efile GRAPHIC print - DO NOT PROCESS As Filed Data -**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

DLN: 93493319120048

Department of the Treasury Internal Revenue Service

foundations)

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

Open to Public Inspection

Λ F.	7r +h	a 2017 ~	alendar vear or toy year box	jinning 01-01-2017 , and endi	ing 12-2:	1-2017						
B Check if applicable Address change Name change Initial return			C Name of organization	D Employ	D Employer identification number							
			Antı-Defamatıon League		13-1818723							
			% STEVEN C SHEINBERB Doing business as				-	0,23				
☐ Initial return ☐ Final return/terminated												
		d return	605 THIRD AVENUE	f mail is not delivered to street address)	Room/su	ite		E Telephone number				
⊔ Ар	plicati	on pending		ountry, and ZIP or foreign postal code			(212) 8	(212) 885-7700				
			NEW YORK, NY 101583560	ountry, and 21P or foreign postar code			G Gross re	ceipts \$ 86	6.926.699			
			F Name and address of princ	ıpal officer		H(a) Is t	his a group re					
			JONATHAN GREENBLATT 605 THIRD AVENUE			sub	ordinates?		□Yes ☑No			
			NEW YORK, NY 101583560				all subordina uded?	tes	☐ Yes ☐No			
I Tax	k-exer	mpt status	✓ 501(c)(3) □ 501(c)()	◀ (insert no)	5 27	l	No," attach a	list (see	instructions)			
J W	ebsit	te:► WW	/W ADL ORG			H(c) Gro	up exemption	number	>			
						Voor of for	mation 1946	M State	of legal domicile DC			
K Forn	n of o	rganızatıon	Corporation Trust A	ssociation L Other >		L real of for	mation 1940	IN State	or legal doffliche DC			
Pa	rt I	Sum	mary									
			scribe the organization's mission	n or most significant activities 113 TO ELIMINATE ANTI-SEMITISM	1 AND BIG	COTOV IN TH	IETIS AND AR	OLIND TH	HE WORLD			
ıce	-	ADL (THE	ELAGOL) WAS FORMED IN 19	15 TO ELIMINATE ANTI-SEMITISM	I AND BIG	JOIN IN II	IL OS AND AN	.OOID II	TE WORLD			
nar	-											
Governance	,	Check thi	is hox ▶ ☐ if the organization	discontinued its operations or disp	osed of m	ore than 2°	i% of its net a	issets				
				ning body (Part VI, line 1a)			•	3	309			
Activities &	4	Number o	of independent voting members	of the governing body (Part VI, lir	ne 1b) .		•	4	307			
₩ W	5	Total nun	nber of individuals employed in	5	431							
Ę	l		nber of volunteers (estimate if i	6	3,500							
Q.	l		elated business revenue from P		•	7a 7b	0					
	D	Net unrei	ated business taxable income ri	rom Form 990-T, line 34	· · ·	· · ·	rior Year	/B	Current Year			
	8	Contribut	cons and grants (Part VIII, line	1h)	_		61,471,	201	71,717,382			
ēn.	l		service revenue (Part VIII, line	·			780,	_				
Rəvenue	l	-	, ,	A), lines 3, 4, and 7d)			342	19,256				
<u>~</u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,720,2							3,439,987			
	12	Total reve	enue—add lines 8 through 11 (r	must equal Part VIII, column (A), l	ıne 12)		65,971,	077	76,202,602			
	13	Grants ar	nd sımılar amounts paıd (Part I)	(, column (A), lines 1-3)			35,	200	51,115			
	l		•	, column (A), line 4)				0	0			
88	l	-		benefits (Part IX, column (A), line	s 5–10)		32,667,					
Expenses			onal fundraising fees (Part IX, co	, ,,	•		252,	000	253,858			
핓	l		raising expenses (Part IX, column (D penses (Part IX, column (A), lin	· · · · · · · · · · · · · · · · · · ·			25,473,	460	0 26,423,199			
	l	,		equal Part IX, column (A), line 25)	•		58,428,		64,589,213			
	l		less expenses Subtract line 18	, , , , , , ,			7,542,		11,613,389			
8.8						Beginnıı	ng of Current Y	'ear	End of Year			
and			. (5 .) (1 .)				20.622	405	20.045.600			
Ass d Ba	l		ets (Part X, line 16)	125	38,945,602 45,906,989							
Net Assets or Fund Balances	l		inities (Fart X, life 26) is or fund balances Subtract lin	556 431	-6,961,387							
Par			ature Block		•		-16,541,	102	0,301,307			
Under	pena	alties of p	erjury, I declare that I have exa	amined this return, including accon								
knowi any k			r, it is true, correct, and comple	ete Declaration of preparer (other	than offic	er) is based	on all inform	ation of v	which preparer has			
		1	*			7	010 11 12					
Sign		Signati	ure of officer				018-11-12 ate					
Here		JONATI	HAN GREENBLATT CEO/NATIONAL D	IR								
			r print name and title									
			rint/Type preparer's name DANIEL ROMANO	Preparer's signature DANIEL ROMANO	D	ate		PTIN P00504182	2			
Paid		-				s	elf-employed	. 5550+102	-			
Pre		^{ਫ਼} । ├ _ट	irm's name				rm's EIN ►	599_0100				
Use	On	ily ˈ	NEW YORK, NY 100				none no (212)	222-0100				
Messid	he TD)C di							 ∕es □No			
			this return with the preparer sh duction Act Notice, see the s	· · · · · · · · · · · · · · · · · · ·	• •	Cat No	11282Y	<u> </u>	res □ No Form 990 (2017)			

Form	990 (2017)					Page 2
Par	t IIII Statemer	nt of Program Ser	vice Accomplis	hments		
	Check if Scl	hedule O contains a re	sponse or note to a	any line in this Part III		🗸
1	Briefly describe the	e organization's missio	n			
					THE UNITED STATES AND ARC	OUND THE WORLD, WHILE
PROV	/IDING KNOWLEDGE	EABLE LEADERSHIP ON	A NATIONAL LEVE	EL FOR THE AMERICAN I	TEWISH COMMONITY	
2	Did the organization	on undertake any signi	ficant program serv	vices during the year wh	nich were not listed on	
	the prior Form 990	or 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe t	hese new services on	Schedule O			
3	Did the organization	on cease conducting, o	r make significant o	changes in how it condu	cts, any program	
	services?					. 🗌 Yes 🗹 No
	If "Yes," describe t	hese changes on Sche	dule O			
4	Section 501(c)(3)		ations are required	to report the amount of	argest program services, as r f grants and allocations to oth	
	(Code) (Expenses \$	25,547,607	ıncludıng grants of \$	12,400) (Revenue \$	0)
	See Additional Data					
4b	(Code) (Expenses \$	8,354,461	ıncludıng grants of \$	10,000) (Revenue \$	0)
	See Additional Data					
4c	(Code) (Expenses \$	6,837,652	including grants of \$	0) (Revenue \$	0)
	See Additional Data					
4d	Other program ser	rvices (Describe in Sch	edule O)			
	(Expenses \$	11,184,731	ncluding grants of	\$ 28,7	15) (Revenue \$	1,025,977)
4e	Total program se	ervice expenses 🟲	51,924,4	51		
4e	•	, ,		·	, , , , , , , , , , , , , , , , , , , ,	Form 990

or X as applicable

Checklist of Required Schedules

assessments, or similar amounts as defined in Revenue Procedure 98-19?

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

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

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

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

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

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

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

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

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

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

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Page 3

No

Nο

No

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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

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

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

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

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

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

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

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

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

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

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

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

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

Yes

5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right 6 7

R

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11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

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Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Nο Nο Nο ٧o Yes

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Form **990** (2017)

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Form	990 (2017)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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? If "Yes," complete Schedule L, Part II	26		No
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? If "Yes," complete Schedule L, Part III	27		No

28a

28b

28c

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35a

35b

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Yes

Yes

Yes

Yes

Yes

Form 990 (2017)

Νo

No

Nο

Νo

Nο

Nο

No

Nο

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

instructions for applicable filing thresholds, conditions, and exceptions)

orm	990 (2017)			Page
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
	Fortunation according to 2 of Forms 1000 Fortun O of each completely.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 450 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
2a	(gambling) winnings to prize winners?	1 c	Yes	
	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
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)	2 b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►AU , IS See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
_	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
	2. Tesy to line out of only and the organization metorin 6000 1. The first of the f	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?	6 a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
Qa.	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
,	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
	additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		
	which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
				l No
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		110

Patri	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No	" respo	nse to li	nes
	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	respo	nse to n	
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		✓
Se	ction A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		res	NO
	1a 309			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or			
	similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
_		4		No
5 •	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization base members or steekholders?	5 6		No No
5 7 a	Did the organization have members or stockholders?			NO
<i>,</i> a	members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	⊇ Code	∍.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	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?	10Ь	Yes	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in			
_	Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
1 5	Did the organization have a written document retention and destruction policy?	14	Yes	
•	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	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?	16b		
	ction C. Disclosure			
7	List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , FL , GA , ME , MD , MA , MI , MN , MS , MO , NV , N ND , OH , OK , OR , PA , RI , SC , TN , VA	н , из ,	, NM , N	Y, NC
3	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
)	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			
0	State the name, address, and telephone number of the person who possesses the organization's books and records •STEVEN C SHETNBERB C/O ADI - 605 THIRD AVENUE NEW YORK NY 101583560 (212) 885-7700			

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

Name and Title

Average

hours per

week (list

any hours

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

amount of other

compensation

from the

4

Description of services

Special Events Venue

Security - 50/50

Polling Services

Creative Agency

Special Events Venue

Yes

No

966,582

783,558

583,000

551,124

525,000

Form 990 (2017)

(C)

Compensation

Page 8

	for related							organization (W-	organizations (W		from t	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		organizati relate organiza	ed
See Additional Data Table			\vdash	+	+-'	\vdash	+-			+		
	· '		+	⊬	+-'	+	+			+		
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1b Sub-Total		Щ_	Щ.	丄	′ـــــــــــــــــــــــــــــــــــــ		Щ'					
c Total from continuation sheets to Pa	· · · · · · · · · · · · · · · · · · ·		٠. ٠			>	—			+		
d Total (add lines 1b and 1c)	•					•		3,855,656	946,767	/		321,386
Total number of individuals (including of reportable compensation from the compensation)	g but not limited	to thos				e) who	rec	eived more than \$1	00,000			
											Yes	No
3 Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>				•		, ,		ighest compensated	employee on	3		No

Position (do not check more

than one box, unless person

is both an officer and a

director/trustee)

Reportable

compensation

from the

Reportable

compensation

from related

organization (W- lorganizations (W-

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such

		4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	
S	ection B. Independent Contractors		
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of confrom the organization. Report compensation for the calendar year ending with or within the organization's tax year.	mpensa	ation

compensation from the organization ▶ 46

GRAND HYATT NEW YORK,

150 Motor Parkway Suite 401 HAUPPAUGE, NY 11788 FIRST INTERNATIONAL,

2200 Fletcher Avenue Suite 500 FORT LEE, NJ 07024 MARRIOTT BUSINESS SERVICES,

LockBox 842234 DALLAS, TX 75284 NEW YORK GOLD SHIELD.

PO Box 403717 ATLANTA, GA 30384 PURPOSE CAMPAIGN LLC,

115 5th Avenue Floor 6 NEW YORK, NY 10003

Name and business address

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part		<u> </u>	Revenue								rage 3
				a respo	onse or note to any	/ line in thi	s Part VII				<u> </u>
						(A Total re		(B Relate exer funct	ed or npt tion	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1:	a Federated campaigi	ns	1a	126,234			reve	nue		512-514
nts ints		b Membership dues .		1b	<u> </u>						
3ra nou		c Fundraising events		1c	9,294,645						
S. A		d Related organizatio		1d	8,931,431						
		e Government grants (co		1e							
ons, Gifts, Grants Similar Amounts	1	f All other contributions,									
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts no above	ot included	1f	53,365,072						
tributio Other		g Noncash contribution		4.20	A 570						
Cont and		in lines 1a-1f \$ 1-1al Total Add lines 1a-1			04,578 •						
	ŀ	Totali Add lines 1a 1		• •	Busines		717,382			<u> </u>	
Program Service Revenue	2a	■ EDUCATIONAL TRAINING	G FEFS		- Dusines.	611710	1.0	25,977	1,025,9	77	
₹			01663								
Se F	ь			_							
Σ	d	 		_							
Ē	е	,		_							
ogra	f	All other program se	rvice revenue			025 077					
ΔŤ	g	Total. Add lines 2a-2f			▶	025,977					
		Investment income (in similar amounts)			nterest, and other		9,46	1			9,464
		Income from investme			ond proceeds	•		0			
	5	Royalties				▶ [(
			(ı) Rea		(II) Personal						
	6a	Gross rents									
	Ŀ	Less rental expenses									
	,	Rental income or		0							
	Ì	(loss)									
	C	Net rental income of		•	• • • •						
	7a	Gross amount	(ı) Securit	ies	(II) Other	\dashv					
	,	from sales of assets other	5,8	68,320							
		than inventory									
	Ŀ	Less cost or other basis and	5,8	58,528							
		sales expenses Gain or (loss)		9,792		\dashv					
		Net gain or (loss)		•	•	┪	9,79	2			9,792
	8a	Gross income from fu									
Other Revenue		(not including \$ contributions reporte	9,294,645 d on line 1c)	от							
₹ >		See Part IV, line 18			8,305,556	_					
ď		Less direct expenses : Net income or (loss)		b	4,865,569 ents •	9	3,439,98	7			3,439,987
the		Gross income from g			ents	1	3,133,30				3,133,337
0		See Part IV, line 19									
	ŀ	Less direct expense:	•	a b		2					
		: Net income or (loss)									
		Gross sales of invent	ory, less								
		returns and allowand	es	а							
	Ŀ	Less cost of goods s	old	b		5					
		: Net income or (loss)		ınvent	ory >	_	(D .			
		Miscellaneous	Revenue		Business Code	_					
	11	.a									
	Ŀ)									
	•	:									
	_	I All other revenue .						-			
		a All other revenue . • Total. Add lines 11a	-11d		<u> </u>			1			
		2 Total revenue. See					(0			
					• • • •		76,202,60	2	1,025,977		3,459,243 Form 990 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all cc	_	·	. ,	
Check if Schedule O contains a response or note to any	line in this Part IX			<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	6,000	6,000		
2 Grants and other assistance to domestic individuals See Part IV, line 22	45,115	45,115		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	3,347,502	2,119,486	701,909	526,107
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	26,324,524	22,682,869	551,252	3,090,403
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	495,003	420,193	21,731	53,079
9 Other employee benefits	7,578,561	6,722,263	156,147	700,151
10 Payroll taxes	115,451	98,003	5,068	12,380
11 Fees for services (non-employees)				
a Management	0			
b Legal	234,845	11,595	213,976	9,274
c Accounting	158,024	7,802	143,981	6,241
d Lobbying	2,500	2,500		
e Professional fundraising services See Part IV, line 17	253,858			253,858
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12 Advertising and promotion	0			
13 Office expenses	1,852,824	1,501,536	185,663	165,625
14 Information technology	1,049,245	850,312	105,140	93,793
15 Royalties	0			
16 Occupancy	7,449,194	5,543,556	1,296,000	609,638
17 Travel	1,643,915	1,432,122	110,631	101,162
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •	0			
19 Conferences, conventions, and meetings	2,765,131	2,407,224	186,382	171,525
20 Interest	145,676	15,578	128,761	1,337
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	1,123,429	910,432	112,573	100,424

318,202

1,661,708

1,387,376

6,581,130

64,589,213

50,000

257,873

1,661,708

50,000

5,178,284

51,924,451

31,885

929,557

4,880,656

28,444

1,387,376

473,289

7,784,106

Form **990** (2017)

23 Insurance .

b DIRECT MAIL

expenses on Schedule O)

d ALL OTHER EXPENSES

e All other expenses

a EDUCATION PROJECT&FUNCTIONS

c GUARDIANS OF HUMANITY BK PRO

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

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

1

Assets

11

12

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31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

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340.000

445.781

7.566.920

403.109

497.200

3.330.712

30,629,125

7,338,610

607,750

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0 14

0 18

0 20

0 21

C 22

4.000.000

35,224,196

47,170,556

-21.383.612

4.842.181

-16,541,431

30.629.125

Page **11**

5,034,395 2.778.625 8,915,435 165,210

0

331,500

1,162,580

7,204,668

226.073

429.300

2.697.816

38.945.602

7.288,457

641,175

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4.000.000

33.977.357

45,906,989

-20.859.930

13.898.543

-6,961,387

38.945.602

Form **990** (2017)

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

Part II of Schedule L

Inventories for sale or use .

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Notes and loans receivable, net .

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

basis Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

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

Unsecured notes and loans payable to unrelated third parties .

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

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

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

Investments—program-related See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

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

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

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

	Beginning of year		End of ye
Cash-non-interest-bearing	2,706,710	1	
Savings and temporary cash investments	7,987,135	2	

22,544,396

15.339.728

2	Savings and temporary cash investments	7,987,135	2	
3	Pledges and grants receivable, net	7,188,716	3	
4	Accounts receivable, net	162,842	4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part		_	

10a

10b

Page **12**

-2.033.345

-6.961.387

No

Nο

No

Form 990 (2017)

Yes

Yes

Yes

2a

2b

2c

3a

3b

2	Total expenses (must equal Part IX, column (A), line 25)	2	
3	Revenue less expenses Subtract line 2 from line 1	3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	
5	Net unrealized gains (losses) on investments	5	

Form 990 (2017)

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

	'		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	

Other changes in net assets or fund balances (explain in Schedule 0)

Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10

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

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

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

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

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

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

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

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

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

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

Consolidated basis

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

✓ Consolidated basis

4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-16,541,43.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Additional Data

Software ID:

REACH OUT TO BOTH THE LOCAL JEWISH AND GENERAL COMMUNITIES THROUGH ADL PROGRAMS (CONTINUED IN SCHEDULE O)

Software Version:

Name: Anti-Defamation League

EIN: 13-1818723

Form 990 (2017)

Form 990, Part III, Line 4a: REGIONAL OPERATIONS - SUPERVISES AND COORDINATES THE LEAGUE'S COAST-TO-COAST NETWORK OF REGIONAL AND SATELLITE OFFICES IN THE UNITED STATES EACH REGIONAL OFFICE CARRIES OUT THE LEAGUE'S AGENDA IN ITS DESIGNATED GEOGRAPHIC AREA. THE REGIONAL OPERATIONS DIVISION IS CHARGED WITH

COORDINATING THE WORK OF THE REGIONAL OFFICES WITH THE WORK OF THE NATIONAL PROFESSIONAL STAFF IN ORDER TO EFFECTIVELY CARRY OUT ADL'S MISSION THE REGIONAL OFFICES SUPPORT THE NATIONAL DECISION-MAKING PROCESS WITH LOCAL PERSPECTIVES, PRIORITIES AND INPUT THE FIELD STAFF AND LAY LEADERS

POLICY AND PROGRAM - FURTHERS THE LEAGUE'S MISSION BY MONITORING, EXPOSING, AND COUNTERACTING GROUPS AND INDIVIDUALS THAT PROMOTE HATE, EXTREMISM, ANTI-SEMITISM, AND RACISM, COMBATING BIAS-MOTIVATED CRIMINAL CONDUCT AND DISCRIMINATION, AND SAFEGUARDING RELIGIOUS LIBERTY IN 2017, ADL RESPONDED TO MORE THAN 1,900 CONSTITUENT COMPLAINTS AND MORE THAN 4,700 INQUIRIES REGARDING INTERNET HATE ADL PROVIDED MORE THAN 500 EXTREMIST-RELATED ASSISTS TO LAW ENFORCEMENT AND MORE THAN 15.000 LAW ENFORCEMENT PROFESSIONALS PARTICIPATED IN ADL'S TRAINING PROGRAMS

Form 990, Part III, Line 4b:

FOCUSED ON EXTREMISM, HATE CRIMES AND ANTI-BIAS (CONTINUED IN SCHEDULE O)

MARKETING AND COMMUNCIATIONS IS RESPONSIBLE FOR STEWARDING THE BRAND OF ADL AND ENSURING MEANINGFUL CONNECTIONS AND ENGAGEMENT WITH ADLS TARGET AUDIENCE MARKETING AND COMMUNICATIONS IS RESPONSIBLE FOR WWW ADL ORG, EMAIL MARKETING STRATEGY AND CONTENT, VIDEO CREATION, PHOTOGRAPHY AND ALL MARKETING AND CREATIVE ELEMENTS NEEDED TO SUPPORT INTERNAL ADL DEPARTMENTS AND ITS REGIONAL OFFICES ADL MARKETING AND

COMMUNICATIONS PRODUCES THE ADL ANNUAL REPORT AND OUTWARD FACING CONFERENCES, SUCH AS NEVER IS NOW, THE SUMMIT ON ANTI-SEMITISM AND HATE

Form 990, Part III, Line 4c:

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

	£ - 4 1							(14/ 3/1000	/M/ 3/1000	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Jonathan Greenblatt	20 0										
	•••••	×		×				480,339	480,341	38,620	
CEO/National Director	20 0										
Marvin Nathan	20 0									_	
	•••••	X		X				0	0	0	
National Chair	4 5									_	
Martin Budd	7 0										
	•••••	X		X				0	0	0	
Vice Chair	1 5										
Meyer Eisenberg	2 0										
	•••••	X		×				0	0	0	
Vice Chair	0.0		l	l	l						

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	4 5
Martin Budd	7 0
Vice Chair	1 5
Meyer Eisenberg	2 0
Vice Chair	0 0
Esta Gordon Epstein	7 0

Vice Chair

Vice Chair

Vice Chair

Ruth Moss

Vice Chair

Vice Chair

Mark Wilf

Vice Chair

George Stark

Steve Lyons

Charles Kriser

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

	any hours	and a director/trustee)						organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Christopher Wolf	2 5	×		x				0	0	0	
Vice Chair	0 5	.,						0	0	0	
Milton Schneider	7 0	×		x				0	0	0	
Treasurer	5 5			.,					•		
Thomas Homburger	2 5	×		x				0	0	0	

	0								
Milton Schneider	7 0	×		Х				0	
Treasurer	5 5	^		^					
Thomas Homburger	2 5	×		Х				0	
Secretary	1 5	χ.		· ·				9	
Stanford Baratz	2 0	~		V					
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and Independent Contractors

Assist Secretary

Regional Board Chair

Elaine Feuer-Barton

Regional Board Chair

Jonathan Gleklen

Tracey Grossman

Josh Grushkin

......

Denise Caplan

Jim Fried

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

and Independent Contractors

Regional Board Chair

...........

Eileen Hershberg

Linda Horodas

Donna Johnson

Jared Lindauer

Marcy Helfand

	any hours	and	a dır	ecto	r/tr	ustee)		organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Alan Gubernick	2 0										
Regional Board Chair	0 0	×						0	0	0	
Margaret Hall	2 0	1									
Regional Board Chair	0 0	×						0	0	0	
Jason Halper	2 0	1						_			
Regional Board Chair	0 0	×						0	0	0	
Scott Harris	2 0	l									
Regional Board Chair	0 0	×						0	0	0	
Sue Hauenstein	2 0										

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	0								
Jason Halper	2 0	×						0	
Regional Board Chair	0 0	*						9	
Scott Harris	2 0								
		l x	l	l		1		l o	
Regional Board Chair	0 0								
Sue Hauenstein	2 0								
Sue Haueristein		_	l	l		l		ا ا	

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Jason Halper	2 0	v			0	ام	
Regional Board Chair	0 0	^			0		
Scott Harris	2 0	×			n	0	
Regional Board Chair	0 0	^			9		
Sue Hauenstein	2 0						

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

	any nours	and	a dir	ecto	or/tr	ustee)	'	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
David Malik	2 0	Х						0	0	0	
Regional Board Chair	0 0										
Melinda Quiat	2 0	х						0	0	0	
Regional Board Chair	0 0										
Phil Rubin	2 0	x						0	0	0	
Regional Board Chair	0 0										
Sam Schaul Regional Board Chair	2 0	х						0	0	0	

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Regional Board Chair
Sam Schaul
Regional Board Chair
Deb Shalom
Regional Board Chair

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David Slossberg

Marina Stephens

Ann Thompson

Aaron Vickar

Barbara Balser

Regional Board Chair

Regional Board Chair

Regional Board Chair

Regional Board Chair

Past National Chair

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

	any hours	and	a dır	ecto		ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Howard Berkowitz Past National Chair	2 0	×						0	0	0	
Kenneth Bialkin Past National Chair	2 0	×						0	0	0	
Barry Curtiss-Lusher Past National Chair	2 0	×						0	0	0	
Burton Levinson Past National Chair	2 0	×						0	0	0	
Glen Lewy Past National Chair	2 0 7 5	×						0	0	0	

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Burton Levinson
Past National Chair
Glen Lewy
Past National Chair

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David Strassler

Past National Chair

Robert Sugarman

Past National Chair

Past National Chair

Robert Naftaly

Hon Treasurer

Barbara Adelman

National Commissioner

Glen Tobias

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

	any hours	and	a dır	ecto	r/trر	ustee)	۱ ۱	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Andrew Adelson National Commissioner	1 0	×						0	0	0	
Bennet Alsher National Commissioner	10	x						0	0	0	
Diana Anderson National Commissioner	1 0	×						0	0	0	
Karen Artz Ash	1 0	x						0	0	0	

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National Commissioner Jerome Axelrod

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National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Marvin Berenblum

Ronald Balser

Richard Barton

Daniel Beller

Barry Berg

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

	any hours	ı		recto	-	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Jason Berkowitz National Commissioner	1 0	×						0	0	0	
Joseph Berman National Commissioner	1 0	×						0	0	0	
Jared Blum National Commissioner	10	х						0	0	0	
Linda Blum National Commissioner	1 0	×						0	0	0	

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National Commissioner	
Linda Blum	
National Commissioner	
Brian Boorstein	
National Commissioner	

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Lvnne Borsuk

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Bernard Brownstein

Jonathan Bruss

Linda Clifton

Claudia Cohen

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

	any hours	a dır	recto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	ee voldme Highest compensated	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
David Cohen	1 0	х						0	0	0
National Commissioner	0 0									_
Faith Cookler National Commissioner	1 0 1 5	×						0	0	0
Jonathan Cookler National Commissioner	1 0	×						0	0	0
Lawrence Cooper	1 0	×						0	0	0

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National Commissioner
Lawrence Cooper
National Commissioner
Elliot Cosgrove
National Commissioner

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A Steven Crown

Steven Daniels

William Davidson

Warren Davis

Diane Dennis

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

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

	any hours	and	a dır	ecto		ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Jeffrey Diamond	5 0	×						0	0	0
National Commissioner	0 0									
Mark Dillon National Commissioner	10	×						0	0	0
Mitchell Dubick National Commissioner	1 0	×						0	0	0
Joanne Egerman National Commissioner	1 0	×						0	0	0
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ivational Commissioner
Joanne Egerman
National Commissioner
Jay Eisenhofer
National Commissioner

Norman Epstein

Robert Epstein

Allen Fagel

Ken Feiler

Alan Feldman

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

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

and Independent Contractors

Mark Finkelstein

National Commissioner

......

Michael Finkelstein

Howard Fischer

Barbara Fishbein

Andrew Fishman

Barry Fleishman

Joshua Force

	any hours					omice (ustee		organization	organizations	from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Susan Fine National Commissioner	1 0	X						0	0	0	
Steven Fineman National Commissioner	1 0	х						0	0	0	
Judith Finkel National Commissioner	5 0	Х						0	0	0	

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

	any nours	and	a dir	ecto		ustee,	'	organization	organizations	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	ee voldwe Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations	
Andrew Frackman National Commissioner	5 0	×						0	0	0	
Charlotte Frank National Commissioner	1 0	×						0	0	0	
Michael Freeling National Commissioner	1 0	×						0	0	0	
Julianna Friedman National Commissioner	1 0	x						0	0	0	
Sue-ann Friedman	1 0	х						0	0	0	

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National Commissioner

Seth Gadinsky

Hal Garnick

Seth Gerber

Nicole Gibson

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Karyn Ginsberg-Greenwald

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

and Independent Contractors

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

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Andrew Goldman

Peggy Goldman

Marlene Goldstein

Roslyn Goldstein

Cecilia Goodman

	any hours	and	a dır	recto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	eavoldma Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Marcıa Glassel National Commissioner	1 0	х						0	0	0
Neil Goldberg National Commissioner	10	x						0	0	0
Jane Goldblum National Commissioner	6 0	×						0	0	0
January Caldidama	6.0									

	0.0						
Jane Goldblum	6 0				ĺ		
National Commissioner	0 0	X				0	
Joseph Goldblum	6 0	Х				0	
National Commissioner	0 5	^				0	
Jamie Golden	1 0	~				0	

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

and Independent Contractors

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

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David Hershberg

Edward Hershfield

Susan Hoffman

Yossie Hollander

John Harris

	any hours					ustee		organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Martin Greenberg National Commissioner	1 0	×						0	0	0
National Commissioner	0.0									
David Grossman National Commissioner	1 0	×						0	0	0
	0.0									
Joan Halpern National Commissioner	1 0	×						0	0	0
- National Commissioner	0.0			_		<u> </u>				
Franklın Harberg National Commissioner	10	×						0	0	0
	1		_	_	-	 		 		

Joan Halpern	1 0	×					0	
National Commissioner	0 0						Į .	
Franklın Harberg	1 0	×					0	
National Commissioner	0 0	^						
Deborah Harrıs	1 0							
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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation

and Independent Contractors

Donna Johnson

Sam Jonas

Robert Jossen

Mark Juster

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Ivy Kagan Bierman

	any hours	and	a dır	ecto	or/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Louise Homburger National Commissioner	1 0	x						0	0	0
Eric Horodas National Commissioner	7 0	×						0	0	0
Michael Horowitz National Commissioner	1 0	х						0	0	0
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	0.5					
Michael Horowitz	1 0					
		x			0	
National Commissioner	0 0					
David Ickovic	1 0					
		×			0	
National Commissioner	0 0					
Rochelle Jacobson	1 0					
		x			0	
National Commissioner	0 0					
	1.0					

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

and Independent Contractors

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Joel Kave

Eric Kingsley

Jack Klein

Alan Klinger

Robert Klugman

	any hours					ustee)		organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Rhoda Kahn Nussbaum	1 0	x						0	0	0
National Commissioner	0 0	l ''						0		
Dennis Kainen National Commissioner	1 0	x						0	0	0
Marc Kaplin	1 0							_	_	_
National Commissioner	0 0	×						0	0	0
Louis Karol	1 0									

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National Commissioner	0 0					
Marc Kaplın	1 0	×			0	
National Commissioner	0 0	^				
Louis Karol	1 0	×			n	
National Commissioner	0 0					
Michael Katz	1 0					

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

	for related (V							01 ga1112at1011	/W 3/1000	organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations	
Jamie Kohen	1 0	×						0	0	0	
National Commissioner	0 0										
Kenneth Kranzberg National Commissioner	1 0	х						0	0	0	
Charles Kurland National Commissioner	1 0	Х						0	0	0	
James Kurtz-Phelan National Commissioner	1 0	X						0	0	0	

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Jonathan Lake National Commissioner

Douglas Land

Ellis Landau

Howard Landau

Jonathan Lavine

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Frederick Lawrence

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

	any hours	and	a dır	ecto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Alan Lazowskı National Commissioner	1 0	×						0	0	0
Thomas Leanse National Commissioner	1 0	х						0	0	0
Melvin Lechner National Commissioner	1 0	Х						0	0	0
Down a Ladram	1 0								•	

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National Commissioner		
- Wational Commissioner	0 0	
Melvin Lechner	1 0	
National Commissioner	0 0	
Bruno Ledwin	1 0	
National Commissioner	0.0	

and Independent Contractors

Michael Lerner

Bradlev Levin

John Levy

Sherry Levy

Maurice Lewitt

Alan Lichtin

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

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

	any hours	1		ecto		ustee))	organization	organizations	from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Cindy Lyons National Commissioner	1 0	×						0	0	0	
Ginny MacDowell National Commissioner	10	×						0	0	0	
Heidi Mandel National Commissioner	1 0	×						0	0	0	
Steve Mandell National Commissioner	1 0	×						0	0	0	
Sylvia Margolies	1 0	v						0	0	0	

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National Commissioner
Steve Mandell
National Commissioner
Sylvia Margolies

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National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Leah Mendelsohn

Cynthia Marks

Todd Marshall

Gregg Mashberg

Daniel Meisel

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

and Independent Contractors

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

George Moss

Richard Moss

William Mowat

Nicole Mutchnik

Jill Nadel

	any hours	and	a dır	ecto	r/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	0.5	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Laura Merage National Commissioner	1 0	×						0	0	0
Judith Meyer	5 0	х						0	0	0
National Commissioner	0 0									
Lawrence Miller	6 0	.,								

National Commissioner	0 0						
Lawrence Miller	6 0						
	•••••	X			0	0	
National Commissioner	0 5						
Jacob Morowitz	1 0						
Judob From Williams		X			0	0	
National Commissioner	0 0	, ,					
Marsha Moses	1 0						

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

and Independent Contractors

Steven Nichols

Susie Noddle

Richard Nodel

Scott Notowitz

Neil Oberfeld

Norman Oblon

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

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	any hours	and	a dır	recto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Jonah Neuman National Commissioner	1 0	×						0	0	0	
Valerie Newberg National Commissioner	1 0	×						0	0	0	
Harriet Nichols	1 0	_						0	0	0	

Valerie Newberg					0	
National Commissioner	0 0	^				
Harriet Nichols	1 0					
National Commissioner	0 0	Х			U	
Sharyn Nichols	1 0	V			0	
National Commissioner	0 0	_ ^				

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

and Independent Contractors

Steven Pepper

Florie Perellis

Michael Perlow

National Commissioner

National Commissioner

National Commissioner

	any hours	and	a dır	ecto	r/tr	ustee))	organization	organizations (W- 2/1099-	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	organization and related organizations	
Thomas O'Brien	1 0	X						0	0	0	
National Commissioner	0 0								0		
Robert Ogan	1 0	x						0	0	0	
National Commissioner	0.0										
Jeffrey Parker National Commissioner	10	X						0	0	0	
				_							

		1				
Jeffrey Parker	1 0	×			0	
National Commissioner	0 0	''				
Shelley Parker	6 0	l			0	
National Commissioner	4 5	_ ^				
Nancy Parris-Moskowitz	1 0					

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Shelley Parker	6 0							
		X	l			0	ol	
National Commissioner	4 5							
Nancy Parris-Moskowitz	1 0							
Trainey Farris Freshorne		×				l n	n l	
National Commissioner	0 0						Ĭ	i
				-				$\overline{}$

Shelley Parker		l x			0	0	(
National Commissioner	4 5	,				J	
Nancy Parris-Moskowitz	1 0	×			0	0	(
National Commissioner	0 0	l				0	
Dennis Passis	1 0						

A Barra Barralana	1 0						
National Commissioner	0.0				-	-	_
Delinis i dasia		l x			0	0	0
Dennis Passis	1 0						_
National Commissioner	0.0						

National Commissioner	0 0	X			0	0	(
A Ross Pearlson	1 0	V			0		,
National Commissioner	0 0	×			U	0	

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

	any hours	and	a dır	recto	or/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Audrey Plotkin	1 0	x						0	0	0
National Commissioner	0 0									
Lorne Polger National Commissioner	1 0	Х						0	0	0
Janet Pozmantier National Commissioner	1 0	Х						0	0	0
Flizaheth Price	1 0									

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National Commissioner	0.0						
Janet Pozmantier	1 0						
		X				0	
National Commissioner	0 0						
Elizabeth Price	1 0						
		X				0	
National Commissioner	0 0						

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and Independent Contractors

Harvey Prince

Suzanne Prince

David Pudlin

Stephen Queen

Jonathan Quinn

Steven Rabitz

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

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

and Independent Contractors

Marc Reissner

Burton Resnick

Myron Resnick

Ilene Rispler

Jeffrey Robbins

Rachel Robbins

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

	any hours	and	l a dır	ecto	r/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	1 .	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Kenneth Raisler National Commissioner	1 0	×						0	0	ı
Alan Rauss National Commissioner	10	×						0	0	
Arthur Reidel	0 0 6 0							0		

National Commissioner	0 0					
Alan Rauss	1 0				_	
National Commissioner	0 0	×			0	
Arthur Reidel	6 0	V			0	
National Commissioner	0 5	^			l o	
Joshua Reisman	1 0	.,				
National Commissioner	0.0	×				

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

and Independent Contractors

George Rudolph

James Rudolph

Deborah Rudy

National Commissioner

National Commissioner

National Commissioner

	any hours	l	a dıı	recto	r/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Bernard Roberts National Commissioner	10	×						0	0	0
Monica Rosenbluth National Commissioner	1 0	×						0	0	0
Gideon Rothschild National Commissioner	1 0	×						0	0	0

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National Commissioner	0 0					_		l
Gideon Rothschild	1 0	×				0	0	
National Commissioner	0 0	^					Ŭ	
Michael Rothstein	1 0	×				0	0	
National Commissioner	0 0	_ ^						
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Glaeoff Rottischila		Ιx			n	0	
National Commissioner	0 0	^				9	
Michael Rothstein	1 0	L u					
National Commissioner		×			U	U	
Arnold Rubin	1 0	,					
National Commissioner	0.0				U	O	

Fileriae Rodisceni		l x				n	n	n
National Commissioner	0 0	,					ŭ .	
Arnold Rubin	1 0	×				0	0	0
National Commissioner	0 0	,				J	, and the second	
Cheri Rubin	1 0	v				0	0	0
National Commissioner	0 0	^				0	0	
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National Commissioner	0 0	,,			J	,	
Cheri Rubin	1 0	×			n	0	0
National Commissioner	0 0	^				3	
Michael Rubin	1 0	×			0		0
National Commissioner	0.0	_ ^			ĺ	Ü	

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

	any hours	and	a dır			ustee)		organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Lily Saad	1 0	×						0	0	0	
National Commissioner	0 0	l									
Jane Saginaw National Commissioner	1 0	x						0	0	0	
Leonard Sahn National Commissioner	1 0	×						0	0	0	
Stephen Saltzman	0 0							0	0	0	
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National Commissioner
Stephen Saltzman
National Commissioner
Jeffrey Saper

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National Commissioner

National Commissioner

Marlene Sasson Recht

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Mitchell Saranow

Lewis Sassoon

David Schaefer

Ben Sax

and Independent Contractors

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

	£ - - -					organization	organizations	from the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Richard Schaps	1 0									
National Commissioner	0 0	×						l u	0	0
Ian Scharfman	1 0	×						0	0	0
National Commissioner	0 0							U	U	0
Marc Scheineson	1 0	×						0	0	0
National Commissioner	0 0								0	0
Marc Schneider	1 0	×						0	0	0
National Commissioner	0 0								0	l "

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- Hadional Commissioner
Marc Schneider
National Commissioner
Steven Schram
National Commissioner

Dale Schwartz

Pamela Schwartz

Larry Scott

Gil Serota

Michael Serling

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

and Independent Contractors

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

	any hours					ustee	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
Neal Shapero National Commissioner	1 0	x						0	0	0
James Shapiro National Commissioner	10	х						0	0	0
Michael Sheetz	6 0	×						0	0	0

James Shapiro	1 0	×			0	
National Commissioner	0 0	^			9	
Michael Sheetz	6 0					 [
	•••••	X			0	I
National Commissioner	0 5					ĺ
Terry Sherman Ralston	1 0					1
		X			0	I
National Commissioner	0.0					İ

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and Independent Contractors

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Jeffrey Simon

Pamela Simon

Helen Spector

Robyn Sperling

Charles Steinberg

Michael Sheetz	6 0	v					0	0	
National Commissioner	0 5	_ ^							
Terry Sherman Ralston	1 0	×					0	0	
National Commissioner	0 0	^							
Howard Sherwood	1 0	.,							
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Michael Sheetz	6 0	v			0	0	
National Commissioner	0 5	_ ^					
Terry Sherman Ralston	1 0	×			0	0	
National Commissioner	0 0	l ''					
Howard Sherwood	1 0	V			0	0	

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

	any hours	and	a dır	ecto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Ellen Sternweiler National Commissioner	1 0	×						0	0	0
Greg Stewart National Commissioner	10	×						0	0	0
Allan Steyer National Commissioner	1 0	×						0	0	0
Stephen Susman	1 0	Х						0	0	0

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National Commissioner

Zena Tamler

Chuck Taylor

Leah Temkin

Nancy Timm

Jay Tobin

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

Marla Tanenbaum

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and Independent Contractors

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

	any hours					omice (ustee		organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Wendy Tonkin National Commissioner	1 0	Х						0	0	0
Tracy Treger National Commissioner	0 0	×						0	0	0
Steven Ungerleider National Commissioner	1 0	Х						0	0	0
	1.0									

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may mage.		X				l o	
National Commissioner	0 0					J	
Steven Ungerleider	1 0	×				0	
National Commissioner	0 0						
John Wallach	1 0						
National Community		X				0	
National Commissioner	0 0						

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and Independent Contractors

James Wallack

Lenore Wax

Alan Weil

Gregg Weiner

Mırıam Weisman

Mitchell Weseley

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

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

	any hours	and a director/trustee)						organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
D Richard Williams	1 0							_			
National Commissioner	0 0	×						U	0	0	
Barry Winograd	1 0										
National Commissioner	0 0	×						l o	0	0	
Jonathon Wise National Commissioner	1 0	×						0	0	0	
	0 0			_	_						
David Wittenstein National Commissioner		×						0	0	0	
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National Commissioner
David Wittenstein
National Commissioner
Jacques Wolf
National Commissioner

Eric Wolkoff

Harvey Wolkoff

Eric Zachs

Stephen Zack

Marjorie Zessar

National Commissioner

National Commissioner

National Commissioner

National Commissioner

National Commissioner

and Independent Contractors

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

!	1 2,						,	(11, 2/1000	(14) 2/4 222		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Martine Zinn National Commissioner	1 0	×						0	0	0	
ABRAHAM H FOXman NATIONAL DIRECTOR EMERITUS	3 5 2 5	x						165,875	84,600	0	
Melvin Salberg	2 0						\Box				

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ABRAHAM H FOXman	3 5					
		X			165,875	84
NATIONAL DIRECTOR EMERITUS	2 5					
Melvin Salberg	2 0					
		l x			0	
PAST NAT'L CHAIR (THRU 11/17)	0 5					
James Grosfeld	2 0					
		l x			0	
Vice Chair (THRU 11/17)	0.0					

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and Independent Contractors

Jeffrey L Baker

Martin H Belsky

Eric Berg

Joan E Berger

Adam M Cole

Lee H Davis

Natl Commissioner (THRU 11/17)

NATL COMMISSIONER (THRU 11/17)

NATL COMMISSIONER (THRU 2/17)

NATL COMMISSIONER (THRU 11/17)

NATL COMMISSIONER (THRU 10/17)

NATL COMMISSIONER (THRU 3/17)

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

and Independent Contractors

Lawrence E Glick

Eugene Goldstein

Jay Hack

Philip Korn

Michael Merlin

Jeffrey S Newberg

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NATL COMMISSIONER (THRU 11/17)

NATL COMMISSIONER (THRU 11/17)

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NATL COMMISSIONER (THRU 9/17)

NATL COMMISSIONER (THRU 11/17)

NATL COMMISSIONER (THRU 11/17)

NATL COMMISSIONER (THRU 11/17)

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Marshal Elovich NATL COMMISSIONER (THRU 11/17)	10	×						0	0	0
Sherrie Frachtman NATL COMMISSIONER (THRU 11/17)	10	x						0	0	0

NATL COMMISSIONER (THRU 11/17)	0 0	^								
Sherrie Frachtman	1 0									
		X						0	0	
NATL COMMISSIONER (THRU 11/17)	0.0									
Robbye Frank	5 0									
·	•••••	×						0	0	
NATL COMMISSIONER (THRU 11/17)	0.0									
Julie Gal	1 0									
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NATL COMMISSIONER (THRU 11/17)	0 0	,					Ĭ		
Robbye Frank	5 0	v					0	0	0
NATL COMMISSIONER (THRU 11/17)	0 0	^						0	
Julie Gal	1 0	×					0	0	0
NATL COMMISSIONER (THRU 11/17)	0.0	^					Ĭ	Ŭ	l

Sherrie Frachtman	1 0				0	0	
NATL COMMISSIONER (THRU 11/17)	0 0	^					
Robbye Frank NATL COMMISSIONER (THRU 11/17)	5 0	x			0	0	0
Julie Gal NATL COMMISSIONER (THRU 11/17)	1 0	×			0	0	0

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

and Independent Contractors

NATL COMMISSIONER (THRU 11/17)

NATL COMMISSIONER (THRU 11/17)

NATL COMMISSIONER (THRU 11/17)

NATL COMMISSIONER (THRU 12/17)

NATL COMMISSIONER (THRU 3/17)

NATL COMMISSIONER (THRU 10/17)

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Andrew C Snyder

Gerald Stempler

Robyn Teplitzky

Andrew H Tisch

Jerome H Turk

	,				,		' I	(11, 2,4,000	(11) 2/1000	evennumetion and	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Carol Ostrow	1 0										
NATL COMMISSIONER (THRU 11/17)	0 0	×						U	U	0	
Avner Porat	1 0	×							0		
NATL COMMISSIONER (THRU 11/17)	0 0							U	0	U	
John A Raphael NATL COMMISSIONER (THRU 3/17)	1 0	х						0	0	0	
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NATL COMMISSIONER (THRU 11/17)	0 0							
John A Raphael	1 0							
NATL COMMISSIONER (THRU 3/17)	0 0	×					0	
Larry Rasky	1 0							
NATL COMMISSIONER (THRU 11/17)	0 0	X					0	
Greg Rosenthal	1 0							
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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

National Commissioner

National Commissioner

Lawrence Rosenbloom

National Commissioner

National Commissioner

Clifford Schechter

Internal Consultant

Michael A Kellman

Chief Financial Officer

Moishe Smith

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Daniel Mariaschin

	for related						_	(W- 2/1099-	(W- 2/1099-	organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
Gary Zausmer	1 0	x						0	0	0
NATL COMMISSIONER (THRU 12/17)	0 0								-	
Howard W Goldstein	1 0	х						0	0	0
National Commissioner	0 0									
Jeffrey B Greene	1 0	×						0	0	0
National Commissioner	0.0		l	1	1	1	l			1

National Commissioner	0 0	,,				
Jeffrey B Greene	1 0	х			0	
National Commissioner	0 0					
Allan J Jacobs	1 0	>			0	
National Commissioner	0 0	^			0	
Samuel Levy	1 0					

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37,315

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

	ally flours	ا ماناه	a un	CCLC	<i>7</i> 1 / C1	usice	<i>'</i>	organization	organizacions	l moniture .
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Deborah G Lauter Senior V P, Policy & Programs	40 0				×			493,976	0	27,101
David S Waren V P, Regional Operations	40 0				×			238,756	0	33,974
Frederic Bloch Senior Vice President, Growth	24 0				×			232,506	155,005	16,883
Thomas W Ruderman Senior V P, Talent & Knowledge	40 0				×			225,758	0	14,330
Steven CARL Sheinherd	20 0									

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123,799

287,475

247,549

228,947

224,685

242,310

123,800

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34,771

1,719

30,395

33,135

33,764

14,889

Senior vice President, Growth
Thomas W Ruderman
Senior V P, Talent & Knowledge
Steven CARL Sheinberg
General Counsel & SVP Privacy

Stacv M Burdett

Evan Bernstein

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Regional Director

Lonnie J Nasatir

Regional Director

Regional Director

Kenneth Jacobson

DEPUTY NATIONAL DIRECTOR

Seth Brysk

Vice President, Gov't Relation

and Independent Contractors

efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			3493319120048	
SCI	HED m 990	ULE A		Public (Charity Staturganization is a sect		2017		
Depart	ment of	the Treasury	▶ Info	ormation abou	► Attach to Form ut Schedule A (Form www.irs.g			ictions is at	Open to Public Inspection
Nam	e of th	ne organiza non League	tion					Employer identific	ation number
					(41)			13-1818723	
	rt I rganiz				us (All organization : it is (For lines 1 thro			see instructions.	
1			•		sociation of churches	•	•	(A)(i).	
2		•		·	1)(A)(ii). (Attach Sch				
3					vice organization desc	•	• •		
4		A medical r	esearch orga		ed in conjunction with			•	nter the hospital's
5		An organiza	and state <u></u> ation operated (iv). (Comple		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6				•	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
7	✓			mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	ınıt or from the gener	al public described in
8		A communi	ty trust descr	ibed in section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10		from activit	ies related to income and	ıts exempt fur unrelated busın	(1) more than 331/39 octions—subject to cer ess taxable income (leading)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11					exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	
a		Type I. A sorganization	supporting or n(s) the powe	ganızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting o nt of the sup	rganization sup porting organiza	ervised or controlled i ation vested in the sar				
С		Type III f	unctionally i		and C. supporting organizatio ions) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrate The organizatio	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	, ,
e		Check this	box if the org	anızatıon recei	ved a written determir	nation from the II		pe I, Type II, Type II	I functionally
f	Entor			on-functionally organizations	integrated supporting	organization			
g g				-	ipported organization(5)			
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organic in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
T - 1									
Tota		uork Dadee-	tion Art N-t	ion one the T	nstructions for	Cat No 11285	<u> </u>	Sahadula A (Farre C	90 or 990-EZ) 2017

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Schedule A (Form 990 or 990-EZ) 2017

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

9	Section A. Public Support							
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2	.017	(f) Total
1	(or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not	57,407,759	50,446,778	51,872,492	61,471,201	71	,717,381	292,915,611
2	Include any "unusual grant ") 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	57,407,759	50,446,778	51,872,492	61,471,201	71	,717,381	292,915,611
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	37,107,100	33,,	23,3,23,132	33,2,23		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0
6	(f) Public support. Subtract line 5 from line 4							292,915,611
_	Section B. Total Support							
	Calendar year	(a)2013	(b) 2014	(c)2015	(d)2016	(-)2	017	(f)⊤otal
	(or fiscal year beginning in) ▶	(a)2013	(B)2014	(6)2015	(0)2016	(e) 2	017	(T)TOtal
7	Amounts from line 4	57,407,759	50,446,778	51,872,492	61,471,201	71	1,717,381	292,915,611
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,870	2,504	356	4,024		9,464	22,218
9	Net income from unrelated business activities, whether or not the business is regularly carried on							0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	8,909,364	8,586,344	9,377,668	9,579,337	8	3,305,556	44,758,269
11	Total support. Add lines 7 through 10							337,696,098
12	Gross receipts from related activities,	etc (see instruction	ons)			12		4,542,956
13	First five years. If the Form 990 is fo	or the organization	's first, second, th	ırd, fourth, or fıfth	tax year as a sec	tion 501(c)(3) orga	inization,
	check this box and stop here						<u> ▶ □</u>	
9	Section C. Computation of Public							
14	Public support percentage for 2017 (III	ne 6, column (f) di	vided by line 11, o	olumn (f))		14		86 739 %
15	Public support percentage for 2016 Sc	hedule A, Part II,	line 14			15		85 751 %
16	33 1/3% support test—2017. If the	organization did i	not check the box	on line 13, and lin	e 14 is 33 1/3% oi	r more, cl	neck this b	

and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14

supported organization

instructions

is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

h 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

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

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	·	
	determination	3b	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b in Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		

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

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

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

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

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

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

organization's organizing document?

10a

answer line 10b below

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

the organization had excess business holdings)

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

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

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

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2017

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

Page 6

Schedule A (Form 990 or 990-F7) 2017

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

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

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

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

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

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

10 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
b From 2013		
c From 2014		
d From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2017 distributable amount		
 Carryover from 2012 not applied (see instructions) 		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u> \$ </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

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

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

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

c Excess from 2015.

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

Additional Data

Software ID: Software Version:

EIN: 13-1818723

Name: Anti-Defamation League

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE C

Political Campaign and Lobbying Activities

DLN: 93493319120048

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

5

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

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Anti-Defamation League 13-1818723 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 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 (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures

Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2017

Par		organization is exempt under section 501(c)(3) and has NOT fil tion under section 501(h)).	led			
 For e	•	prough 1: below, provide in Part IV a detailed description of the lobbying	(a))	(b)	
activit	•	,,,,	Yes	No	Amou	unt
1		rganization attempt to influence foreign, national, state or local legislation, nce public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Yes		i	
b	Paid staff or management (inclu	ude compensation in expenses reported on lines 1c through 1i)?	Yes		i	
С	Media advertisements?		i i	No	i	
d	Mailings to members, legislators	s, or the public?	Yes		i	30,443
e	Publications, or published or bro	padcast statements?	Yes			17,396
f	Grants to other organizations for	r lobbying purposes?	í I	No		
g	Direct contact with legislators, t	their staffs, government officials, or a legislative body?	Yes			343,567
h	Rallies, demonstrations, semina	ars, conventions, speeches, lectures, or any similar means?	Yes			43,490
i	Other activities?	Ţ	ĺ	No		
j	Total Add lines 1c through 1i	Ţ				434,896
2a	Did the activities in line 1 cause	the organization to be not described in section 501(c)(3)?	i	No		
b	If "Yes," enter the amount of an	ny tax incurred under section 4912			i	
С	If "Yes," enter the amount of an	ny tax incurred by organization managers under section 4912	1	.		
d	If the filing organization incurred	d a section 4912 tax, did it file Form 4720 for this year?	1	Ī		
1	501(c)(6). Were substantially all (90% or n	more) dues received nondeductible by members?		1	Yes	No
2	, ,	in-house lobbying expenditures of \$2,000 or less?		2		
3	·	arry over lobbying and political expenditures from the prior year?		3		\vdash
	complete if the o and if either (a) I answered "Yes."	organization is exempt under section 501(c)(4), section 501(c) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	iII-A,)(6)
1	Dues, assessments and similar a		1			
2	Section 162(e) nondeductible lol expenses for which the section	obbying and political expenditures (do not include amounts of political ion 527(f) tax was paid).		l		
а	Current year		2a	<u></u>		
b	Carryover from last year		2b			
С	Total		2c			
3		section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4		nount on line 2c exceeds the amount on line 3, what portion of the excess does over to the reasonable estimate of nondeductible lobbying and political	4			_
5	Taxable amount of lobbying and	d political expenditures (see instructions)	5			
Pā	art IV Supplemental Inf	formation				
		Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), lso, complete this part for any additional information	Part II-	A, lines 1	and 2 (se	₃e
ı 🗀	Return Reference	Explanation				
PART	TII B	ADL HAS STAFF IN 27 OFFICES NATIONWIDE OF THOSE BASED IN WASHING				

FEDERAL, STATE, AND LOCAL LEVELS

APPROXIMATELY 60% OF THEIR TIME TO LOBBYING, TWO DEVOTED APPROXIMATELY 75% TO LOBBYING AND ONE OTHER DEVOTED APPROXIMATELY 25% TO LOBBYING THESE REPRESENTATIVES ENGAGED IN ADVOCACY ON LEGISLATIVE PROPOSALS RELATED TO FEDERAL HATE CRIME LAWS, GLOBAL ANTI-SEMITISM, THE MIDDLE EAST PEACE PROCESS, IMMIGRATION REFORM, THE USE OF GOVERNMENT MONEY SCHEDULE D Supplemental Fina

Supplemental Financial Statements

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

2017

DLN: 93493319120048OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Information about Schedule D (Form 990) and its instructions is at <u>www.irs.qov/form990</u>.

Name of the organization **Employer identification number** Anti-Defamation League 13-1818723 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2017

	4111	Organizations M	anntaining Con	ections of Al	t, mistor	icai iii	easu	ires, or other	Similar Assets (continuea)
3		the organization's acq (check all that apply)		n, and other reco	rds, check	any of t	he fol	llowing that are a	significant use of it	s collection
а		Public exhibition			d		Loan	or exchange prog	rams	
b		Scholarly research			e		Other	r		
c		Preservation for future	e generations							
4	Provide Part	de a description of the	organization's coll	lections and expl	aın how th	ey furthe	er the	e organization's ex	kempt purpose in	
5		ig the year, did the org s to be sold to raise fur							_	es 🗆 No
Pai	t IV	Escrow and Cust Complete if the ord X, line 21.			Form 990), Part I	[V, lıı	ne 9, or reporte	ed an amount on	Form 990, Part
1a		e organization an agent ded on Form 990, Part I		an or other interi	mediary foi	contrib	ution	s or other assets	not Y	es 🗆 No
b	If "Y∈	es," explain the arrange	ement in Part XIII	and complete th	ie following	table			Amount	
С	Begin	nning balance		·	_			1c		
d	_	ions during the year						1d		
е		butions during the year	r					1e		
f		ng balance						1f		
2a		he organization include	an amount on Fo	rm 990 Part X I	line 21 for	escrow	or cu	stodial account lia	ability?	
b		es," explain the arrange			•				' Ц	
Pa	rt V	Endowment Fund	ds. Complete If	the organization	on answe	red "Ye	s" or	n Form 990, Par	t IV, line 10.	
				(a)Current year		rıor year	-	(c)Two years back	(d)Three years back	<u> </u>
1a	Beginn	ing of year balance .		86,328,7	755	88,752,	231	94,955,831	97,116,918	88,933,756
b	Contrib	outions		1,899,2		2,070,		1,471,901	816,649	, ,
c	Net inv	estment earnings, gair	ns, and losses	8,123,1	157	4,238,	063	-2,864,068	2,551,347	9,426,721
d	Grants	or scholarships						0	0	12,900
е		expenditures for facilition	es	4,312,2	248	8,732,	342	4,811,433	5,529,083	4,624,745
f	Admını	strative expenses .						0	0	0
g	End of	year balance		92,038,9	956	86,328,	755	88,752,231	94,955,831	97,116,918
2	Provid	de the estimated perce	ntage of the curre	ent year end bala	ince (line 1	g, colum	nn (a))) held as		
а	Board	d designated or quasi-e	endowment ►	9 000 %						
ь	Perm	anent endowment >	75 000 %							
_	Temp	orarily restricted endov	wment ▶ 16 0	000 %						
·		percentages on lines 2a								
3а	Are th	here endowment funds nization by		•	nization tha	t are he	ld and	d administered fo	r the	Yes No
	(i) ur	nrelated organizations							3	a(i) Yes
b		elated organizations .es" on 3a(ii), are the re		s listed as requir	ed on Sch	 edule R?	٠.			a(ii) Yes 3b Yes
4	Descr	ribe in Part XIII the inte	ended uses of the	organization's ei	ndowment	funds				<u> </u>
Pai	t VI	Land, Buildings,								
	Descri	Complete if the or iption of property	ganization answ (a) Cost or oth (investme	er basis (b)	Form 990 Cost or othe			ne 11a. See For (c) Accumulated o		ne 10. (d) Book value
1a	Land			<u> </u>						
	Buildin	as .								
						14,340	384		7,954,016	6,386,36
		nold improvements							7,385,712	818,30
		nent	<u> </u>			8,204	+,∪⊥∠		7,303,712	010,30
			olumn (d) must ed							7 204 66

Part VII Investments—Other Securities. Complete if the organiz See Form 990, Part X, line 12.	ation answere	ed les on rolli 990, rait iv, line iib.
(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		
3)Other		
A)		
В)		
C)		
D)		
E)		
F)		
G)		
H)		
	•	
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990,	Part IV, line	l1c. 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' on Fo	orm 990, Part I	/, line 11d See Form 990, Part X, line 15 (b) Book value
(1) DUE FROM ADL FOUNDATION		2,60
2) SECURITY DEPOSITS 3)		9
(4)		
5)		
6)		
7)		
8)		
9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		▶ 2,69
Other Liabilities. Complete if the organization answered 'See Form 990, Part X, line 25.	'Yes' on Form	990, Part IV, line 11e or 11f.
(a) Description of liability	(b) Book	value
1) Federal income taxes ONG TERM PENSION OBLIGATIONS		<u> </u>
DEFERRED RENT		6,745,677
3)		
4)		
5)		
6)		
7)		
(8)		•
(8) (9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 25)		33,977,357

Schedule D (Form 990) 2017

Page 4

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

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

Schedule D (Form 990) 2017

Additional Data

Software Version: **EIN:** 13-1818723 Name: Anti-Defamation League

Supplemental Information

Return Reference

PART V, LINE 3B

FOUN

DATION, A SEPARATE BUT RELATED 501(c)(3) CORPORATION

Software ID:

Explanation

THE ENDOWMENT FUNDS DESCRIBED IN THIS SECTION ARE OWNED BY THE ANTI-DEFAMATION LEAGUE

Return Reference	Explanation
PART V, LINE 4	THE ADL FOUNDATION ENDOWMENT CONSISTS OF INDIVIDUAL DONOR-RESTRICTED ENDOWMENT FUNDS ESTAB LISHED FOR A VARIETY OF PROGRAM PURPOSES (SEE ADL FOUNDATION FORM 990 PART III FOR STATEME
	NT OF PROGRAM SERVICE ACCOMPLISHMENTS) AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINC IPLES. NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE

EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS

Supplemental Information

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	AS REQUIRED UNDER FIN 48, "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES", THE FOLLOWING FOOT NOTE WAS INCLUDED IN NOTE (2)(I) OF THE CONSOLIDATED FINANCIAL STATEMENTS OF ADL AND THE A DL FOUNDATION "ADL RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED INCOME GENERATED FROM ACTIVITIES UNRELATED TO ADL'S EXEMPT PURPOSE IS SUBJECT TO TAX UNDER INTERNAL REVENUE CODE SECTION 511 AND IS REPORTED AND PAID WITH THE INTERNAL REVENUE SERVICE FORM 990-T (EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN) "

efil	e GRAPHIC prin	t - DO NOT I	PROCESS	As Filed Data -	•		DLN:	93493319120)048
	HEDULE F	State	ement of	Activities (tates	OMB No 1545-0	047		
(FO	rm 990)	► Compl	lete if the organ	5, or 16.	2017	,			
Department of the Treasury Internal Revenue Service			ition about Sche	/form990.	Open to Public Inspection				
	e of the organization	1					Employer iden	tification numbe	er
Anti-	Defamation League						13-1818723		
Pa		Information , Part IV, line		s Outside the U	Inited States. Comple	te If the	organization a	nswered "Yes" t	:o
1	For grantmaker	s. Does the or	ganızatıon ma	intain records to	substantiate the amount	of its gr	ants and		
	other assistance,	the grantees'	eligibility for t	he grants or assis	stance, and the selection	criteria	used		
	to award the gran	nts or assistan	ce?					☑ Yes □	No
2	For grantmaker outside the Unite		Part V the org	janization's proce	dures for monitoring the	use of it	s grants and oth	ner assistance	
3	Activites per Regio	n (The followir	ng Part I, line 3	table can be dupli	cated if additional space is	needed)		
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	vity listed in (d) is a i service, describe ecific type of ce(s) in region	(f) Total expendi for and investm in region	
(1)	See Add'l Data								
(2)									
(3)									
(4)									
(5)									
b	Sub-total Total from continua Part I Totals (add lines 3			2 7					031,298
	`	,		•				,	
For F	Paperwork Reduction	n Act Notice, see	e the Instructio	ns for Form 990.	Cat	No 5008	2W Sched ul	le F (Form 990) 20	017

(1)				
(2)				
(3)				

(4)

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

Schedule F (Form 990) 2017

(18)

Part III Grants and Oth	er Assistance to	Individuals	Outside the Unite	ad States. Complete if	the organization an	swered "Yes" to Form 9	90, Part IV, line 16.
Part III can be d	luplicated if addition	<u>onal space is n</u>	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							

(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				
(40)				

(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				_
(13)				
(14)				
(15)				
(16)				
(17)				

(10)				
(11)				
(12)				
(13)				
(14)				
(15)				
(16)				
(17)				

Page **3**

Sche	dule F (Form 990) 2017		Page 4
Pai	rt IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	√ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	□Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	□Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	☐ Yes	☑ No
	Schedul	e F (Form 9	990) 2017

Schedule F (Form 99	90) 2017 Page 5
Part V	Provid amou metho	lemental Information de the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; nts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting od); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide dditional information (see instructions).
Retur Referer		Explanation
Part I, Line Column E		MIDDLE EAST AND NORTH AFRICA MAINTAINING RELATIONSHIPS WITH ORGANIZATIONS AND GOVERNMENTAL BODIES IN ISRAEL IN ORDER TO PROVIDE SUPPORT TO THE US OPERATION IN COMBATING ANTI-SEMITISM AND

ADVOCATING FOR THE JEWISH PEOPLE

Return Reference	Explanation
Part ı, Line 3(3), Column E	EUROPE FUND TRAINING OF ANTI-BIAS EDUCATION PROGRAMS FOR LAW ENFORCEMENT PROFESSIONALS, EDUCATORS, AND HUMAN RIGHTS NON-GOVERNMENTAL ORGANIZATIONS IN AUSTRIA

Return Reference	Explanation
art I, Line 3, Column F	THE ACCRUAL METHOD OF ACCOUNTING IS USED TO DETERMINE THE EXPENSES BY REGION

Additional Data

Middle East and North Africa

Software ID: Software Version:

EIN: 13-1818723

Name: Anti-Defamation League

64,688

Form 00	On Schodula I	: Dart T - Acti	vitias Autsida	The United States
IFULIII 99	o Scheaule r	- Part I - Acu	vities outside	The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa	1	5	Program Services	SEE PART V	824,277

Investments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 2 Program Services ISEE PART V 62,736 Greenland) Europe (Including Iceland and 79.597 lInvestments Greenland)

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Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

DLN: 93493319120048

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE G

(Form 990 or 990-EZ)

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. Name of the organization **Employer identification number** Anti-Defamation League 13-1818723 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants ✓ Phone solicitations ✓ Special fundraising events ✓ In-person solicitations 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 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 (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No 1 O'Brien Garrett DIRECT 1133 19TH STREET NW SUITE MARKETING 2,426,997 223,858 2,203,139 No WASHINGTON, DC 20036 2 Mobile Cause FUNDRAISING 27001 AGOURA ROAD SUITE SERVICES 350A Yes 1,978,803 30,000 1,948,803 CALABASAS, CA 91301 10 4,405,800 Total 253,858 4,151,942 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

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, VT, VA, WA, WV, WI, WY

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b) Event #2 (c)Other events (d) Total events Concerts Award Luncheons 73 (add col (a) through (total number) (event type) (event type) col (c)) Revenue 1 Gross receipts. 2,548,691 2,465,239 12,586,270 17,600,200 2 Less Contributions. 824,635 1,212,753 7,257,256 9,294,644 3 Gross income (line 1 minus 1,724,056 1,252,486 5,329,014 line 2) 8,305,556 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 7 Food and beverages 188,848 351,197 1,988,462 2,528,507 8 Entertainment 244,540 548 75,766 320,854 Other direct expenses 1,553,433 296,960 165,815 2,016,208 10 Direct expense summary Add lines 4 through 9 in column (d) 4,865,569 11 Net income summary Subtract line 10 from line 3, column (d) 3,439,987 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/Instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue . Expenses | 2 Cash prizes Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes____ Yes Yes % 6 Volunteer labor No No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities _ ☐ Yes ☐ No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain . Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a ☐ Yes ☐ No If "Yes," explain _

Sche	dule G (Form 990 or 990-EZ) 2017					- 1	Page 3		
11	Does the organization conduct gaming	activities with nonmembe	rs?		□Yes	□No			
12	Is the organization a grantor, beneficial formed to administer charitable gamin		a member of a partnership or other entity		□Yes				
13	Indicate the percentage of gaming acti	vity conducted in							
а	The organization's facility			13a			%		
b	An outside facility			13b			%		
14	Enter the name and address of the per	son who prepares the orga	anization's gaming/special events books and re	cords	•				
	Name								
	Address •								
	Does the organization have a contract revenue?	·	-		□Yes	□No			
Ь	If "Yes," enter the amount of gaming r amount of gaming revenue retained by		ganization 🕨 \$ and the	e					
С	If "Yes," enter name and address of th	e third party							
	Name ▶								
	Address ►								
16	Gaming manager information								
	Name ▶								
	Gaming manager compensation ▶ \$								
	Description of services provided ▶								
	☐ Director/officer	☐ Employee	☐ Independent contractor						
17	Mandatory distributions								
	•	e law to make charitable o	distributions from the gaming proceeds to		□Yes	Пы			
b	Enter the amount of distributions requi		outed to other exempt organizations or spent		∟ Yes	□ NO			
Par	in the organization's own exempt activert IV Supplemental Information	<u> </u>	ritions required by Part I, line 2b, columns	: /111/ :	and (v): a	nd Part			
1- (4)	III, lines 9, 9b, 10b, 15b, 1		plicable. Also provide any additional infori				s)		
	Return Reference		Explanation						
PART	I LINE 2B COLUMN (V)	THE AGREEMENTS FOR THE LISTED FUNDRAISING CONSULTANTS NOTE THE MONTHLY RETAINER AMOUNT FOR FUNDRAISING SERVICES ALL OTHER PAYMENTS MADE TO THE PROFESSIONAL FUNDRAISERS ARE REIMBURSEMENTS FOR OTHER EXPENSES INCURRED SUCH EXPENSES ARE ONLY REIMBURSED BY ADL SUBSEQUENT TO PROPER SUBSTANTIATION AND AUTHORIZATION ADL PAID \$30,000							

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493319120048 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** Antı-Defamatıon League 13-1818723 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 **✓** Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant (q) Description of organization (if applicable) (book, FMV, appraisal, noncash assistance grant cash or assistance or government assistance other) (1) (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017

AN OPPORTUNITY FOR DIVERSE GROUPS OF HIGH SCHOOL STUDENTS TO LEARN ABOUNT THE HOLOCAUST & WAYS TO FIGHT PREJUDICE IN SCHOOLS &

COMMUNITIES. AWARD IS GIVEN TO STUDENTS WHO DEMONSTRATED OUTSTANDING LEADERSHIP AND DESIGNED THE BEST PROJECT

Additional Data

BLUM-KOVLER NATION OF IMMIGRANTS

SPONSORSHIP FOR EDUCATIONAL WORK

PHILIP ROTHBLUM COLLEGE SCHOLARSHIP

NPFH BODINI PRIZE FOR DIVERSITY AWARD

AWARD

DINNER

KRANZBERG Scholarship

Software ID: **Software Version:**

EIN: 13-1818723

Name: Anti-Defamation League

10,000

10,000

8,000

5,000

4,500

Form 990, Schedule 1, Part 111, Grants and Other Assistance to Domestic Individuals.							
(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of				
	1 CCIPICITES	cash grant	i iioii casii assistance				

FMV, appraisal, other)

(e) Method of valuation (book,

(f)Description of non-cash assistance

(a)Type of grant or assistance (b)Number of (c)Amount of (d)Amount of (e)Method of valuation (book, (f)Description of non-cash assistance cash grant FMV, appraisal, other) recipients non-cash assistance

SBIFF SPONSORSHIP CONTRACT	1	2,500		
SENN/GREENBERG AWARD & LUZELL AWARDS	1	1,765		

WALTER KASE TEACHER EXCELLENCE AWARD	3	1,500		

AWARD	,		

Essay Contest	5	1,200		
LSSAY CUITEST	1	1,2001		l

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals. (b)Number of (d)Amount of (e)Method of valuation (book, (f)Description of non-cash assistance (a)Type of grant or assistance (c)Amount of recipients cash grant non-cash assistance FMV, appraisal, other)

250

NYLM SCHOLARSHIP RECIPIENT

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9331	9120	048		
Sch	edule J	Co	ompensati	ion Information	OM	IB No	1545-0	0047		
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest								
		Complete if the ord		ated Employees vered "Yes" on Form 990, Part IV	. line 23.	2017				
			▶ Attach	to Form 990.						
•	tment of the Treasury al Revenue Service	► Information at		(Form 990) and its instructions gov/form990.	is at		to Pul ectio			
	me of the organiza				Employer identificat	ion nu	ımber			
Anti	-Defamation League	i.			13-1818723					
Pa	rt I Questi	ons Regarding Compensa	tion							
							Yes	No		
1a				the following to or for a person liste y relevant information regarding the						
		s or charter travel		Housing allowance or residence for	•					
	_	companions	님	Payments for business use of perso						
		nification and gross-up payment	is 📙	Health or social club dues or initiation						
	□ Discretion	nary spending account		Personal services (e g , maid, chauf	Teur, cner)					
b		xes in line 1a are checked, did thall of the expenses described abo		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1 b	Yes			
2				or allowing expenses incurred by all	. 1-3	2	Yes			
	directors, truste	es, officers, including the CEO/E	executive Director	r, regarding the items checked in line	e la?					
3				ed to establish the compensation of the	ne					
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III					
	✓ Compens			Western and a section of						
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study						
		of other organizations	<u> </u>	Approval by the board or compensa	tion committee					
4		-	990 Part VII Se	ction A, line 1a, with respect to the f						
	related organiza		,							
а	Receive a sever	ance payment or change-of-con	trol payment?			4a	Yes			
b	Participate in, o	r receive payment from, a suppl	emental nonqual	ıfıed retırement plan?		4b	Yes			
c		r receive payment from, an equi	•	_		4c		No		
	If "Yes" to any o	of lines 4a-c, list the persons and	d provide the app	plicable amounts for each item in Par	t III					
	Only 501(c)(3), 501(c)(4), and 501(c)(29)) organizations	must complete lines 5-9.						
5	For persons liste	ed on Form 990, Part VII, Sectio	on A, line 1a, did t	the organization pay or accrue any						
	compensation c	ontingent on the revenues of								
а	The organization	n?				5a		No		
b	Any related orga					5b		No		
_	·	5a or 5b, describe in Part III								
6		ed on Form 990, Part VII, Section on tingent on the net earnings of		the organization pay or accrue any						
a	The organization					6a		No		
b	Any related orga					6b		No_		
7	·	6a or 6b, describe in Part III	nn Aluno 15 didu	the organization provide any national	d					
7		ed on Form 990, Part VII, Section escribed in lines 5 and 67 If "Yes		the organization provide any nonfixe rt III	u	7	Yes			
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe					
9		8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	8		No		
_	53 4958-6(c)?	<u>-</u>				9				
For F	Panerwork Redu	uction Act Notice, see the Ins	tructions for Fo	orm 990. Cat No 5	50053T Schedule J	(Form	1990)	2017		

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

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

		compensation		deferred	Bellettes	(0)(1)(0)	compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							
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	'				1	· ·	1

Schedule J (Form 990) 2017						

Schedule J (Form 990) 2017	Page 3							
Part III Supplemental Inform	Part III Supplemental Information							
Provide the information, explanation, or	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information							
Return Reference	Explanation							
PART I, LINE 1A	TRAVEL REIMBURSEMENT POLICY - ADL HAS A WRITTEN POLICY REGARDING TRAVEL REIMBURSEMENT IN ACCORDANCE WITH RULES FOR AN ACCOUNTABLE PLAN THE ADL NATIONAL CHAIR REVIEWS A PERIODIC SUMMARY OF THE ADL CEO/NATIONAL DIRECTOR'S EXPENSE REPORTS In Addition, all travel costs related to companions, once approved, are fully taxable							
Part I Line 4A	DURING THE YEAR, PAYMENTS WERE MADE TO CERTAIN INDIVIDUALS LISTED IN THE FORM 990, PART VII, SECTION A PURSUANT TO SEPARATION AGREEMENTS IN ORDER TO PROTECT THE CONFIDENTIALITY AS SET FORTH IN AGREEMENTS, THE NAMES ARE NOT DISCLOSED							
PART I LINE 4B	IN 2012, ADL AND THE ADL FOUNDATION FINALIZED A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN (SERP) BENEFIT FOR ABRAHAM H FOXMAN, ADL'S NATIONAL DIRECTOR SINCE 1987 IT WAS IN RECOGNITION OF HIS SIGNIFICANT VALUE TO ADL AND THE ADL FOUNDATION AT THAT TIME AND GOING FORWARD AND HIS FIFTY YEARS OF INVALUABLE AND TIRELESS SERVICE, INCLUDING 25 YEARS AS A NATIONAL DIRECTOR THE SERP IS A RETIREMENT BENFIT THAT IS PAID OUT OVER TIME \$148,517 WAS PAID DURING THE YEAR ENDED DECEMBER 31, 2017 (\$81,275 WAS TAXABLE ON THE 2017 FORM W-2 AND \$67,242 WAS TAXED PREVIOUSLY) AND THE REMAINING BENEFIT IS INCLUDED IN THE LONG-TERM PENSION OBLIGATIONS LIABILITY ON ADLS BALANCE SHEET THE SERP WAS APPROVED BY ADL'S AND ADL FOUNDATION'S JOINT EXECUTIVE COMPENSATION COMMITTEE THE COMMITTEE IS A FULLY INDEPENDENT AND DISINTERESTED BODY IT WAS RIGOROUS IN ITS METHODOLOGY AND RELIED UPON INDEPENDENT EXPERTS WHO ADVISED THAT THE SERP (AND THE OVERALL COMPENSATORY PACKAGE) WAS REASONABLE IN LIGHT OF MARKET COMPARABILITY DATA							

[COMPENSATORY PACKAGE] WAS REASONABLE IN LIGHT OF MARKET COMPARABILITY DATA

Part I, Line 7 REPORTABLE NON-FIXED PAYMENT, REPRESENTING A ONE-TIME PERFORMANCE BONUS WAS PAID TO 7 officers, total amounting to \$260,692

Software ID: Software Version:

(ii)

Bonus & incentive

compensation

387,498

387,499

139,700

205,000

103,754

103,755

101,904

247,549

228,857

224,595

241,074

EIN: 13-1818723

Name: Anti-Defamation League

Other reportable

compensation

Form 990, Schedule J,	Part II - Officers, Directors, Trustees, Key Employees, and	Highest Compensate	d Employees
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable

67,596

67,596

15,000

20,500

20,000

20,000

2,500

			•			,	,	
1ABRAHAM H FOXman NATIONAL DIRECTOR		84,600	0	81,275	0	0	165,875	0
EMERITUS	(11)	84,600	0	0	0	0	84,600	0
2 Clifford Schechter Internal Consultant	(1)	319,085	0	190,064	2,804	1,686	513,639	0
	(11)	0	0	0	0	0	0	0
3Michael A Kellman Chief Financial Officer	(1)	150,529	0	4,003	2,426	19,963	176,921	0
	(11)	100,352	0	2,669	1,618	13,308	117,947	0
4 Deborah G Lauter Senior V P, Policy &	(1)	184,615	10,000	299,361	3,220	23,881	521,077	0
Programs	(11)	0	0	0	0	0	0	0
5 David S Waren V P, Regional Operations	(1)	223,618	15,000	138	3,579	30,395	272,730	0
	(11)	0	0	0	0	0	0	0
6 Frederic Bloch Senior Vice President,	(1)	209,549	22,500	457	860	9,269	242,635	0

305

258

45

90

90

1,236

183,071

25,245

25,246

other deferred

compensation

2,250

2,250

574

2,184

1,300

1,300

1,719

2,740

3,369

3,616

benefits

17,060

17,060

6,180

12,146

16,085

16,086

30,395

30,395

30,395

11,273

(E) Total of columns

(B)(ı)-(D)

499,649

499,651

161,759

240,088

141,184

141,186

289,194

277,944

262,082

258,449

257,199

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

0

0

0

0

(A) Name and Title		(B) Breakdowr
		(i) Base Compensation
1Jonathan Greenblatt	Tω	387.498

(11)

(11)

(1)

(1)

(1)

(11)

(1)

(ı)

(1)

(ı)

CEO/National Director

Growth

Privacy

Relation

7Thomas W Ruderman

8Steven CARL Sheinberg

General Counsel & SVP

9Stacy M Burdett Vice President, Gov't

10Evan Bernstein

Regional Director

11Lonnie J Nasatir

Regional Director

Regional Director

13Kenneth Jacobson

DEPUTY NATIONAL DIRECTOR

12Seth Brysk

Senior V P, Talent & Knowledge

efile GRAPHI	C print - DO NO	T PROCES	S As Fi	led Data -					DI	-N: 93	4933	1912	20048
Schedule L (Form 990 or 990	Comple	te if the orga 27, 28a,	nization a 28b, or 28 ▶ Attac	nswered "Yes c, or Form 99 h to Form 99	Interested Persons es" on Form 990, Part IV, lines 25a, 25b, 26, 290-EZ, Part V, line 38a or 40b. 90 or Form 990-EZ.						2017		
Department of the Tre Internal Revenue Serv	asurv	ormation abo		ile L (Form 99 <u>www.irs.gov</u>) and its inst	ructio	ns is	at	(pen		ıblic
Name of the org Anti-Defamation Le								•	yer id 8723	entifica	ition r	umbe	er
	ss Benefit Trai						rganıza	tions	only)	ne 40b			
) Name of disqual			Relationship be				(c) [escrip ansact	tion of) Corr	rected? No
4958 3 Enter the and Correp (a) Name of	mount of tax incur mount of tax, if an ans to and/or nplete if the organ orted an amount of (b) Relationship with organization	y, on line 2, a From Interestation answer in Form 990, F	bove, reimbested Per red "Yes" or Part X, line 5	sons. Form 990-EZ,	rganization		. :	t IV,	line 26	h) ved by rd or	(janizat i)Writt jreeme	ten
			То	From	-		Yes	No	comn Yes	No No	Yes		No
Total Part III Gra	nts or Assista	nce Benefiti	ing Intere		≻ \$ ns.								
	rested person (b		between n and the	es" on Form 9 (c) Amount		(d) Type	of assi	stano	ce	(e) Pu	rpose	of assis	stance

Page 2

Schedule L (Form 990 or 990-EZ) 2017

(a) Name of interested person	(b) Relationship between interested person and the	(c) Amount of transaction	(d) Description of transaction	(e) Si organiz	
	organization			rever	
1				Yes	No
(1) BLUECADET	SEE PART V	106,875	web strategy		No
	•	•	•		•

IS THE SON OF NATIONAL COMMISSIONERS JANE AND JOSEPH GOLDBLUM

DECISION MAKING PROCESS INVOLVING THE RESPECTIVE TRANSACTIONS

Explanation

JOSH GOLDBLUM IS FOUNDER AND PRINCIPAL SHARFHOLDER AND CEO OF BLUECADET. JOSH GOLDBLUM

THE TRANSACTION REPORTED IN PART IV WAS MADE IN AN ARMS-LENGTH FASHION AND IS AT OR BELOW FAIR MARKET VALUE. NEITHER JANE GOLDBLUM NOR JOSEPH GOLDBLUM HAD ANY INVOLVEMENT IN THE

Provide additional information for responses to questions on Schedule L (see instructions)

Part V	Supplemental Information

Return Reference

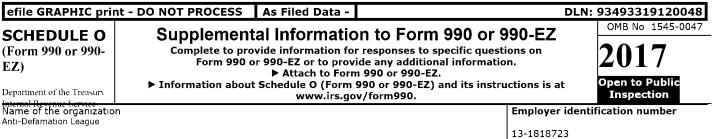
PART IV LINE 2(B)

PART IV

Schedule L (Form 990 or 990-EZ) 2017

efil	e GRAPHIC pr	int - DO NOT PI	ROCESS	As Filed Data -		DLN	9349331	9120	048
	IEDULE M			loncash Contri	hutione		OMB No 1	545-0	047
(For	m 990)	▶Complete if the		ons answered "Yes" on F		9 or 30.	20	17	,
		▶ Attach to Form	_	ons answered res on re	51111 556/1 a.c 20/1111c3 21				
Б				le M (Form 990) and its i	nstructions is at www.irs	.gov/form990	Open to	Dub	lic
•	tment of the Treasurv al Revenue Service			,			Inspe		
	e of the organizat	ion				Employer iden	tification n	umbei	
Antı-[Defamation League					13-1818723			
Pa	rt I Types	of Property				13 1010/23			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(a)	(b)	(c)		(d)		
				Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line		d of determine ontribution a		s
					1g				
1	Art—Works of art								
3	Art—Historical tre Art—Fractional in								
4	Books and public								
_	Clothing and hou								
	-								
	Cars and other v								
7	Boats and planes								
8 9	Intellectual proper Securities—Public	•	X	259	3 062 030	MEAN, DATE O	E CONTD		
10	Securities—Fubility	′		239	3,002,030	MEAN, DATE O	CONTR		
	Securities—Partr	nership, LLC,							
12	Securities—Misce								
13	Qualified conserv contribution—Hi structures	storic							
14	Qualified conserv								
	contribution—Of								
	Real estate—Res		X	1	1,111,107	selling price			
16	Real estate—Con								
17 18	Real estate—Oth Collectibles .								
19	Food inventory								
20	Drugs and medic								
21	Taxidermy								
22	Historical artifact	ts							
23	Scientific specim	ens							
24	Archeological art	ifacts							
	Other►(NT RELATED)		X	33	31,441	DONOR PROVI	DED VALUE		
26	Other • (
27	Other ▶ (
28	Other ▶ (
29				ition during the tax year for 3, Part IV, Donee Acknowled		29			0
	_							Yes	No
30a	must hold for at	least three years fi	rom the date	contribution any property reference of the initial contribution, a	and which is not required to				
b		e the arrangement					30a		No
31	Does the organi	zation have a dift a	cceptance n	olicy that requires the reviev	v of any nonstandard contrib	outions?	31	Yes	
	=	=		or related organizations to so	·				
	contributions? If "Yes," describ				blicit, process, or sell nonca		32a	-	No
	•		n amount in	column (c) for a type of pro	nerty for which column (a)	s checked			
	describe in Part	·	i amount III	column (c) for a type of pro	percy for willer column (a) i	a checkeu,			
Ear D		n Act Notice see th	o Instruction	es for Form 000	Cat No. 512271	Caba	dule M (Form	000)	2017)

Chedule M (Form 990) (2017)							
	cion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part umber of contributions, the number of items received, or a combination of both. Also complete						
Return Reference	Explanation						
PART 1, LINE 9 COLUMN (b)	EACH STOCK GIFT IS COUNTED AS A SEPARATE CONTRIBUTED ITEM						
PART 1 LINE 25 COLUMN (B)	THE AMOUNT REPORTED REFLECTS THE NUMBER OF CONTRIBUTIONS RECEIVED						
	Schedule M (Form 990) (2017)						



Return Reference	Explanation
FORM 990, PART III, LINE 4A	REGIONAL OPERATIONS (CONTINUED FROM PART III) IT IS THE STAFF WITHIN THE REGIONAL OPERATIO NS DIVISION THAT IN LARGE PART PROVIDES THE GROUNDWORK FOR THE PROGRAMMING IN THE REGIONS 2017 ACCOMPLISHMENTS INCLUDED ANTI-BIAS TRAINING FOR EDUCATORS, STUDING IN THE REGIONS 2017 ACCOMPLISHMENTS INCLUDED ANTI-BIAS TRAINING FOR EDUCATORS, STUDING, AND, AW ENFORCEM ENT PROFESSIONALS, CIVIL RIGHTS ADVOCACY, MONITORING AND EXPOSING OF EXTREMIST ACTIVITY, VICTIM ASSISTANCE, PROMOTION OF INTERGROUP COLLABORATION AND UNDERSTANDING, AND, RESPONSE TO HATE CRIMES AND BIAS INCIDENTS REGIONAL OPERATIONS ASSIST REGIONS IN THEIR RECRUITMENT AND ENCAGEMENT OF QUALIFIED LEADERSHIP AND THEIR EXPANSION OF PHILANTHROPIC SUPPORT REGIO NAL OFFICES ARE RESPONSIBLE FOR IDENTIFYING AND CULTIVATING LOCAL COMMUNITY LEADERSHIP TO ACCOMPLISH THIS, EACH REGION HAS A LOCAL LAY ADVISORY BOARD, ALL OF WHICH, IN THE AGGREGA TE, TOTAL APPROXIMATELY 2,500 BOARD MEMBERS (NOT VOTING MEMBERS OF ADL'S MAIN GOVERNING BO DY) THAT HELP CARRY OUT ADL'S MISSION FORM 990, PART III, LINE 4B POLICY AND PROGRAM (CON TINUED FROM PART III) THROUGH 2017, THE TOTAL NUMBER OF GRADUATES OF ADL'S "ADVANCE TRAINI NG SCHOOL EXTREMIST AND TERRORIST THREATS COURSE" FOR LEADERS IN THE LAW ENFORCEMENT COMMU NITY TOTALS 1,200 AND MORE THAN 130,000 LAW ENFORCEMENT PERSONNEL HAVE PARTICIPATED IN ADL'S LAW ENFORCEMENT AND SOCIETY TRAINING, CONDUCTED IN PARTNERSHIP WITH THE U.S. HOLOCAUST MEMORIAL MUSEUM IN 2017, THE LEGAL AFFAIRS DEPARTMENT FILED 33 AMICUS BRIEFS PROMOTING AD L'S AGENDA ON A RANGE OF ISSUES AS PARTICIPANTS IN ADL'S LUNGUE SUMMER ASSOCIATE RESEARCH PROGRAM, MORE THAN 160 LAW STUDENTS WORKING AT OVER 60 LAW FIRMS IN 8 DIFFERENT REGIONS W ORKED CLOSELY WITH ADL REGIONAL OFFICES TO PRODUCE MEMORANDA ON IMPORTANT ADL ISSUES FORM 990, PART III, LINE 4D OTHER PROGRAM SERVICE EXPENSES \$11,184,731 GRANT S AND ALLOCATIONS \$28,715 REVENUE \$1,025,977 INTERNATIONAL AFFAIRS AND INTERFAITH PROGRA MS (EXPENSES \$2,325,378). MAINTAINS CONTACTS THROUGHOUT EUROPE, LATIN AMERICA, THE MI

Return

Reference		
FORM 990, PART III, LINE 4A	RESPONSIBLE FOR ATTRACTING, EDUCATING AND CULTIVATING ADL LEADERS BY HOSTING SEVERAL ANNU AL NATIONAL MEETINGS, PROVIDING PERIODIC E-MAIL AND PRINT COMMUNICATIONS ON ADL ISSUES, RE CRUITING PARTICIPANTS FOR MISSIONS TO FOREIGN COUNTRIES, AND HOSTING PRIVATE MEETINGS WITH NATIONAL AND WORLD LEADERS AT ADL HEADQUARTERS. THE LEADERSHIP DIVISION PROVIDES ONGOING SUPPORT TO ADL REGIONS TO HELP ENHANCE THEIR LEADERSHIP DEVELOPMENT PROGRAMS AND ALSO OFFE RS GUIDANCE AND ASSISTANCE TO REGIONAL LEADERS LOOKING TO EXPAND THEIR INVOLVEMENT ON THE NATIONAL LEVEL EDUCATION (EXPENSES \$5,361,084) - FURTHERS THE LEAGUE'S MISSION THROUGH THE DESIGN AND DELIVERY OF EDUCATIONAL PROGRAMS AND MATERIALS IN THE CORE PRIORITY AREAS OF ANTI-BIAS, BULLYING/CYBERBULLYING, SCHOOL CLIMATE AND ANTI-SEMITISM ADL EDUCATION DELIVER S THESE PROGRAMS TO PREK-12 SCHOOL COMMUNITIES, COLLEGE AND UNIVERSITY CAMPUSES, COMMUNITY GROUPS, CIVIC ASSOCIATIONS, RELIGIOUS ORGANIZATIONS, YOUTH SERVICE PROVIDERS AND WORKPLACES IN 2017, ADL EDUCATION PROGRAMS WERE DIRECTLY DELIVERED TO OVER 91,000 CHILDREN AND AD ULTS. THESE EDUCATION	
	PROGRAMS HAVE POSITIONED ADL AS A LEADER IN ANTI-BIAS PROGRAMMING AN D BULLYING/CYBERBULLYING PREVENTION, DIRECTLY REACHING ELEMENTARY, MIDDLE, HIGH SCHOOL AND POST-SECONDARY STUDENTS, EDUCATORS, FAMILY MEMBERS AND WORKPLACE EMPLOYEES WITH IN-DEPTH TRAINING AND RESOURCES	

Explanation

Return Explanation
Reference

LINE 1A

FORM 990, ADL IS GOVERNED BY ITS NATIONAL COMMISSION ADL'S NATIONAL EXECUTIVE COMMITTEE (NEC) IS A SUBSET PART VI, LEADERSHIP BODY THAT IS AUTHORIZED TO ACT ON BEHALF OF THE NATIONAL COMMISSION SECTION A,

PRINCE & HARVEY R PRINCE. AND JEFFREY M SIMON & PAMELA SIMON

Return

Reference

LINE 2

FORM 990. THE FOLLOWING INDIVIDUALS HAVE FAMILY RELATIONSHIPS - BARBARA B BALSER & RONALD D BALSER. MARTIN PART VI. BUDD & JONAH NEUMAN, JONATHAN COOKLER & FAITH COOKLER, ESTA G EPSTEIN & ROBERT S EPSTEIN, SUE-ANN SECTION A. FRIEDMAN & MICHAEL FINKELSTEIN. JANE GOLDBLUM & JOSEPH A GOLDBLUM. LOUISE P HOMBURGER & THOMAS C HOMBURGER, RICHARD MOSS, GEORGE MOSS & RUTH MOSS, SHELLEY L PARKER & JEFFREY PARKER, SUZANNE

Explanation

990 Schedule O, Supplemental Information

FILED WITH THE IRS ON OR ABOUT NOVEMBER 15, 2018

Return

LINE 11B

Reference	
FORM 990,	COPIES OF THE DRAFT FORM 990 WERE PROVIDED TO THE MEMBERS OF ADL'S AUDIT COMMITTEE, WHICH
PART VI,	REVIEWED AND APPROVED IT AT ITS FALL 2018 MEETING SUBSEQUENT TO THE MEETING, AN EMAIL WAS SENT TO
SECTION B	ADL'S NATIONAL COMMISSION PROVIDING THEM WITH A COPY OF THE FORM 990 FOR THEIR REVIEW BEFORE IT IS

Explanation

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ADL HAS A WRITTEN CONFLICT OF INTEREST POLICY APPROVED BY THE NEC (A LEADERSHIP BODY THAT IS AUTHORIZED TO ACT ON BEHALF OF THE NATIONAL COMMISSION) THAT REQUIRES ITS OFFICERS, DIRECTORS, AND EMPLOYEES TO ANNUALLY DISCLOSE POTENTIAL CONFLICTS OF INTEREST, THOSE OF THEIR FAMILY MEMBERS AND OF OTHER INTERESTED PARTIES THIS DISCLOSURE FORM IS DISTRIBUTED BY THE ORGANIZATION'S TALENT AND KNOWLEDGE DEPARTMENT (T&K) TO ALL STAFF ON AN ANNUAL BASIS T&K ENSURES THAT ALL FORMS ARE COMPLETED AND REVIEWS THE FORMS FOR CONFLICTS THE DISCLOSURE FORM IS DISTRIBUTED BY THE LEADERSHIP DIVISION TO THE MEMBERS OF THE NATIONAL COMMISSION ON AN ANNUAL BASIS THE LEADERSHIP DIVISION COLLECTS AND REVIEWS THEM FOR NOTED OFFICER AND DIRECTOR CONFLICTS A SUMMARY AND THE NOTED FINDINGS ARE THEN REVIEWED BY THE CHIEF FINANCIAL OFFICER, WHO THEN PROVIDES ALL DISCLOSURES TO THE AUDIT COMMITTEE FOR FURTHER REVIEW THE AUDIT COMMITTEE REVIEWS AND DETERMINES BY MAJORITY VOTE WHETHER A CONFLICT EXISTS IF A CONFLICT IS NOTED INVOLVING A MEMBER OF THE AUDIT COMMITTEE, THAT PERSON RECUSES HIM/HERSELF FROM VOTING

990 Schedule O, Supplemental Information

Return

Reference

FORM 990,	ADL'S PROCESS FOR DETERMINING THE COMPENSATION OF THE CEO/NATIONAL DIRECTOR INCLUDES
PART VI,	CONSULTATION WITH AN INDEPENDENT COMPENSATION CONSULTANT THAT PERFORMS A COMPENSATION MARKET
SECTION B	STUDY AND PROVIDES SALARY STRUCTURE GRADING. THIS IS REVIEWED AND A DECISION IS MADE BY THE

Explanation

SECTION B,

SECTION B,

LINE 15A

EXECUTIVE COMPENSATION COMMITTEE PERFORMS A COMPENSATION REVIEW AT LEAST ONCE A YEAR

COMPENSATION COMMITTEE PERFORMS A COMPENSATION REVIEW AT LEAST ONCE A YEAR

Return Explanation
Reference

COMMITTEE MEETING MINUTES

FORM 990, PART VI, SECTION B, LINE 15B

LINE 15B

ADL'S PROCESS FOR DETERMINING THE COMPENSATION OF OTHER OFFICERS AND ALL KEY EMPLOYEES INCLUDES CONSULTATION WITH AN INDEPENDENT COMPENSATION CONSULTANT THAT PERFORMS A COMPENSATION MARKET STUDY AND PROVIDES SALARY STRUCTURE GRADING THIS IS REVIEWED AND A DECISION IS MADE BY THE NATIONAL DIRECTOR WHO PRESENTS A RECOMMENDATION TO THE EXECUTIVE COMPENSATION COMMITTEE THE EXECUTIVE COMPENSATION COMMITTEE MAKES A DECISION ON THE RECOMMENDATION. AS DOCUMENTED IN THE

WASHINGTON, DC

Return

Reference	
FORM 990,	THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS OF ADL AND THE ADL FOUNDATION AND THE ANNUAL
PART VI,	REPORT ARE MADE AVAILABLE TO THE PUBLIC THROUGH A DIRECT LINK ON THE ADL WEBSITE, (WWW ADL ORG)
SECTION C,	FURTHERMORE, A FULL SET OF THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS OF ADL AND THE ADL
LINE 19	FOUNDATION IS AVAILABLE UPON REQUEST AS INDICATED ON THE ADL WEBSITE AND IN THE ANNUAL REPORT THE
	ARTICLES OF INCORPORATION ARE AVAILABLE AT THE DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS IN

Explanation

Return Explanation

Form 990,
Part XI, Line

On the total of \$2,033,345 CONSISTS OF THE FOLLOWING AMOUNTS NOT REPORTED ON THE FORM 990, PENSION CREDIT OTHER THAN NET PERIODIC BENEFIT COST IN THE AMOUNT OF \$370,253 AND A PROVISION FOR UNCOLLECTIBLE CONTRIBUTIONS RECEIVABLE IN THE AMOUNT OF \$1,663,092 (BOTH REPORTED ON THE LEAGUE'S

STATEMENT OF ACTIVITIES, ATTACHED TO THE AUDITED FINANCIAL STATEMENTS)

SCHEDULE R
(Form 990)

Related Of Schedule Schedule Schedule Related Of Schedule Sch

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

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

2017

DLN: 93493319120048OMB No 1545-0047

Open to Public Inspection

Employer identification number

Anu-Pelaniauon League						13-1	.818723				
Part I Identification of Disregarded Entities Complete of	the organization a	nswered "Yes	" on Form	990, Part	IV, line 3	33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	Prim	(b) Primary activity		(c) Legal domicile (state or foreign country)) come	(e) End-of-year assets		ssets (f) Direct control entity		
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	·					, Part I		ecause			
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal dor	c) nicile (state n country)	(d) Exempt Cod	le section	(e) Public charity status (if section 501(c)(3))		(f) Direct controlling entity		(13) cor enti	
(1)ANTI-DEFAMATION LEAGUE FOUNDATION 605 THIRD AVENUE	Support ADL		NY	501(c)(3)		7		ADL		Yes	No
NEW YORK, NY 10158 13-2887439											
(2)ADLF COMMON FUND 605 THIRD AVENUE	Support ADL		NY	501(c)(3)		PF		ADL		Yes	
NEW YORK, NY 10158 13-3095748											
(3)Anti-Defamation League- Israel 21 Jabotinsky Street Jerusalem 92141 IS	Advocacy		IS					ADL		Yes	
For Paperwork Reduction Act Notice, see the Instructions for Form	990-	Ca	t No 5013	5Y				Sch	edule R (Form	990) 2	017

(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		Disprop alloca	tions?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	ral or Figing ((k) Percent owners
								Yes	No		Yes	No	
												\perp	
												\top	
												+	
												\perp	
Identification of Related Organizated because it had one or more related o						ation answ	vered "Yes	" on Fo	orm 99	90, Part IV,	line .	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	L	(c) egal micile or foreign	Direct	(d) controlling Type entity (C co	(e) e of entity rp, S corp, r trust)	(f) Share of total Income		(g) of end-o year assets	of- Percei owne	ntage	[(13	(ı) tion 5) cont entity
												l v	es
		со	untry)									<u>_</u>	
		Со	untry)										
		со	untry)									+	
		со	untry)									<u>+</u>	
		со	untry)										
		со	untry)									 - - -	
		со	untry)									 - - -	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.							
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule							
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No				
b Gift, grant, or capital contribution to related organization(s)	1b		No				
c Gift, grant, or capital contribution from related organization(s)	1c	Yes					
d Loans or loan guarantees to or for related organization(s)	1d	Yes					
e Loans or loan guarantees by related organization(s)	1e	Yes					
f Dividends from related organization(s)	1f		No				
g Sale of assets to related organization(s)	1 g		No				
h Purchase of assets from related organization(s)	1h		No				
i Exchange of assets with related organization(s)	1i		No				
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No				
k Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	 				
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes					
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes					
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes					
o Sharing of paid employees with related organization(s)	10	Yes					

		\vdash		
k Lease of facilities, equipment, or other assets from related organization(s)		1k	Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)		11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n '	Yes	
o Sharing of paid employees with related organization(s)		10	Yes	
p Reimbursement paid to related organization(s) for expenses		1 p		No
q Reimbursement paid by related organization(s) for expenses		1q	Yes	

1r No 1s No 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 See Additional Data Table (a) Name of related organization (d) Method of determining amount involved (b) (c) Transaction Amount involved type (a-s)

Page 3

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-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner	g l	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

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

Additional Data

Anti-Defamation League Foundation

Anti-Defamation League Foundation

Anti-Defamation League Foundation

Anti-Defamation League Foundation

Anti-Defamation League Foundation Anti-Defamation League Foundation

Anti-Defamation League Foundation

Anti-Defamation League Foundation

Anti-Defamation League Foundation

Software ID: **Software Version:**

EIN: 13-1818723

Name: Anti-Defamation League

Form OOO Cahadula D. Dart V.	Transactions With Bolated Organizations	

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

Name of related organization

(b)

Transaction type(a-s)

С

d

e

k

М

N

0

q

(c)

Amount Involved

8,931,431

4,000,000

4,000,000

291,946

406,498

3,753,181

736,841

Actual

Actual

actual

Actual

Actual

Actual

Actual

UNDETERMINABLE

UNDETERMINABLE

(d)

Method of determining amount involved