

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2024

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

A For the 2024 calendar year, or tax year beginning 01-01-2024, and ending 12-31-2024

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization THE JEWISH AGENCY FOR ISRAEL, Doing business as, Number and street (or P.O. box if mail is not delivered to street address) Room/suite 48 KING GEORGE STREET, City or town, state or province, country, and ZIP or foreign postal code JERUSALEM, FC 91000 Israel

D Employer identification number 23-7254561, E Telephone number (212) 339-6000, G Gross receipts \$ 515,416,779

F Name and address of principal officer: YEHUDA SETTON, 48 KING GEORGE STREET, JERUSALEM, FC 91000, IS

H(a) Is this a group return for subordinates? No, H(b) Are all subordinates included? No, H(c) Group exemption number

I Tax-exempt status: 501(c)(3)

J Website: WWW.JAFI.ORG

K Form of organization: Corporation

L Year of formation: 1948, M State of legal domicile: IS

Part I Summary

1 Briefly describe the organization's mission or most significant activities: THE JEWISH AGENCY BINDS JEWS ACROSS IDEOLOGIES AND CIVILIZATIONS TOGETHER IN A WORLDWIDE JEWISH FAMILY WITH ISRAEL AT ITS CENTER.IT PROVIDES THE GLOBAL FRAMEWORK FOR ALIYAH, ENSURES GLOBAL JEWISH SAFETY, STRENGTHENS JEWISH IDENTITY AND CONNECTS JEWS TO ISRAEL AND ONE ANOTHER, AND CONVEYS THE VOICE OF THE JEWISH PEOPLE TO THE STATE OF ISRAEL TO HELP SHAPE ITS SOCIETY.

Table with 2 columns: Description, Amount. Rows include 2-7b: Number of voting members, independent voting members, employees, volunteers, and business revenue.

Table with 3 columns: Description, Prior Year, Current Year. Rows include 8-12: Contributions and grants, program service revenue, investment income, other revenue, and total revenue.

Table with 3 columns: Description, Prior Year, Current Year. Rows include 13-19: Grants and similar amounts paid, benefits paid, salaries, fundraising fees, other expenses, total expenses, and revenue less expenses.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include 20-22: Total assets, total liabilities, and net assets or fund balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer MOSHE ASHIRIE CHIEF FINANCIAL OFFICER, Date 2025-11-10. Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Firm's name REID TAX & ADVISORY SERVICE LLC, Firm's EIN 92-0780479, Firm's address 12 WEST 32ND ST 10TH FLOOR NEW YORK, NY 10001, Phone no. (332) 208-0614.

May the IRS discuss this return with the preparer shown above? See Instructions. Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE JEWISH AGENCY BINDS JEWS ACROSS IDEOLOGIES AND CIVILIZATIONS TOGETHER IN A WORLDWIDE JEWISH FAMILY WITH ISRAEL AT ITS CENTER. IT PROVIDES THE GLOBAL FRAMEWORK FOR ALIYAH, ENSURES GLOBAL JEWISH SAFETY, STRENGTHENS JEWISH IDENTITY AND CONNECTS JEWS TO ISRAEL AND ONE ANOTHER, AND CONVEYS THE VOICE OF THE JEWISH PEOPLE TO THE STATE OF ISRAEL TO HELP SHAPE ITS SOCIETY. THE AGENCY PURSUES THIS MISSION BY: ALIYAHCONNECTING JEWS WORLDWIDE - TO ISRAEL AND TO EACH OTHERSTRENGTHENING ISRAELI SOCIETY

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

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

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

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

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

4a (Code:) (Expenses \$ 81,511,505 including grants of \$) (Revenue \$ 59,537,137) ALIYAH ENABLING ALIYAH FROM COUNTRIES WORLDWIDE FOR THOSE WHO WISH TO MOVE TO ISRAEL (ALIYAH OF CHOICE) FACILITATING ALIYAH FROM COUNTRIES WHERE JEWS ARE IN DISTRESS (ALIYAH OF RESCUE), SUCH AS UKRAINE AND ETHIOPIA PROVIDING HOUSING, HEBREW INSTRUCTION AND OTHER RESOURCES TO NEW IMMIGRANTS AT ABSORPTION CENTERS TO EASE THEIR TRANSITIONS INTO ISRAELI SOCIETY

4b (Code:) (Expenses \$ 40,467,355 including grants of \$) (Revenue \$ 3,473,623) CONNECTING JEWS WORLDWIDE OFFERING YOUNG JEWS DIVERSE ISRAEL EXPERIENCES WITH OPPORTUNITIES TO INTERN, STUDY, VOLUNTEER AND TEACH WHILE LIVING LIKE A LOCAL IN THE JEWISH STATE THROUGH PROGRAMS LIKE MASA ISRAEL JOURNEY SENDING SHLICHIM (ISRAELI EMISSARIES) TO COMMUNITIES AROUND THE WORLD TO BRING ISRAEL TO LIFE AND FORM LASTING, PERSONAL RELATIONSHIPS CREATING A GLOBAL NETWORK OF MUTUAL SUPPORT AND FRIENDSHIP BETWEEN COMMUNITIES IN ISRAEL AND THOSE ABROAD THROUGH PARTNERSHIP2GETHER BRINGING YOUNG JEWS AND ISRAELIS TOGETHER TO VOLUNTEER IN DISADVANTAGED COMMUNITIES WHILE EXPLORING THEIR JEWISH IDENTITIES THROUGH PROJECT TEN ENSURING JEWISH COMMUNITIES AND INSTITUTIONS OUTSIDE OF NORTH AMERICA ARE SAFE AND EQUIPPED WITH PROTECTIVE SECURITY MEASURES THROUGH OUR SECURITY ASSISTANCE FUND

4c (Code:) (Expenses \$ 52,871,772 including grants of \$) (Revenue \$ 16,826,748) STRENGTHENING ISRAELI SOCIETY EMPOWERING YOUNG CHANGE AGENTS AND MENTORING AT-RISK YOUTH WHO WILL BE ISRAEL'S FUTURE LEADERS THROUGH OUR LEADERSHIP ACADEMIES, YOUTH VILLAGES AND YOUTH FUTURES PROGRAMS SUPPORTING ISRAELIS IMPACTED BY TERROR DURING AND IN THE WAKE OF TRAGEDY BY PROVIDING EMERGENCY FINANCIAL ASSISTANCE AND CRUCIAL RESOURCES THROUGH OUR FUND FOR VICTIMS OF TERROR CARING FOR VULNERABLE POPULATIONS, INCLUDING ELDERLY HOLOCAUST SURVIVORS AND LOW-INCOME FAMILIES, AT OUR SUBSIDIARIES LIKE AMIGOUR HELPING ISRAELI ENTREPRENEURS AND SMALL-BUSINESS OWNERS TURN DREAMS INTO REALITY THROUGH LOAN FUNDS FOR SMALL BUSINESSES.

(Code:) (Expenses \$ 159,220,368 including grants of \$) (Revenue \$ 25,967,492)

4d Other program services (Describe in Schedule O.) (Expenses \$ 159,220,368 including grants of \$) (Revenue \$ 25,967,492)

4e Total program service expenses 334,071,000

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding tax-exempt bond issues, excess benefit transactions, and other IRS filings.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and gaming winnings.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Form 990 (2024) Part V Statements Regarding Other IRS Filings and Tax Compliance (continued). Includes sections 2a through 17 with various tax-related questions and input fields.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of assets... 6 Did the organization have members or stockholders... 7a Did the organization have members, stockholders, or other persons who had the power to elect... 7b Are any governance decisions reserved to members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions... 8a The governing body? 8b Each committee with authority to act on behalf of the governing body? 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?

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: THE JEWISH AGENCY FOR ISRAEL 48 KING GEORGE ST JERUSALEM, 91000 IS

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee			
(1) ALMOG DORON CHAIRMAN OF THE EXECUTIVE	40.00	X		X			264,001	0	54,582
(2) SHAVIT YARON DEPUTY CHAIRMAN OF THE EXE	40.00	X		X			199,678	0	41,754
(3) HAGOEL YAAKOV MEMBER OF THE EXECUTIVE	2.00	X					0	215,808	43,174
(4) YEHOASHA BRAVERMAN GUSTIN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	0
(5) GRUNEWALD GAEL MEMBER OF THE EXECUTIVE	2.00	X					0	195,164	38,848
(6) JOSKOWICZ SILVIO BOARD OF GOVERNORS MEMBER	2.00	X					0	195,355	38,848
(7) MORAG DROR MEMBER OF THE EXECUTIVE	2.00	X					0	193,996	38,848
(8) ROZENBERG KORITNY MARINA BOARD OF GOVERNORS MEMBER	2.00	X					0	192,627	38,848
(9) HESS YIZHAR BOARD OF GOVERNORS MEMBER	2.00	X					0	192,955	38,848
(10) BARATZ-RIX RACHEL BOARD OF GOVERNORS MEMBER	2.00	X					0	189,897	38,848
(11) MEIR NERYA BOARD OF GOVERNORS MEMBER	2.00	X					0	196,536	38,848
(12) DERAJ YAAKOV BOARD OF GOVERNORS MEMBER	2.00	X					0	192,991	38,848
(13) WILF MARK CHAIRMAN BOARD OF GOVERNOR	2.00	X					0	0	0
(14) ANDERSON DIANA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	0
(15) ARBIB-PERUGIA JOHANNA MEMBER OF THE EXECUTIVE	2.00	X					0	0	0
(16) ASSER VICTOR BOARD OF GOVERNORS MEMBER	2.00	X					0	0	0
(17) AVRIEL YARDEN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
(18) BARISH DAVID BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(19) BECK SHIVA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(20) BERGMAN SERGIO BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(21) BERK GITA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(22) BERMAN DEBBIE BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(23) BIBI YIGAL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(24) BLITZ HARVEY MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(25) BLUMENTHAL JACOB BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(26) BOB KENNETH MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(27) BRAGINSKY DAVID BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(28) BURG STEVE BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(29) CARMON IZI BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(30) COHEN ESTRELLA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(31) COHEN HAIM BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(32) COHEN HAYA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(33) CUTLER LAURA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(34) DAVIDI ALON BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(35) DEGEN GABRIEL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(36) DWEK SHOSHANA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(37) ELIEZRIE DAVID BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(38) FEINSTEIN-COHEN KARMA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(39) FINGER HAROLD BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(40) FISHER IKE BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(41) FLEISHMAN MARTINE BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(42) FRANKEL MICHAEL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(43) FRANKIEL ESTHER BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(44) GIDWITZ BETSY MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(45) GLASER HELENA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(46) GREENBERG SETH R BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(47) GROSS HARLEY BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(48) HAHN DINA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(49) HEEGER JIM BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(50) HEIMAN KIM BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(51) HELFAND RICHARD BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(52) HELFMAN JORDAN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(53) HERTZBERG ROBERT BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(54) HOFFER RACHEL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(55) HOFFMAN STEPHEN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(56) JACOBS RICK BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(57) JAMES KAREN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(58) KANAL JUDY BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(59) KAPLAN ROBERT BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(60) KAUFFMAN CHARLES BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(61) KIEFFER LEONARD BETH BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(62) KIMEL WARREN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(63) KLINGHOFFER LORI MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(64) KORENFELD DAVID BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(65) KRAWITZ PHILLIP BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(66) LAMM DANNY BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(67) LEBOFF BRUCE MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(68) LEIBLER MARK MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(69) LERNER PESACH BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(70) LEVY-SHOCHAT EMILY BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(71) LEVY MARK F BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(72) LEW DANNY BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(73) LINTENMARI YAHAL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(74) LOWENTHAL ABRAO MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(75) LOWY STEVEN MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(76) LUBELSKY MASHA MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(77) LVOVICH BELLA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(78) MEDJERS JAAP BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(79) MESSINGER DARYL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(80) MOR DUDU BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(81) MOR ESTHER BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(82) MURCIANO JO BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(83) NASSER RAFAEL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(84) OBERLANDER SERGIO BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(85) OVADIA LUSKI IFAT BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(86) OVADIA YIFAT BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(87) NATAN AVRAHAM MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(88) PEREZ DORON BOARD OF GOVERNORS MEMBER	2.00	X					0	181,163	37,240
(89) PICCIOTTO DANIEL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(90) PINCUS STEPHEN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(91) PLATT JULIE MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(92) RENZER ESTHER BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(93) ROHRINGER ARIELLA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(94) RONSON LISA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(95) ROSEDALE STEVE BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(96) SCHOENFELD JEFFREY A BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(97) SCHWARTZ ZEEV BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(98) SERFATY DAN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(99) SHERMAN DAVID F BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(100) SHERMAN JANE MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(101) SHINE HAIM BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(102) SHOLK BRUCE P BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(103) SILVERS DAVID BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(104) SMOLOW RHODA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(105) SOKAL SONDRRA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(106) TANANBAUM DOROTHY BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(107) TEPLITSKY MICHAEL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(108) TISDALE LAURENCE S BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(109) TZADOK YOSSI BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(110) ZALIK HELEN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(111) ZIMMERMAN FRED E BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(112) ZWEIFEL THOMAS D BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(113) AMSALEM YAAKOV BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(114) COHANIM ELLIE BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(115) DOMBEY KAREN BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(116) GOODMAN DANIEL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(117) BRYCZMAN DANIEL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(118) HAREL TOMER BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(119) HASSAM-NAHUM FLEUR BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(120) KAPLANSKY DAFNA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(121) LEVIN ALISA BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(122) LEVENSON MARK MEMBER OF THE EXECUTIVE	2.00	X					0	0	
(123) LEVY HARRY BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(124) NORRY GAIL BOARD OF GOVERNORS MEMBER	2.00	X					0	0	
(125) BRAND YIGAL BOARD OF GOVERNORS MEMBER	40.00	X					0	186,971	38,848
(126) SCHWARCZ JOSHUA SECRETARY GENERAL	40.00				X		284,931	0	42,727
(127) SHIFF MOSHE VP HUMAN RESOURCES	40.00				X		255,563	0	52,235
(128) ASHRIE MOSHE CHIEF FINANCIAL OFFICER	40.00				X		282,277	0	42,190
(129) SETTON YEHUDA CHIEF EXECUTIVE OFFICER	40.00				X		202,781	0	41,472
(130) ELBAUM DANIEL PRESIDENT CEO - JAI	40.00				X		438,664	0	37,120
(131) PERCEL DANIEL MARKETING DIRECTOR	40.00				X		187,482	0	49,070
(132) STAV STEVEN COMPTROLLER	40.00				X		186,093	0	38,156
(133) MOR HANAN DIRECTOR OF TELECOMMUNICA	40.00				X		240,953	0	50,036
(134) GREENFELD ELYASHIV VP STRATEGY & PLANNING	40.00				X		164,162	0	33,216
(135) FELBER SHAY VP ALIYAH	40.00				X		162,179	0	31,356
(136) AHRONOVIZ AMIRA FORMER CHIEF EXECUTIVE OFFICER	40.00					X	275,452	0	56,768
1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)						3,144,216	2,133,463	1,000,728	
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization								5	8
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual								Yes	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual								Yes	No
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								Yes	No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
DELOITTE - BRIGHTMAN ALMAGOR DERECH BEGIN 132 TELAVIV, ISRAEL IS	AUDITING AND PROFESSIONAL SERVICES	320,170
NADAV COHEN HAOREN 6 REHOVOT, ISRAEL IS	EDUCATIONAL ACTIVITIES	204,155
68 HAGOLAN STREET TELAVIV, ISRAEL IS	CONSULTING SERVICES	169,826
DELOITTE CONSULTING AND TECHNOLOGIES DERECH BEGIN 132 TELAVIV, ISRAEL IS	CONSULTING SERVICES	130,370
VIDCO-MOSHE ADIRI HASIGALIT 1 BET SHEMESH, ISRAEL IS	TELECOMMUNICATION CONSULTING SERVICES	128,537

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 7

Part VIII Statement of Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and Other Amt Similar Amounts				
1a Federated campaigns		1a		
b Membership dues		1b		
c Fundraising events		1c		
d Related organizations		1d		
e Government grants (contributions)		1e		
f All other contributions, gifts, grants, and similar amounts not included above		1f	259,948,000	
g Noncash contributions included in lines 1a - 1f:\$		1g		
h Total. Add lines 1a-1f				259,948,000

Program Service Revenue		Business Code				
2a ALIYAH KLITAH AND RESCUE		900099	59,537,137	59,537,137		
b ISRAEL SOCIETY		900099	16,826,748	16,826,748		
c CONNECTING WORLD		900099	3,473,623	3,473,623		
d						
e						
f All other program service revenue.			25,967,492	25,967,492		
g Total. Add lines 2a-2f.			105,805,000			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,105,779		3,105,779	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
		6a	66,484,000			
		b Less: rental expenses	6b	59,904,000		
	c Rental income or (loss)	6c	6,580,000			
	d Net rental income or (loss)		6,580,000		6,580,000	
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		7a				
		b Less: cost or other basis and sales expenses	7b			
	c Gain or (loss)	7c				
	d Net gain or (loss)					
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		8a				
	b Less: direct expenses	8b				
	c Net income or (loss) from fundraising events					
9a Gross income from gaming activities. See Part IV, line 19		9a				
	b Less: direct expenses	9b				
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances		10a				
	b Less: cost of goods sold	10b				
	c Net income or (loss) from sales of inventory					

Other Revenue Misc Amt	11a INCREASE IN ENDOWMENT FUND	Business Code 523000	59,043,000		59,043,000
	b INCREASE IN PENSION FUND LIABILIT	900099	21,031,000		21,031,000
	c				
	d All other revenue				
	e Total. Add lines 11a-11d		80,074,000		
12 Total revenue. See instructions		455,512,779	105,805,000	0	89,759,779

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,880,512	437,788	2,730,388	712,336
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	117,328,211	90,354,414	21,103,655	5,870,142
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	580,229		580,229	
c Accounting	264,095		264,095	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a ALIYAH	81,511,505	81,511,505		
b OTHER FUNCTIONS	56,834,326	49,310,375	916,429	6,607,522
c ISRAEL SOCIETY	52,871,772	52,871,772		
d CONNECTING WORLD JEWRY	40,467,355	40,467,355		
e All other expenses	24,734,774	19,117,791	5,616,983	
25 Total functional expenses. Add lines 1 through 24e	378,472,779	334,071,000	31,211,779	13,190,000
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash-non-interest-bearing	135,891,000	1	178,684,000
	2 Savings and temporary cash investments	89,000	2	386,000
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	72,139,000	4	163,757,000
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 366,960,000		
	b Less: accumulated depreciation	10b 263,451,000	106,367,000	10c 103,509,000
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11	688,765,000	12	725,020,000
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	240,388,000	15	137,404,000
16 Total assets: Add lines 1 through 15 (must equal line 33)	1,243,639,000	16	1,308,760,000	
Liabilities	17 Accounts payable and accrued expenses	63,947,000	17	49,548,000
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	133,000	23	108,000
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	62,828,000	25	65,333,000
	26 Total liabilities: Add lines 17 through 25	126,908,000	26	114,989,000
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	873,810,000	27	926,933,000
	28 Net assets with donor restrictions	242,921,000	28	266,838,000
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	1,116,731,000	32	1,193,771,000
	33 Total liabilities and net assets/fund balances	1,243,639,000	33	1,308,760,000

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	455,512,779
2	Total expenses (must equal Part IX, column (A), line 25)	2	378,472,779
3	Revenue less expenses. Subtract line 2 from line 1	3	77,040,000
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,116,731,000
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	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	1,193,771,000

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

Name of the organization
THE JEWISH AGENCY FOR ISRAEL

Employer identification number
23-7254561

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	305,142,000	180,165,000	339,516,000	379,876,000	365,753,000	1,570,452,000
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3	305,142,000	180,165,000	339,516,000	379,876,000	365,753,000	1,570,452,000
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						1,570,452,000

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4.	305,142,000	180,165,000	339,516,000	379,876,000	365,753,000	1,570,452,000
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,359,000	5,355,000	10,473,000	3,689,000	9,195,000	37,071,000
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	20,389,000	81,821,000	104,659,000	71,202,000	80,074,000	358,145,000
11 Total support. Add lines 7 through 10						1,965,668,000

12 Gross receipts from related activities, etc. (see instructions) **12**

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f) divided by line 11, column (f))	14	79.890 %
15 Public support percentage for 2023 Schedule A, Part II, line 14	15	81.670 %
16a 33 1/3% support test—2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2023. 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 supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 11 Net income from unrelated business activities not included on line 10b; 12 Other income; 13 Total support; 14 First 5 years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2024; Row 16: Public support percentage from 2023 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2024; Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17; Row 19a: 33 1/3% support tests-2024; Row 19b: 33 1/3% support tests-2023; Row 20: Private foundation.

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	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.		
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).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
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.		
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.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
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.		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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 .		
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).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the officers, 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? <i>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.</i>		
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? <i>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.</i>		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described in line 2 above, 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section 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 instructions):			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)			
2 Activities Test. Answer lines 2a and 2b below.			
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? <i>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.</i>			
2a			
b Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b 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>If "Yes" or "No", 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. the role played by the organization in this regard.</i>			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** 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.

Section A - Adjusted Net Income

(A) Prior Year

(B) Current Year
(optional)

- | | | | |
|---|----------|--|--|
| 1 Net short-term capital gain | 1 | | |
| 2 Recoveries of prior-year distributions | 2 | | |
| 3 Other gross income (see instructions) | 3 | | |
| 4 Add lines 1 through 3 | 4 | | |
| 5 Depreciation and depletion | 5 | | |
| 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 Other expenses (see instructions) | 7 | | |
| 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |

Section B - Minimum Asset Amount

(A) Prior Year

(B) Current Year
(optional)

- | | | | |
|--|-----------|--|--|
| 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | 1 | | |
| a Average monthly value of securities | 1a | | |
| b Average monthly cash balances | 1b | | |
| c Fair market value of other non-exempt-use assets | 1c | | |
| d Total (add lines 1a, 1b, and 1c) | 1d | | |
| e Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): | | | |
| 2 Acquisition indebtedness applicable to non-exempt use assets | 2 | | |
| 3 Subtract line 2 from line 1d | 3 | | |
| 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | | |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 Multiply line 5 by 0.035 | 6 | | |
| 7 Recoveries of prior-year distributions | 7 | | |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 | | |

Section C - Distributable Amount

Current Year

- | | | |
|--|----------|--|
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 Enter 85% of line 1 | 2 | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 Enter greater of line 2 or line 3 | 4 | |
| 5 Income tax imposed in prior year | 5 | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | |

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

(continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9 Distributable amount for 2024 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (<i>reasonable cause required-- explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024:			
a From 2019.			
b From 2020.			
c From 2021.			
d From 2022.			
e From 2023.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020.			
b Excess from 2021.			
c Excess from 2022.			
d Excess from 2023.			
e Excess from 2024.			

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

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.
 ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization THE JEWISH AGENCY FOR ISRAEL	Employer identification number 23-7254561
--	---

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ
 - 501(c)() (enter number) organization
 - 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
 - 527 political organization
- Form 990-PF
 - 501(c)(3) exempt private foundation
 - 4947(a)(1) nonexempt charitable trust treated as a private foundation
 - 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization
THE JEWISH AGENCY FOR ISRAEL

Employer identification number
23-7254561

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

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

Name of organization
THE JEWISH AGENCY FOR ISRAEL

Employer identification number
23-7254561

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization THE JEWISH AGENCY FOR ISRAEL	Employer identification number 23-7254561
--	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c) (7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

▶ **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.**

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

Open to Public Inspection

Name of the organization
THE JEWISH AGENCY FOR ISRAEL

Employer identification number

23-7254561

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
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor 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

6 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 7.

1 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

2 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
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 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 No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ \$ _____

8 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)? Yes No

9 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.

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

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

1a If the organization elected, as permitted under FASB 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.

b If the organization elected, as permitted under FASB 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 ▶ \$ _____

2 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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,187,000	2,187,000	2,187,000	1,911,000	1,695,000
b Contributions					
c Net investment earnings, gains, and losses				276,000	216,000
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	2,187,000	2,187,000	2,187,000	2,187,000	1,911,000

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Term endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | | No |
| (ii) Related organizations | | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings	311,686,000		210,528,000	101,158,000
c Leasehold improvements				
d Equipment	55,133,000		52,782,000	2,351,000
e Other	141,000		141,000	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				103,509,000

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	725,020,000	F
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	725,020,000	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) PENSION FUND RETAINED SURPLUS	137,404,000
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	137,404,000

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
LIABILITY FOR EMPLOYEE RETIREMENT	49,104,000
OTHER MISC. LIABILITIES	16,229,000
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	65,333,000

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

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	469,978,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	59,904,000	
e	Add lines 2a through 2d	2e	59,904,000	
3	Subtract line 2e from line 1	3	410,074,000	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	45,438,779	
c	Add lines 4a and 4b	4c	45,438,779	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	455,512,779	

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	437,838,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	59,904,000	
e	Add lines 2a through 2d	2e	59,904,000	
3	Subtract line 2e from line 1	3	377,934,000	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	538,779	
c	Add lines 4a and 4b	4c	538,779	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	378,472,779	

Part XIII**Supplemental Information**

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

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	RENTAL INCOME 59,904,000.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	DIFFERENCE IN CASH RECEIPTS 23,917,000. PENSION FUND LIABILITY 21,031,000. INTEREST 490,779.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	AMIGOUR RENT 59,904,000.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	EXCHANGE LOSS 48,000. INTEREST 490,779.

Additional Data

[Return to Form](#)

Software ID:
Software Version:

Statement of Activities Outside the United States

OMB No. 1545-0047

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

▶ **Attach to Form 990.**

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

Open to Public Inspection

Name of the organization
THE JEWISH AGENCY FOR ISRAEL

Employer identification number
23-7254561

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EAST ASIA AND THE PACIFIC	2	1	PROGRAM SERVICES		864,723
(2) EUROPE	53	57	PROGRAM SERVICES		11,510,786
(3) MIDDLE EAST AND NORTH AFRICA	1,030	1,148	PROGRAM SERVICES/GRANTS		256,798,294
(4) NORTH AMERICA	6	7	PROGRAM SERVICES		2,573,538
(5) RUSSIA AND THE NEWLY INDEPENDENT STATES TOTAL	214	212	PROGRAM SERVICES		28,661,991
(6) SOUTH AMERICA	46	44	PROGRAM SERVICES		4,072,317
(7) SOUTH ASIA	1	3	PROGRAM SERVICES		42,256
(8) SUB- SAHARAN AFRICA	19	14	PROGRAM SERVICES		6,325,466
(9) CENTRAL AMERICA	1	1	PROGRAM SERVICES		868,910
(10) SOUTH AFRICA	2	8	PROGRAM SERVICES		37,646
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	1,371	1,486			310,849,371
b Total from continuation sheets to Part I	3	9			906,556
c Totals (add lines 3a and 3b)	1,374	1,495			311,755,927

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)				SCHEDULE F, PART II: IN SUPPORT OF 694 INSTITUTIONS	34,041,758		0		
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)	VARIOUS INDIVIDUALS	11,427	40,603,588				
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Additional Data

Software ID:

Software Version:

Compensation Information

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
THE JEWISH AGENCY FOR ISRAEL

Employer identification number

23-7254561

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel
<input type="checkbox"/> Travel for companions
<input type="checkbox"/> Tax idemnification and gross-up payments
<input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |
|--|--|

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

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

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

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

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

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

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

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

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

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

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

	Yes	No
1b		
2		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

Part II 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		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ELBAUM DANIEL PRESIDENT CEO - JAID	(i)	438,664	0	0	0	37,120	475,784	0
	(ii)	0	0	0	0	0	0	0
2 AHRONOVIZ AMIRA FORMER CHIEF EXECUTIVE OFFICER	(i)	275,452	0	0	0	56,768	332,220	0
	(ii)	0	0	0	0	0	0	0
3 SCHWARCZ JOSHUA SECRETARY GENERAL	(i)	284,931	0	0	0	42,727	327,658	0
	(ii)	0	0	0	0	0	0	0
4 ASHIRIE MOSHE CHIEF FINANCIAL OFFICER	(i)	282,277	0	0	0	42,190	324,467	0
	(ii)	0	0	0	0	0	0	0
5 ALMOG DORON CHAIRMAN OF THE EXECUTIVE	(i)	264,001	0	0	0	54,582	318,583	0
	(ii)	0	0	0	0	0	0	0
6 SHIFF MOSHE VP HUMAN RESOURCES	(i)	255,563	0	0	0	52,235	307,798	0
	(ii)	0	0	0	0	0	0	0
7 MOR HANAN DIRECTOR OF TELELCOMMUNICA	(i)	240,953	0	0	0	50,036	290,989	0
	(ii)	0	0	0	0	0	0	0
8 HAGOEL YAAKOV MEMBER OF THE EXECUTIVE	(i)	0	0	0	0	0	0	0
	(ii)	215,808	0	0	0	43,174	258,982	0
9 SETTON YEHUDA CHIEF EXECUTIVE OFFICER	(i)	202,781	0	0	0	41,472	244,253	0
	(ii)	0	0	0	0	0	0	0
10 SHAVIT YARON DEPUTY CHAIRMAN OF THE EXE	(i)	199,678	0	0	0	41,754	241,432	0
	(ii)	0	0	0	0	0	0	0
11 PERCEL DANIEL MARKETING DIRECTOR	(i)	187,482	0	0	0	49,070	236,552	0
	(ii)	0	0	0	0	0	0	0
12 MEIR NERYA BOARD OF GOVERNORS MEMBER	(i)	0	0	0	0	0	0	0
	(ii)	196,536	0	0	0	38,848	235,384	0
13 JOSKOWICZ SILVIO BOARD OF GOVERNORS MEMBER	(i)	0	0	0	0	0	0	0
	(ii)	195,355	0	0	0	38,848	234,203	0
14 GRUNEWALD GAEL MEMBER OF THE EXECUTIVE	(i)	0	0	0	0	0	0	0
	(ii)	195,164	0	0	0	38,848	234,012	0
15 MORAG DROR MEMBER OF THE EXECUTIVE	(i)	0	0	0	0	0	0	0
	(ii)	193,996	0	0	0	38,848	232,844	0
16 DERAI YAAKOV BOARD OF GOVERNORS MEMBER	(i)	0	0	0	0	0	0	0
	(ii)	192,991	0	0	0	38,848	231,839	0
17 HESS YIZHAR BOARD OF GOVERNORS MEMBER	(i)	0	0	0	0	0	0	0
	(ii)	192,955	0	0	0	38,848	231,803	0
18 ROZENBERG KORITNY MARINA BOARD OF GOVERNORS MEMBER	(i)	0	0	0	0	0	0	0
	(ii)	192,627	0	0	0	38,848	231,475	0
19 BARATZ-RIX RACHEL BOARD OF GOVERNORS MEMBER	(i)	0	0	0	0	0	0	0
	(ii)	189,897	0	0	0	38,848	228,745	0
20 BRAND YIGAL BOARD OF GOVERNORS MEMBER	(i)	0	0	0	0	0	0	0
	(ii)	186,971	0	0	0	38,848	225,819	0
21 STAV STEVEN COMPTROLLER	(i)	186,093	0	0	0	38,156	224,249	0
	(ii)	0	0	0	0	0	0	0
22 PEREZ DORON BOARD OF GOVERNORS MEMBER	(i)	0	0	0	0	0	0	0
	(ii)	181,163	0	0	0	37,240	218,403	0
23 GREENFELD ELIYASHIV VP STRATEGY & PLANNING	(i)	164,162	0	0	0	33,216	197,378	0
	(ii)	0	0	0	0	0	0	0
24 FELBER SHAY VP ALIYAH	(i)	162,179	0	0	0	31,356	193,535	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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Additional Data

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Software ID:

Software Version:

SCHEDULE O**(Form 990)**

(Rev. January 2025)
 Department of the Treasury
 Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

**Open to Public
 Inspection**

Name of the organization
 THE JEWISH AGENCY FOR ISRAEL

Employer identification number

23-7254561

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	A COPY OF THE 990 IS MADE AVAILABLE TO ALL MEMBERS OF THE BOARD OF GOVERNORS AND IS REVIEWED BY THE AUDIT COMMITTEE BEFORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C	ALL NEW MEMBERS MUST REPORT POTENTIAL CONFLICTS OF INTEREST WITHIN 60 DAYS OF APPOINTMENT FOR REVIEW BY THE CHAIRPERSON OF THE BOARD AND THE CHAIRPERSON OF THE EXECUTIVE. ALL MEMBERS MUST SUBMIT AN ANNUAL DISCLOSURE STATING COMPLIANCE WITH THE WRITTEN POLICIES.
FORM 990, PART VI, SECTION B, LINE 15	THIS POLICY ON THE PROCESS FOR DETERMINING COMPENSATION OF THE JEWISH AGENCY FOR ISRAEL ("JAFI") APPLIES TO THE FOLLOWING PERSONS EMPLOYED BY JAFI AS PER TWO SEPARATE GROUPS: GROUP 1 - THE CHAIRMAN OF THE EXECUTIVE, THE DEPUTY CHAIRMAN OF THE EXECUTIVE AND THE COMPTROLLER. GROUP 2 - THE OTHER OFFICERS AND KEY EMPLOYEES, DIRECTOR GENERAL, CHIEF FINANCIAL OFFICER, SECRETARY-GENERAL AND VP HUMAN RESOURCES. 1. REVIEW AND APPROVAL POLICY FOR GROUP 1 THE COMPENSATION OF THE PERSON HAS BEEN DETERMINED IN THE PAST AS BEING THE SIMILAR(BUT NOT IDENTICAL)SALARY AS COMPARABLE DEFINED GOVERNMENT OFFICIALS. THE SALARY IS DETERMINED BY A COMPENSATION COORDINATOR WHO IS AN INDEPENDENT PERSON WHO DOES NOT REPORT TO ANY OF THE MEMBERS OF THIS GROUP. POLICY FOR GROUP 2 COMPENSATION OF THE PERSON IS APPROVED BY A COMPENSATION COMMITTEE FOR SENIOR OFFICERS COMPRISED OF SENIOR MEMBERS OF THE BOARD OF GOVERNORS. THE COMPENSATION IS DETERMINED ON THE BASIS OF COMPENSATION PACKAGES OFFERED IN OTHER NON-PROFIT ORGANIZATIONS. 2. USE OF DATA AS TO COMPARABLE COMPENSATION THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED USING DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILAR ORGANIZATIONS. 3. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERATIONS AND DECISIONS OF THE COMPENSATIONS COMMITTEE.
FORM 990, PART VI, SECTION C, LINE 19	ALL POLICIES ARE AVAILABLE UPON REQUEST
FORM 990, PART XII, LINE 2C	THERE WAS NO CHANGE IN OVERSIGHT OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT.

Additional Data

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Software ID:

Software Version:

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization
THE JEWISH AGENCY FOR ISRAEL

Employer identification number

23-7254561

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) REAL ESTATE PARTICIPATIONS LTD(A FOREIGN CORPORATION) ISRAEL 12 BET HADFUS JERUSALEM IS	REAL ESTATE MANAGEMENT	IS	7,462,500	95,154,648	THE JEWISH AGENCY FOR ISRAEL
(2) SPIRIT OF ISRAEL - ISRAELI CAMPAIGN LTD 17 KAPLAN STREET TEL AVIV IS	FUNDRAISING	IS	3,395,245	1,374,716	THE JEWISH AGENCY FOR ISRAEL
(3) DATA PROCESSING BUREAU LTD 48 KING GEORGE STREET JERUSALEM IS	COMPUTER SERVICES	IS	16,440,476	6,658,426	THE JEWISH AGENCY FOR ISRAEL
(4) THE ISRAEL EXPERIENCE LTD 3 HAASKAN STREET JERUSALEM IS	EDUCATIONAL TOURISM	IS	41,344,000	14,246,000	THE JEWISH AGENCY FOR ISRAEL
(5) OLAMIT LTD 48 KING GEORGE STREET JERUSALEM IS	PROJECT OUTSOURCING	IS	5,203,000	643,000	THE JEWISH AGENCY FOR ISRAEL
(6) IDUD LTD 6 BET HASHOEVA PASSAGE TEL AVIV IS	DEBT COLLECTION	IS	182,143	1,109,122	THE JEWISH AGENCY FOR ISRAEL
(7) MASA LTD 3 HAASKAN STREET JERUSALEM IS	LONG TERM STAY FACILITATOR	IS	40,520,238	12,749,361	THE JEWISH AGENCY FOR ISRAEL
(8) JEWISH PEOPLE POLICY PLANNING INSTITUTE GIVAT RAM JERUSALEM IS	RESEARCH INSTITUTE	IS	5,481,250	4,303,495	THE JEWISH AGENCY FOR ISRAEL
(9) YOUTH VILLAGE KIRYAT YEARIM LTD (A FOREIGN CORPORATION) KIRYAT YEARIM KIRYAT YEARIM IS	YOUTH VILLAGE	IS	6,477,083	6,504,405	THE JEWISH AGENCY FOR ISRAEL
(10) MISHOLEI HINUCH - AN EDUCATIONAL MANAGEMENT CO LTD (A FOREIGN CORPORATION) KIRYAT TIVON KIRYAT TIVON IS	YOUTH VILLAGE	IS	11,675,893	6,847,684	THE JEWISH AGENCY FOR ISRAEL
(11) YOUTH VILLAGE BEN YAKIR LTD BEN-YAKIR BENYAKIR IS	YOUTH VILLAGE	IS	6,393,750	3,519,182	THE JEWISH AGENCY FOR ISRAEL
(12) KUPAT HAYISHUV LTD 48 KING GEORGE STREET JERUSALEM IS	LOAN PROVIDER	IS	22,291	4,021,927	THE JEWISH AGENCY FOR ISRAEL
(13) ISRAEL ECONOMIC DEVOLPMENT CO LTD 48 KING GEORGE STREET JERUSALEM IS	HOLDING CO	IS	1,732	53,098	THE JEWISH AGENCY FOR ISRAEL
(14) DAROMA TZAFONA TIKKUN OLAM 48 KING GEORGE STREET JERUSALEM IS	EDUCATIONAL AND AT RISK POPULATIONS EMPOWERMENT	IS	12,163,393	1,981,529	THE JEWISH AGENCY FOR ISRAEL
(15) YOUTH FUTURES LTD 48 KING GEORGE STREET JERUSALEM IS	MENTORING CHILDREN AT RISK	IS	15,296,429	3,256,891	THE JEWISH AGENCY FOR ISRAEL
(16) NATIV-THE NATIONAL CENTER FOR JEWISH STUDIES 48 KING GEORGE STREET JERUSALEM IS	JEWISH IDENTITY PROGRAMMING	IS	12,403,274	2,406,934	THE JEWISH AGENCY FOR ISRAEL
(17) ISRAEL TECH CHALLENGE LTD 48 KING GEORGE STREET JERUSALEM IS	IT TRAINING	IS	1,234,827	283,914	THE JEWISH AGENCY FOR ISRAEL
(18) THE JEWISH AGENCY SOCIAL HOUSING INITATIVE FINANCING CO 48 KING GEORGE STREET JERUSALEM IS	SOCIAL HOUSING	IS	13,120,833	178,802,785	THE JEWISH AGENCY FOR ISRAEL

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)AMIGOUR ASSET MANAGEMENT LTD (FOREIGN CORPORATION) 12 KAPLAN ST TEL AVIV ISRAEL TEL AVIV, ISRAEL IS 30-0189203	SOCIAL HOUSING	IS	501(C)(3)			Yes	
(2)THE JEWISH AGENCY - AMERICAN SECTION 633 THIRD AVE NEW YORK, NY 10017 13-1919802	CULTURAL PROMOTION	NY	501(C)(3)			Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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 organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b	Yes	
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n		No
1o		No
1p	Yes	
1q		No
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.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) WORLD ZIONIST ORGANIZATION	P		SERVICES PROVIDED
(2) JEWISH AGENCY AMERICAN SECTION	B		SERVICES PROVIDED

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference

Explanation

Schedule R (Form 990) (Rev. 1-2025)

Additional Data[Return to Form](#)

Software ID:
Software Version: