identification number 13-5563393
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10,733,355	38,688,087	40,008,034	44,364,867	51,994,897	185,789,240
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	10,733,355	38,688,087	40,008,034	44,364,867	51,994,897	185,789,240
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4,198,916
6 Public support. Subtract line 5 from line 4.						181,590,324

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	10,733,355	38,688,087	40,008,034	44,364,867	51,994,897	185,789,240
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	623,474	1,084,658	1,677,754	1,677,559	1,374,954	6,438,399
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	221,097	627,348	0	0	0	848,445
11 Total support. Add lines 7 through 10						193,076,084
12 Gross receipts from related activities, etc. (see instructions)					12	9,328,406
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	94.05 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	95.49 %
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 under section 513						
4 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 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV

Supplemental Information Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Return Reference	Identifier	Explanation						
		Description	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
SCHEDULE A, PART II, LINE 10	OTHER INCOME	OTHER INCOME	221,097	627,348				848,445
		Total	221,097	627,348	0	0	0	848,445

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2013

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization AMERICAN JEWISH COMMITTEE	Employer identification number 13-5563393
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	----- ----- -----	\$ ----- 4,282,550	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	----- ----- -----	\$ ----- 3,993,379	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization AMERICAN JEWISH COMMITTEE	Employer identification number 13-5563393
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----

Name of organization AMERICAN JEWISH COMMITTEE	Employer identification number 13-5563393
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Part III **Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.**
 ▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization AMERICAN JEWISH COMMITTEE	Employer identification number 13-5563393
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours ▶ _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
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:			
a Volunteers?		✓	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	✓		
c Media advertisements?		✓	
d Mailings to members, legislators, or the public?		✓	
e Publications, or published or broadcast statements?		✓	
f Grants to other organizations for lobbying purposes?		✓	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	✓		151,141
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		✓	
i Other activities?		✓	
j Total. Add lines 1c through 1i			151,141
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		✓	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	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	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c 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	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

SEE NEXT PAGE

Part IV

Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Return Reference	Identifier	Explanation
SCHEDULE C, PART II-B, LINE 1	DESCRIPTION OF THE ACTIVITIES REPORTED ON LINES 1A THROUGH 1I	DURING 2013, AJC ATTEMPTED TO INFLUENCE STATE, FEDERAL, AND NATIONAL POLICY THROUGH DIRECT CONTACT WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS AT THE STATE AND FEDERAL LEVEL. AJC STAFF AND LAY LEADERS HELD MEETINGS ON A REGULAR BASIS WITH THESE INDIVIDUALS. IN ADDITION TO CONTACTING FEDERAL AND STATE AGENCY OFFICIALS REGARDING EXISTING OR PENDING LEGISLATION, AJC'S ACTIVITIES FOCUSED PRINCIPALLY ON FOREIGN AFFAIRS LEGISLATION (INCREASED SANCTIONS ON IRAN AND SUPPORT FOR U.S.-ISRAEL COOPERATION), IMMIGRATION REFORM (SUPPORT OF COMPREHENSIVE REFORM), AMERICAN ENERGY SECURITY, CIVIL RIGHTS, CIVIL LIBERTIES, AND RELIGIOUS FREEDOM.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution..., 3 Number of conservation easements modified..., 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116..., 1b If the organization elected, as permitted under SFAS 116..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	72,205,956	67,488,681	71,782,880	62,355,767	53,085,554
b Contributions	1,779,561	1,279,459	2,092,734	4,533,038	15,658
c Net investment earnings, gains, and losses	10,552,814	6,556,809	-2,649,997	7,653,684	10,435,592
d Grants or scholarships	305,024	806,693	487,660	525,580	
e Other expenditures for facilities and programs	3,242,551	2,209,110	3,148,119	2,140,234	1,110,037
f Administrative expenses	104,308	103,190	101,157	93,795	71,000
g End of year balance	80,886,448	72,205,956	67,488,681	71,782,880	62,355,767

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ 0 %
- b** Permanent endowment ▶ 72.26 %
- c** Temporarily restricted endowment ▶ 27.74 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	✓	
(ii) related organizations		✓
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		430,126		430,126
b Buildings		15,324,926	10,865,428	4,459,498
c Leasehold improvements		795,734	643,691	152,043
d Equipment		9,070,789	7,779,893	1,290,896
e Other		822,612		822,612
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				7,155,175

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) LONG/SHORT EQUITIES	21,848,385	END OF YEAR MARKET VALUE
(B) STATE OF ISRAEL BOND	53,020	END OF YEAR MARKET VALUE
(C) MULTISTRATEGY HEDGE FUND	19,436,822	END OF YEAR MARKET VALUE
(D) DEBT SECURITIES	3,845,456	END OF YEAR MARKET VALUE
(E) INVESTMENT FUNDS	23,103,481	END OF YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	68,287,164	

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED UNFUNDED PENSION LIABILITY	14,191,312
(3) SECURITY DEPOSITS	26,716
(4) CHARITABLE GIFT ANNUITY	1,934,381
(5) LEASE OBLIGATIONS	58,290
(6) OTHER RETIREMENT BENEFITS	4,394,423
(7) DUE TO THANKS TO SCANDINAVIA	6,699,354
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	27,304,476

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include descriptions, sub-row labels (2a-2d, 4a-4b), and totals (1, 2e, 3, 4c, 5).

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include descriptions, sub-row labels (2a-2d, 4a-4b), and totals (1, 2e, 3, 4c, 5).

Part XIII Supplemental Information.

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

SEE NEXT PAGE

Series of horizontal dashed lines for providing supplemental information.

Part XIII

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

Return Reference	Identifier	Explanation
SCHEDULE D, PART X, LINE 1	ACCRUED UNFUNDED PENSION LIABILITY	ACCRUED UNFUNDED PENSION LIABILITY OF \$14,191,312 REPRESENTS THE EXCESS OF PENSION BENEFIT OBLIGATION OVER THE PENSION PLAN ASSETS. THIS BALANCE DECREASED BY \$6,106,937 FROM THE PRIOR YEAR DUE TO A COMBINATION OF RISING INTEREST RATES AND POSITIVE MARKET PERFORMANCE OF PLAN ASSETS DURING 2013.
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.
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 THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS AND THAT IT WILL CONTINUE TO BE EXEMPT FROM FEDERAL AND STATE INCOME TAXES.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA AND THE CARIBBEAN	0		INVESTMENTS		22,695,155
(2) EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICES	ADVOCACY	11,446
(3) EUROPE (INCLUDING ICELAND AND GREENLAND)	4	17	PROGRAM SERVICES	ADVOCACY	2,080,310
(4) EUROPE (INCLUDING ICELAND AND GREENLAND)	0		GRANTMAKING		110,000
(5) MIDDLE EAST AND NORTH AFRICA	1	9	PROGRAM SERVICES	ADVOCACY	1,206,287
(6) MIDDLE EAST AND NORTH AFRICA	0		GRANTMAKING		80,000
(7) RUSSIA AND THE NEWLY INDEPENDENT STATES	0		GRANTMAKING		6,491
(8) SOUTH AMERICA	0	1	PROGRAM SERVICES	ADVOCACY	16,067
(9) SOUTH ASIA	0	1	PROGRAM SERVICES	ADVOCACY	4,725
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	5	29			26,210,481
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	5	29			26,210,481

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE (INCLUDING ICELAND AND GREENLAND)	GEN SUPPORT	50,000	WIRE			
(2)			EUROPE (INCLUDING ICELAND AND GREENLAND)	GEN SUPPORT	50,000	WIRE			
(3)			MIDDLE EAST AND NORTH AFRICA	GEN SUPPORT	25,000	WIRE			
(4)			MIDDLE EAST AND NORTH AFRICA	RESEARCH & PUBLICATIONS ON DISCRIMINATORY LAWS AGAINST WOMEN	15,000	WIRE			
(5)			MIDDLE EAST AND NORTH AFRICA	GEN SUPPORT	10,000	WIRE			
(6)			MIDDLE EAST AND NORTH AFRICA	GEN SUPPORT	10,000	WIRE			
(7)			MIDDLE EAST AND NORTH AFRICA	GEN SUPPORT	10,000	WIRE			
(8)			MIDDLE EAST AND NORTH AFRICA	GEN SUPPORT	10,000	WIRE			
(9)			EUROPE (INCLUDING ICELAND AND GREENLAND)	GEN SUPPORT	10,000	WIRE			
(10)			RUSSIA AND THE NEWLY INDEPENDENT STATES	GEN SUPPORT	6,491	WIRE			
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 10

3 Enter total number of other organizations or entities 10

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see 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 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)* 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 file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2013

Part V

Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f)(accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Identifier	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 LAWS, 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. IN MOST OF THE CASES AJC REQUIRES THE RECIPIENTS TO SUBMIT NARRATIVE AND FINANCIAL REPORTS.
SCHEDULE F, PART I, LINE 3	FOREIGN INVESTMENTS	AJC INVESTS IN SEVERAL ENTITIES THAT ARE LEGALLY DOMICILED IN FOREIGN JURISDICTIONS. THE 2013 END OF YEAR VALUE OF INVESTMENTS DOMICILED IN CENTRAL AMERICA/CARIBBEAN WAS 22,695,155.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 AB DATA P O BOX 170062, MILWAUKEE, WI 53217-8000	MAIL SOLICITATION & PRM ADVOCACY		✓	982,609	577,094	405,515
2 TELEFUND P O BOX 2366, DENVER, CO 80201-2366	PHONE SOLICITATION		✓	33,326	22,133	11,193
3 INTEGRATED MAIL INDUSTRIES 3450 W HOPKINS STREET, MILWAUKEE, WI 53216-1700	MAIL SOLICITATION		✓		16,510	-16,510
4						
5						
6						
7						
8						
9						
10						
Total				1,015,935	615,737	400,198

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		DINNER EVENT (event type)	DINNER EVENT (event type)	51 (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	4,634,291	2,665,132	14,633,253	21,932,676
	2 Less: Contributions	4,395,891	2,602,582	13,131,860	20,130,333
	3 Gross income (line 1 minus line 2)	238,400	62,550	1,501,393	1,802,343
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes				0
	6 Rent/facility costs				0
	7 Food and beverages				0
	8 Entertainment				0
	9 Other direct expenses	344,098	98,402	1,835,547	2,278,047
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				2,278,047
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-475,704

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11** Does the organization operate gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17** Mandatory distributions:
- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SEE NEXT PAGE

Part IV

Supplemental Information Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

Return Reference	Identifier	Explanation
SCHEDULE G, PART I, LINE 2B(V)	FUNDRAISING ACTIVITIES	AMOUNTS IN COLUMN (V) REPRESENT PAYMENTS TO PROFESSIONAL FUNDRAISERS FOR FUNDRAISING SERVICES AND REIMBURSEMENT OF FUNDRAISING EXPENSES, SUCH AS PRINTING, PAPER, ENVELOPES, POSTAGE, ETC.
SCHEDULE G, PART II, LINE 9(A)	OTHER DIRECT FUNDRAISING EVENT EXPENSES	AJC REPORTS ALL EXPENDITURES RELATED TO ITS SPECIAL EVENT FUNCTIONS AS "OTHER DIRECT EXPENSES" ON SCHEDULE G, PART II, LINE 9. COSTS OF RUNNING THESE SPECIAL EVENTS ARE FREQUENTLY INVOICED AS ONE FEE BY THE VENDOR, SO THAT THE RENTAL, FOOD AND OTHER COSTS ARE BUNDLED AND FURTHER CATEGORIZATION ON SCHEDULE G, PART II IS NOT POSSIBLE. IT IS THEREFORE MORE ACCURATE TO COMBINE ALL THE EXPENSES.

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047
2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

AMERICAN JEWISH COMMITTEE

Employer identification number
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 the selection criteria used to award the grants or assistance?
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Yes No

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE REGENTS OF THE UNIVERSITY OF MICHIGAN PO BOX 223131, PITTSBURGH, PA 15251-2131	38-6006309	501(C)(3)	20,500				STRENGTHENING MUSLIM/JEWISH RELATIONS
(2) NATIONAL MUSEUM OF MEXICAN ART 1852 W 19TH STREET, CHICAGO, IL 60608	36-3225519	501(C)(3)	10,000				STRENGTHENING LATINO JEWISH RELATIONSHIPS
(3) IRAN HUMAN RIGHTS DOCUMENTATION CTR INC 129 CHURCH STREET, NEW HAVEN, CT 06510	20-2744292	501(C)(3)	49,643				RESEARCH AND PUBLICATIONS ON HUMAN RIGHTS
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3
 3 Enter total number of other organizations listed in the line 1 table 0

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2013) Cat. No. 50055P

Part IV**Supplemental Information** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Return Reference	Identifier	Explanation
SCHEDULE I, 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 LAWS, 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. IN MOST OF THE CASES AJC REQUIRES THE RECIPIENTS TO SUBMIT NARRATIVE AND FINANCIAL REPORTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN JEWISH COMMITTEE

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Employer identification number

13-5563393

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

	Yes	No
1b	✓	

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

2	✓	
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3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**

4a		✓
4b	✓	
4c		✓

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" to line 5a or 5b, describe in Part III.

5a		✓
5b		✓

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" to line 6a or 6b, describe in Part III.

6a		✓
6b		✓

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

7		✓
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8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

8		✓
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9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

9		
----------	--	--

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	DAVID HARRIS, EXECUTIVE DIRECTOR	(i) 476,705 (ii) 0	0	41,633	327,565	40,579	886,482	0
2	VICTORIA SCHONFELD, CHIEF OPERATING OFFICER	(i) 322,183 (ii) 0	0	0	7,650	14,057	343,890	0
3	RICK HYNE, CHIEF FINANCIAL OFFICER	(i) 242,592 (ii) 0	0	0	7,521	26,761	276,874	0
4	JULIE SCHAIR, DIR OF RESOURCE DEVELOPMENT	(i) 236,274 (ii) 0	0	803	7,452	32,225	276,754	0
5	JANET BECKER, DIR, STRATEGIC IMPLEMENTATION & 5 HR	(i) 223,283 (ii) 0	0	3,282	6,970	27,667	261,202	0
6	JASON ISAACSON, ASSISTANT EXEC DIR/DIR, OGIA	(i) 216,360 (ii) 0	0	3,147	6,723	34,612	260,842	0
7	STEVEN BAYME, DIR, CONTEMPORARY JEWISH LIFE	(i) 215,142 (ii) 0	0	3,084	6,601	23,539	248,366	0
8	MARC D. STERN, GENERAL COUNSEL	(i) 176,243 (ii) 0	0	2,523	5,540	35,280	219,586	0
9	DANIEL ELBAUM, ASST EXECUTIVE DIR FOR REGIONAL OFFICES	(i) 193,950 (ii) 0	0	369	5,975	2,356	202,650	0
10	RABBI DAVID ROSEN, INTERNATIONAL DIRECTOR OF INTERRELIGIOUS AFFAIRS	(i) 216,484 (ii) 0	0	0	0	32,658	249,142	0
11	MINDY ROSS, ASSISTANT EXEC DIR MARKETING & STRATEGIC COMMUNICATIONS	(i) 208,042 (ii) 0	0	3,069	6,372	31,239	248,722	0
12	ROBERT LEIKIND, REGIONAL DIRECTOR, AJC BOSTON	(i) 188,912 (ii) 0	0	2,440	5,874	33,759	230,985	0
13	SAMUEL WITKIN, EXEC DIR, PROJECT INTERCHANGE	(i) 192,688 (ii) 0	0	4,787	5,871	21,658	225,004	0
14	MICHAEL GILBERT, DIRECTOR REGIONAL OFFICE ADVANCEMENT	(i) 184,508 (ii) 0	0	1,537	5,623	29,624	221,292	0
15								
16								

Part III

Supplemental Information Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Return Reference	Identifier	Explanation
SCHEDULE J, PART I, LINE 1A	FIRST-CLASS OR CHARTER TRAVEL	FIRST CLASS AIRLINE TICKETS ARE OCCASIONALLY BOOKED FOR DAVID HARRIS. AJC PAYS FOR ALL THE TRAVEL COSTS OF HIS WIFE WHO ACCOMPANY DAVID HARRIS ON CERTAIN AJC TRIPS. 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. AJC REIMBURSES DAVID HARRIS FOR A PORTION OF PROPERTY TAXES ON HIS WESTCHESTER HOME. \$24,473 WAS REIMBURSED IN 2013 AND INCLUDED IN HIS FORM W-2 AS TAXABLE COMPENSATION.
SCHEDULE J, PART I, LINE 1A	TRAVEL FOR COMPANIONS	SEE RESPONSES TO LINE 1A ABOVE.
SCHEDULE J, PART I, LINE 1A	TAX INDEMNIFICATION AND GROSS-UP PAYMENTS	SEE RESPONSES TO LINE 1A ABOVE.
SCHEDULE J, PART I, LINE 4B	SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	IN 2006, AS PER DAVID'S HARRIS' CONTRACT, AJC ESTABLISHED A SUPPLEMENTARY EXECUTIVE RETIREMENT PLAN, AND ACCORDINGLY, SCHEDULE J, PART II, COLUMN C INCLUDES THE 2013 CALENDAR YEAR'S ACCRUAL OF \$320,065.
SCHEDULE J, PART II, COLUMN (C)	SUPPLEMENTAL NON QUALIFIED RETIREMENT PLAN	SEE RESPONSE TO LINE 4B ABOVE.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2013

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	✓	113	861,298	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				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	0
----	--	----	---

	Yes	No
30a		✓
b If "Yes," describe the arrangement in Part II.		
31	✓	
32a		✓
b If "Yes," describe in Part II.		
33		

Part II

Supplemental Information Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Return Reference	Identifier	Explanation
SCHEDULE M, PART I	EXPLANATIONS OF REPORTING METHOD FOR NUMBER OF CONTRIBUTIONS	SECURITIES - PUBLICLY TRADED: THE ORGANIZATION RECEIVED 113 SEPARATE GIFTS OF PUBLICLY TRADED SECURITIES.

Supplemental Information to Form 990 or 990-EZ

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

2013

Open to Public Inspection

Name of the Organization
AMERICAN JEWISH COMMITTEE

Employer Identification Number
13-5563393

Return Reference	Identifier	Explanation
FORM 990, PART I, LINE 10	INVESTMENT INCOME	UNREALIZED GAINS OF \$8,396,873 AND \$4,517,392 IN 2013 AND 2012, RESPECTIVELY WERE EARNED, BUT ARE NOT REQUIRED TO BE INCLUDED IN THIS LINE ITEM FOR FORM 990 PURPOSES.
FORM 990, PART III, LINE 4B	PROGRAM SERVICE DESCRIPTION	(CONTINUED FROM FORM 990, PART III, LINE 4B) HEZBOLLAH A TERRORIST ORGANIZATION. THE DESIGNATION WILL HINDER THE GROUP'S ABILITY TO RAISE FUNDS, RECRUIT MEMBERS AND TRANSPORT OPERATIVES ACROSS THE CONTINENT. AFTER HEZBOLLAH BOMBED A BUS OF ISRAELI TOURISTS IN JULY 2012 IN BULGARIA, AJC DREW UPON ITS GLOBAL RESOURCES TO URGE THE EU TO ACT. AJC MOBILIZED ITS OFFICES WORLDWIDE AND, IN SCORES OF MEETINGS AND THROUGH GLOBAL MEDIA OUTLETS, BROUGHT THE ISSUE TO THE ATTENTION OF EUROPEAN LEADERS AND THE U.S. GOVERNMENT. (2) IRANIAN NUCLEAR THREAT: FOR MORE THAN 15 YEARS, IN ALMOST EVERY DIPLOMATIC ENCOUNTER ACROSS THE UNITED STATES AND AROUND THE GLOBE, AJC HAS WARNED OF THE PERILS POSED BY AN IRAN WITH NUCLEAR WEAPONS CAPABILITY. AJC SUPPORTS A DIPLOMATIC RESOLUTION TO IRAN'S NUCLEAR WEAPONS QUEST, AND APPLAUDS EFFORTS BY THE UNITED STATES AND OTHER NATIONS TO NEGOTIATE A SATISFACTORY DEAL. AT THE SAME TIME, AJC BACKS THE PREPARATION OF INTENSIFIED ECONOMIC SANCTIONS TO PUSH IRANIAN LEADERS TO MEET THEIR INTERNATIONAL OBLIGATIONS.
FORM 990, PART III, LINE 4D	DESCRIPTION OF OTHER PROGRAM SERVICES	(EXPENSES \$ 4,208,440 INCLUDING GRANTS OF \$ 58,700)(REVENUE \$ 915,504) AJC'S 2013 PROGRAMMATIC ACTIVITIES INCLUDE: (1) NATIONAL POLICY: AJC ADVOCATES AT THE NATIONAL LEVEL ON LEGISLATIVE AND LEGAL ISSUES THAT AFFECT AJC'S ANNUAL PRIORITIES. ADVOCACY ACTIVITIES IN THE U.S. INCLUDE: MEETINGS WITH MEMBERS OF CONGRESS AND LOCAL OFFICIALS, COMMENTS ON LEGISLATION, COALITION BUILDING WITH COMMUNITY AND OPINION LEADERS, OP-EDS AND ONLINE PETITIONS. (2) INTERRELIGIOUS AND INTERGROUP RELATIONS: AJC BUILDS COALITIONS TO ADVANCE SHARED INTERESTS AND SUPPORT UNDERSTANDING WITH OTHER RELIGIOUS AND ETHNIC GROUPS. THROUGH THESE COALITIONS, AJC ALSO ADVOCATES ON BEHALF OF THE JEWISH PEOPLE AND ISRAEL WITH SELECTED RELIGIOUS GROUPS, (E.G., OPPOSING PROPOSALS TO BOYCOTT ISRAEL). (3) CONTEMPORARY JEWISH LIFE: AJC HELPS TO ENSURE JEWISH CONTINUITY AND TO ENRICH THE RELATIONSHIP OF JEWS IN THE DIASPORA WITH ISRAEL. AJC TAKES PUBLIC POSITIONS AND HOLDS SYMPOSIA ON THE MOST CRITICAL CURRENT ISSUES, (E.G., THE ROLE OF THE CHIEF RABBINATE IN ISRAEL).
FORM 990, PART VI, SEC A, LINE 6	CLASSES OF MEMBERS OR STOCKHOLDERS	AJC IS A MEMBERSHIP ORGANIZATION UNDER APPLICABLE NEW YORK NONPROFIT CORPORATION LAW, AND THE MEMBERS OF ITS BOARD OF GOVERNORS CONSTITUTES ITS CORPORATE MEMBERSHIP. IN 2010, AJC AMENDED ITS BY-LAWS; PRIOR TO THAT AMENDMENT, AJC'S NATIONAL LEADERSHIP COUNCIL CONSTITUTED ITS CORPORATE VOTING MEMBERSHIP. THE BOARD OF GOVERNORS ELECTS SEVERAL MEMBERS OF THE BOARD OF DIRECTORS (EXECUTIVE COUNCIL) AND APPROVES THE ANNUAL BUDGET.
FORM 990, PART VI, SEC A, LINE 7A	MEMBERS OR STOCKHOLDERS ELECTING MEMBERS OF GOVERNING BODY	SEE ABOVE.
FORM 990, PART VI, SEC A, LINE 7B	DECISIONS REQUIRING APPROVAL BY MEMBERS OR STOCKHOLDERS	SEE ABOVE.
FORM 990, PART VI, SEC B, LINE 11B	REVIEW OF FORM 990 BY GOVERNING BODY	THE RETURN WAS PREPARED BY AJC'S STAFF AND REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY AJC & IN CONSULTATION WITH AJC'S STAFF. THE DRAFT WAS THEN REVIEWED BY AJC'S AUDIT COMMITTEE, AND SUBSEQUENTLY PROVIDED TO AJC'S EXECUTIVE COUNCIL PRIOR TO FILING WITH THE IRS. PURSUANT TO AJC'S BYLAWS, THE EXECUTIVE COUNCIL CONSTITUTES AJC'S BOARD OF DIRECTORS AS THAT TERM IS USED IN THE NEW YORK NOT-FOR-PROFIT CORPORATION LAW.
FORM 990, PART VI, SEC B, LINE 12C	CONFLICT OF INTEREST POLICY	AJC HAS WRITTEN CONFLICT OF INTEREST POLICIES COVERING ALL MEMBERS OF EXECUTIVE COUNCIL, OFFICERS, AND EMPLOYEES STIPULATING THAT NO INDIVIDUAL MAY PARTICIPATE IN A DISCUSSION OR DECISION ON ANY MATTER IN WHICH HE OR SHE HAS A MATERIAL FINANCIAL INTEREST, AND HE OR SHE MUST DISCLOSE ANY POTENTIAL CONFLICTS. ALL MEMBERS OF THE EXECUTIVE COUNCIL, OFFICERS, KEY EMPLOYEES WHO HAVE SIGNING AUTHORITY, AND OTHER EMPLOYEES ARE REQUIRED TO CERTIFY 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.
FORM 990, PART VI, SEC B, LINE	PROCESS TO ESTABLISH COMPENSATION OF	IN 2011, AJC CONDUCTED A SALARY REVIEW OF EXECUTIVE DIRECTOR COMPENSATION, REVIEWING FAIR MARKET COMPARABLES FOR POSITIONS AT SIMILARLY SITUATED

Return Reference	Identifier	Explanation												
15A	TOP MANAGEMENT OFFICIAL	ORGANIZATIONS. THE EXECUTIVE DIRECTOR'S MULTI-YEAR CONTRACT WAS REVIEWED AND APPROVED BY AN INDEPENDENT COMPENSATION COMMITTEE AND SUBSEQUENTLY APPROVED BY THE EXECUTIVE COUNCIL. A REVIEW OF THE EXECUTIVE DIRECTOR'S COMPENSATION IS CURRENTLY IN PROGRESS BY A COMPENSATION COMMITTEE COMPOSED OF INDEPENDENT DIRECTORS AS IS AN AGENCY WIDE SALARY REVIEW BY AN OUTSIDE CONSULTANT WHICH WILL ALSO REVIEW COMPENSATION OF KEY AND HIGHLY COMPENSATED EMPLOYEES. THE ORGANIZATION MAINTAINS RECORDS REGARDING THE COMPENSATION SETTING PROCESS. COMPENSATION OF OTHER KEY EMPLOYEES FOR THE PAST SEVERAL YEARS HAS BEEN TIED TO THE SALARY INCREASES NEGOTIATED WITH AJC'S LABOR UNIONS, EXCEPT FOR THOSE WHO HAVE RECEIVED PROMOTIONS AND/OR INCREASED RESPONSIBILITIES.												
FORM 990, PART VI, SEC C, LINE 17	STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI												
FORM 990, PART VI, SEC C, LINE 19	REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	AJC CURRENTLY DOES NOT MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC. AJC CURRENTLY MAKES ITS CONFLICT OF INTEREST POLICY AND WHISTLEBLOWER POLICY AVAILABLE TO THE PUBLIC ON ITS WEBSITE. THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE ALSO AVAILABLE ON ITS WEBSITE. THE IRS DOES NOT REQUIRE THE PUBLIC DISSEMINATION OF AJC'S IRS FORM 1023, BECAUSE THE ORGANIZATION WAS INITIALLY RECOGNIZED AS TAX EXEMPT IN 1929 AND PUBLIC AVAILABILITY IS NOT REQUIRED WHERE THE ORGANIZATION DID NOT HAVE A COPY OF ITS EXEMPTION APPLICATION ON THE EFFECTIVE DATE OF THE REQUIREMENT IN JULY 1987.												
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table border="1"> <thead> <tr> <th>(a) Description</th> <th>(b) Amount</th> </tr> </thead> <tbody> <tr> <td>PENSION AND POSTRETIREMENT CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS REPRESENTS THE NON-CASH CHARGE TAKEN PRIMARILY DUE TO THE DECREASE IN THE DISCOUNT RATE USED IN CALCULATING THE BENEFIT OBLIGATION</td> <td>6,186,511</td> </tr> <tr> <td>CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT</td> <td>556,859</td> </tr> <tr> <td>WRITE OFF OLD PLEDGE</td> <td>- 550,000</td> </tr> <tr> <td>THANKS TO SCANDINAVIA - PRIOR PERIOD ADJUSTMENT</td> <td>256,304</td> </tr> <tr> <td>OTHER CHANGES IN NET ASSETS</td> <td>- 1,507</td> </tr> </tbody> </table>	(a) Description	(b) Amount	PENSION AND POSTRETIREMENT CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS REPRESENTS THE NON-CASH CHARGE TAKEN PRIMARILY DUE TO THE DECREASE IN THE DISCOUNT RATE USED IN CALCULATING THE BENEFIT OBLIGATION	6,186,511	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT	556,859	WRITE OFF OLD PLEDGE	- 550,000	THANKS TO SCANDINAVIA - PRIOR PERIOD ADJUSTMENT	256,304	OTHER CHANGES IN NET ASSETS	- 1,507
(a) Description	(b) Amount													
PENSION AND POSTRETIREMENT CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS REPRESENTS THE NON-CASH CHARGE TAKEN PRIMARILY DUE TO THE DECREASE IN THE DISCOUNT RATE USED IN CALCULATING THE BENEFIT OBLIGATION	6,186,511													
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT	556,859													
WRITE OFF OLD PLEDGE	- 550,000													
THANKS TO SCANDINAVIA - PRIOR PERIOD ADJUSTMENT	256,304													
OTHER CHANGES IN NET ASSETS	- 1,507													

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN JEWISH COMMITTEE

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Employer identification number

13-5563393

Related Organizations and Unrelated Partnerships

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/forms990.

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) THANKS TO SCANDINAVIA (13-6192361) 933 PARK AVENUE, NEW YORK, NY 10028	SCHOLARSHIP	NY	501(C)(3)	7 AJC	AJC		✓
(2) INSTITUTE OF HUMAN RELATIONS (23-7389215) 165 EAST 56TH STREET, NEW YORK, NY 10022	FUNDRAISING	NY	501(C)(3)	7 AJC	AJC		✓
(3) TRANS-ATLANTIC INSTITUTE RUE DEUX EGLISES 39 - BTE 11, 1000 BRUXELLES, BE	ADVOCACY	BE			AJC		✓
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) 2013

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER ANNUITY TRUSTS (2)	INVESTMENT	NY	AJC	TRUST					✓
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

Note.		Yes	No
1 Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of (i) interest (iii) royalties or (iv) rent from a controlled entity		✓
b	Gift, grant, or capital contribution to related organization(s)		✓
c	Gift, grant, or capital contribution from related organization(s)	✓	
d	Loans or loan guarantees to or for related organization(s)		✓
e	Loans or loan guarantees by related organization(s)		✓
f	Dividends from related organization(s)		
g	Sale of assets to related organization(s)		✓
h	Purchase of assets from related organization(s)		✓
i	Exchange of assets with related organization(s)		✓
j	Lease of facilities, equipment, or other assets to related organization(s)		✓
k	Lease of facilities, equipment, or other assets from related organization(s)		
l	Performance of services or membership or fundraising solicitations for related organization(s)		✓
m	Performance of services or membership or fundraising solicitations by related organization(s)		✓
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		✓
o	Sharing of paid employees with related organization(s)		✓
p	Reimbursement paid to related organization(s) for expenses		✓
q	Reimbursement paid by related organization(s) for expenses		✓
r	Other transfer of cash or property to related organization(s)		✓
s	Other transfer of cash or property from related organization(s)		✓
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.			

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
	THANKS TO SCANDINAVIA			
(1)	TRANS-ATLANTIC INSTITUTE	Q	312,191	FMV
(2)	THANKS TO SCANDINAVIA	Q	427,611	FMV
(3)	TRANS-ATLANTIC INSTITUTE	R	952,644	FMV
(4)		R	148,250	FMV
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1).....													
(2).....													
(3).....													
(4).....													
(5).....													
(6).....													
(7).....													
(8).....													
(9).....													
(10).....													
(11).....													
(12).....													
(13).....													
(14).....													
(15).....													
(16).....													