

PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2022

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning 12/31, 2022, and ending 12/31, 2022

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

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

D Employer identification number
13-5563393

E Telephone number
(212) 751-4000

G Gross receipts \$ **194,186,624**

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

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

J Website: **WWW.AJC.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1906**

M State of legal domicile: **NY**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: AJC'S MISSION IS TO ENHANCE THE WELLBEING OF THE JEWISH PEOPLE AND ISRAEL, AND TO ADVANCE HUMAN RIGHTS AND DEMOCRATIC VALUES IN THE UNITED STATES AND AROUND THE WORLD.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	27
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	26
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	320
	6	Total number of volunteers (estimate if necessary)	6	940
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	(29,647)
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 54,381,322	Current Year 53,786,287
	9	Program service revenue (Part VIII, line 2g)	368,604	920,199
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,330,208	12,865,823
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	900,023	438,706
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	59,980,157	68,011,015
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	583,471	2,998,012
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	36,023,066	38,588,079
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	507,656	495,382
	b	Total fundraising expenses (Part IX, column (D), line 25)	8,887,532	
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	13,411,022	19,956,233
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	50,525,215	62,037,706
19	Revenue less expenses. Subtract line 18 from line 12	9,454,942	5,973,309	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 298,796,291	End of Year 275,116,097
	21	Total liabilities (Part X, line 26)	27,776,788	30,583,099
	22	Net assets or fund balances. Subtract line 21 from line 20	271,019,503	244,532,998

Part II Signature Block

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

Sign Here

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

Paid Preparer Use Only

Print/Type preparer's name: **DANIEL ROMANO** Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: **P00504182**
 Firm's name: **GRANT THORNTON LLP** Firm's EIN: **36-6055558**
 Firm's address: **757 THIRD AVENUE, 3RD FLOOR, NEW YORK, NY 10017-2013** Phone no.: **(212) 599-0100**

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 [X]

1 Briefly describe the organization's mission: AJC'S MISSION IS TO ENHANCE THE WELLBEING OF THE JEWISH PEOPLE AND ISRAEL, AND TO ADVANCE HUMAN RIGHTS AND DEMOCRATIC VALUES IN THE UNITED STATES AND AROUND THE WORLD. ADDITIONAL INFORMATION ON AJC'S MISSION IS AVAILABLE ON AJC'S WEBSITE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] 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 [X] 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 \$ 23,633,367 including grants of \$ 2,921,272) (Revenue \$ 469,301)

GOVERNMENT AND INTERNATIONAL AFFAIRS: AMERICAN JEWISH COMMITTEE (AJC) IS THE LEADING GLOBAL ADVOCACY ORGANIZATION FOR THE JEWISH PEOPLE. WE WORK CLOSELY WITH ELECTED OFFICIALS, DIPLOMATS, RELIGIOUS LEADERS, COMMUNITY PARTNERS, CORPORATIONS, MEDIA AND SOCIAL MEDIA OUTLETS, AMONG OTHER SECTORS OF CIVIL SOCIETY. THROUGH THESE RELATIONSHIPS AND OUR INTERNATIONAL PRESENCE IN 14 NATIONS, WHICH SPANS ACROSS SIX CONTINENTS, AJC IS ABLE TO IMPACT OPINION AND POLICY ON SOME OF THE MOST IMPORTANT ISSUES FACING THE JEWISH PEOPLE: COUNTERING ANTISEMITISM AND ALL FORMS OF HATE, STRENGTHENING ISRAEL'S PLACE IN THE WORLD, AND PROMOTING PLURALISM AND DEFENDING DEMOCRATIC VALUES. AJC'S DOMESTIC AND INTERNATIONAL ADVOCACY EFFORTS INVOLVE EXTENSIVE OUTREACH TO, AND INTERACTION AND JOINT PROGRAMMING WITH, U.S. AND FOREIGN GOVERNMENT OFFICIALS, POLITICAL FACTIONS, POLICY EXPERTS, MEDIA OUTLETS, AND CIVIL SOCIETY PARTNERS, INCLUDING OVERSEAS JEWISH COMMUNITIES. (CONTINUED ON SCHEDULE O)

4b (Code:) (Expenses \$ 14,365,380 including grants of \$ 72,990) (Revenue \$ 285,262)

THE DEPARTMENT OF REGIONAL OFFICES NETWORK OF 25 OFFICES ADVANCES AJC'S ADVOCACY, LEADERSHIP AND FUNDRAISING PRIORITIES ACROSS THE UNITED STATES. IN LOCATIONS WHERE AJC DOES NOT HAVE A PHYSICAL PRESENCE, WE WORK WITH PARTNERS TO ACCOMPLISH AJC'S OBJECTIVES, INCLUDING GLOBAL DIPLOMACY, POLITICAL ADVOCACY, COALITION BUILDING, AND STRATEGIC COMMUNICATIONS. THE REGIONAL OFFICES COMMUNICATE AND ADVOCATE WITH A VARIETY OF KEY INTERLOCUTORS, INCLUDING ELECTED OFFICIALS, DIPLOMATS, INTERGROUP AND INTERFAITH LEADERS, CIVIC LEADERS, UNIVERSITY ADMINISTRATORS, CAMPUS LEADERS AND THE MEDIA. THEY CONNECT THE LOCAL TO THE GLOBAL AND POSITION AJC AS THE GO-TO JEWISH ADVOCACY ORGANIZATION IN THE UNITED STATES.

IN 2022, AJC NATIONAL EFFORTS FOCUSED ON COUNTERING ANTISEMITISM, STRENGTHENING ISRAEL'S PLACE (CONTINUED ON SCHEDULE O)

4c (Code:) (Expenses \$ 4,633,994 including grants of \$ 0) (Revenue \$ 92,020)

COMMUNICATIONS: AJC'S GLOBAL COMMUNICATIONS DEPARTMENT SERVES AS THE AGENCY'S CHIEF STORYTELLER. THE DEPARTMENT SUPPORTS AND AMPLIFIES THE EFFORTS OF EVERY DEPARTMENT WITHIN AJC AND OF THE ORGANIZATION AS A WHOLE, WHILE ADVANCING ITS ADVOCACY AGENDA AND BROADENING AWARENESS AND APPRECIATION OF AJC'S BRAND BY MEANS OF STRATEGIC COMMUNICATIONS METHODS. THE DEPARTMENT SUPPORTS AJC'S PRIORITIES AND MISSION BY CONCEIVING, DEVELOPING, AND IMPLEMENTING MAJOR AGENCY-WIDE CAMPAIGNS AND INITIATIVES, SOLIDIFYING AJC'S BRAND IDENTITY AS THE GLOBAL ADVOCATE FOR THE JEWISH PEOPLE, PRODUCING COMPELLING CONTENT ABOUT AJC'S PRIORITY ISSUES AND DISTRIBUTING IT TO AN EXPANDING AUDIENCE, AND UTILIZING A VARIETY OF MEANS TO BUILD AN ONGOING RELATIONSHIP WITH CURRENT AND POTENTIAL SUPPORTERS.

WITH THE LARGEST SOCIAL MEDIA FOLLOWING OF ANY JEWISH ORGANIZATION IN THE WORLD, INCLUDING (CONTINUED ON SCHEDULE O)

4d Other program services (Describe on Schedule O.) (Expenses \$ 3,707,194 including grants of \$ 3,750) (Revenue \$ 73,616)

4e Total program service expenses 46,339,935

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	<input type="checkbox"/>	<input type="checkbox"/>
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	<input type="checkbox"/>	<input type="checkbox"/>
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	320		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓	
b	If "Yes," enter the name of the foreign country <u>BE, FR, GM, IS, PL</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		✓	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			✓
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 27		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 26		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	<input checked="" type="checkbox"/>	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<input checked="" type="checkbox"/>	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<input checked="" type="checkbox"/>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		<input checked="" type="checkbox"/>

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, CT, (CONTINUED ON SCHEDULE O)
- 18** Section 6104 requires an organization to make its Forms 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.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.
DANIEL GOLDWATER CONTROLLER, 165 EAST 56TH STREET, NEW YORK, NY 10022-2709, (212) 891-1473

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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	Former			
(1) DAVID HARRIS CHIEF EXECUTIVE OFFICER (SEE SCHEDULE J) - UNTIL SEPTEMBER 30, 2022	60.0 0.1	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				774,943	0	139,702
(2) JULIE SCHAIR CHIEF DEVELOPMENT OFFICER	45.0 0.1				<input checked="" type="checkbox"/>			394,651	0	17,148
(3) RABBI DAVID ROSEN DIRECTOR OF INTERNATIONAL INTERRELIGIOUS AFFAIRS	40.0 0.0					<input checked="" type="checkbox"/>		312,813	0	87,587
(4) RICHARD M HYNE CHIEF FINANCIAL OFFICER	45.0 0.1			<input checked="" type="checkbox"/>				329,287	0	45,697
(5) JANET BECKER CHIEF HUMAN RESOURCES AND STRATEGY OFFICER	45.0 0.0				<input checked="" type="checkbox"/>			320,554	0	45,731
(6) MARC D STERN CHIEF LEGAL OFFICER	45.0 0.1			<input checked="" type="checkbox"/>				316,906	0	44,457
(7) JASON ISAACSON CHIEF POLICY & POLITICAL AFFAIRS OFFICER	45.0 0.0				<input checked="" type="checkbox"/>			302,296	0	45,639
(8) ROBERT LEIKIND REGIONAL DIRECTOR, AJC BOSTON	40.0 0.0					<input checked="" type="checkbox"/>		245,829	0	56,951
(9) DINA SIEGEL VANN DIRECTOR, BILLA	40.0 0.0					<input checked="" type="checkbox"/>		243,792	0	43,372
(10) MICHAEL GILBERT DIRECTOR REGIONAL OFFICE ADVANCEMENT	40.0 0.0					<input checked="" type="checkbox"/>		240,438	0	40,035
(11) MELANIE PELL CHIEF FIELD OPERATIONS OFFICER	40.0 0.0				<input checked="" type="checkbox"/>			251,396	0	11,488
(12) BELLE YOELI CHIEF ADVOCACY OFFICER	40.0 0.0				<input checked="" type="checkbox"/>			248,952	0	9,308
(13) NADINE GREENFIELD-BINSTOCK MANAGING DIRECTOR, LEADERSHIP	40.0 0.0					<input checked="" type="checkbox"/>		219,430	0	11,217
(14) THEODORE DEUTCH CHIEF EXECUTIVE OFFICER - AS OF OCTOBER 01, 2022	60.0 0.1	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				134,518	0	2,723

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/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	Former			
(15) MICHAEL L TICHNOR PRESIDENT	20.0 0.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(16) ROBERT E LAPIN CHAIR, BOARD OF GOVERNORS	12.0 0.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(17) STEVEN J WISCH CHAIR, BOARD OF TRUSTEES	5.0 0.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(18) DAVID R BERZ TREASURER/SECRETARY	10.0 0.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(19) STEVEN L ZELKOWITZ ASSOCIATE TREASURER/CHAIR, BUDGET COMMITTEE	5.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(20) ROBERTA S BARUCH CHAIR, ADVOCACY	5.0 0.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(21) MATTHEW J COEN CHAIR, GLOBAL COMMUNICATIONS	5.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(22) ILENE ENGEL CHAIR, LEADERSHIP DEVELOPMENT	5.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(23) FRANK LINDE CHAIR, AUDIT COMMITTEE	5.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(24) ANTHONY E MEYER ASSOCIATE CHAIR, BOARD OF TRUSTEES	5.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(25) (SEE STATEMENT)										
1b Subtotal								4,335,805	0	601,055
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								4,335,805	0	601,055

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 95

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ESHET INCOMING, 12 NAHALAT YITZHAK ST, TEL AVIV, IS	PROGRAM & EVENT TRAVEL SERVICES	898,904
MJV MECHANICAL, 18 MEADOW STREET, LOCUST VALLEY, NY 11560	HVAC SERVICE	667,650
CENTRAL CONSTRUCTION MANAGEMENT LLC, 25-04 40TH AVENUE, LONG ISLAND CITY, NY 11101	BUILDING UPGRADE	520,944
A B DATA CLIENT TRUST ACCOUNT, P.O. BOX 170062, MILWAUKEE, WI 53217-8000	MAIL FULFILLMENT	502,768
TRIPLE A STUDIOS, LLC, 4768 BROADWAY STE 421, NEW YORK, NY 10034	EVENT PRODUCTION	388,121
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	26	

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a 65,800					
	b	Membership dues	1b					
	c	Fundraising events	1c 12,317,401					
	d	Related organizations	1d 25,000					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 41,378,086					
	g	Noncash contributions included in lines 1a-1f	1g \$ 2,168,491					
	h	Total. Add lines 1a-1f						53,786,287
	Program Service Revenue							Business Code
2a		REGISTRATION FEES	900099	915,951	915,951			
b		SALE OF PUBLICATIONS	511190	4,248	4,248			
c								
d								
e								
f		All other program service revenue . .		0	0	0	0	
g	Total. Add lines 2a-2f		920,199					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,554,816		(29,647)	1,584,463	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6a	Gross rents	6a	(i) Real				
				(ii) Personal				
				1,528,472				
	b	Less: rental expenses	6b	248,608				
	c	Rental income or (loss)	6c	1,279,864	0			
	d	Net rental income or (loss)		1,279,864			1,279,864	
	7a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other				
				135,803,000				
	b	Less: cost or other basis and sales expenses	7b	124,491,993				
c	Gain or (loss)	7c	11,311,007	0				
d	Net gain or (loss)		11,311,007			11,311,007		
8a	Gross income from fundraising events (not including \$ 12,317,401 of contributions reported on line 1c). See Part IV, line 18	8a	593,850					
b	Less: direct expenses	8b	1,435,008					
c	Net income or (loss) from fundraising events		(841,158)			(841,158)		
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				
Miscellaneous Revenue				Business Code				
	11a							
	b							
	c							
	d	All other revenue		0	0	0	0	
e	Total. Add lines 11a-11d		0					
12	Total revenue. See instructions		68,011,015	920,199	(29,647)	13,334,176		

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	1,121,389	1,121,389		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	200	200		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,876,423	1,876,423		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	3,659,544	1,878,958	804,623	975,963
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	26,993,032	20,042,403	2,320,337	4,630,292
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	546,957	433,648	48,612	64,697
9	Other employee benefits	5,451,545	3,807,003	507,163	1,137,379
10	Payroll taxes	1,937,001	1,452,751	213,070	271,180
11	Fees for services (nonemployees):				
a	Management	0	0	0	0
b	Legal	353,387	264,051	38,908	50,428
c	Accounting	305,862	109,740	196,122	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	495,382			495,382
f	Investment management fees	869,573	649,745	95,740	124,088
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	3,198,420	2,145,383	790,204	262,833
12	Advertising and promotion	221,137	167,066	28,823	25,248
13	Office expenses	2,284,746	1,133,907	1,150,839	
14	Information technology	1,129,359	807,577	165,037	156,745
15	Royalties	0	0	0	0
16	Occupancy	2,729,846	2,248,962	198,448	282,436
17	Travel	2,056,361	1,973,596	40,630	42,135
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	269,606	269,606	0	0
19	Conferences, conventions, and meetings	4,904,000	4,650,603	49,678	203,719
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	1,160,622	920,902	127,088	112,632
23	Insurance	473,314	386,022	34,917	52,375
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	-----				
b	-----				
c	-----				
d	-----				
e	All other expenses -----	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	62,037,706	46,339,935	6,810,239	8,887,532
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	640,327	371,390	0	268,937

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	39,386,738	1	35,066,275
	2 Savings and temporary cash investments	4,172,244	2	4,969,433
	3 Pledges and grants receivable, net	48,774,002	3	37,386,203
	4 Accounts receivable, net		4	
	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	0	5	0
	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)	0	6	0
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	2,050,235	9	1,812,663
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 37,984,284		
	b Less: accumulated depreciation	10b 29,912,830	8,085,049	10c 8,071,454
	11 Investments—publicly traded securities	74,913,922	11	64,367,398
	12 Investments—other securities. See Part IV, line 11	121,414,101	12	115,746,150
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	0	15	7,696,521
16 Total assets. Add lines 1 through 15 (must equal line 33)	298,796,291	16	275,116,097	
Liabilities	17 Accounts payable and accrued expenses	6,168,611	17	6,817,113
	18 Grants payable		18	
	19 Deferred revenue	308,845	19	710,132
	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	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	21,299,332	25	23,055,854
	26 Total liabilities. Add lines 17 through 25	27,776,788	26	30,583,099
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	57,794,517	27	63,544,429
	28 Net assets with donor restrictions	213,224,986	28	180,988,569
	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	271,019,503	32	244,532,998
33 Total liabilities and net assets/fund balances	298,796,291	33	275,116,097	

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	68,011,015
2	Total expenses (must equal Part IX, column (A), line 25)	2	62,037,706
3	Revenue less expenses. Subtract line 2 from line 1	3	5,973,309
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	271,019,503
5	Net unrealized gains (losses) on investments	5	(34,698,774)
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 on Schedule O)	9	2,238,960
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	244,532,998

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		✓
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	✓	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	✓	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		✓
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 on Schedule O and describe any steps taken to undergo such audits.		

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(25) ROBERT L NEWMARK ----- CHAIR, REGIONAL OFFICES	5.0 ----- 0.0	✓						0	0	0
(26) MELANIE NELKIN ----- CHAIR, NATIONAL POLICY	5.0 ----- 0.0	✓						0	0	0
(27) AMY LEVIN RAGEN ----- CHAIR, INTERRELIGIOUS AFFAIRS	5.0 ----- 0.0	✓						0	0	0
(28) HARRIET P SCHLEIFER ----- CHAIR, CONTEMPORARY JEWISH LIFE	5.0 ----- 0.0	✓						0	0	0
(29) JEFFREY E STONE ----- CHAIR, INTERNATIONAL RELATIONS	5.0 ----- 0.0	✓						0	0	0
(30) CLIFF P GOLDSTEIN ----- ASSOCIATE CHAIR, BOARD OF TRUSTEES	5.0 ----- 0.0	✓						0	0	0
(31) JEFFREY H ARONSON ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(32) LINDA MIRELS ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(33) MATTHEW BRONFMAN ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(34) MICHAEL FELDSTEIN ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(35) DAVID W INLANDER ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(36) ILANA RON LEVEY ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(37) ANDREW H MARKS ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(38) BEN A PLOTKIN ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(39) LISA L PRUZAN ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(40) JOYCE SILBERSTANG ----- EC MEMBER	5.0 ----- 0.0	✓						0	0	0
(41) ALLAN J REICH ----- CHAIR, NATIONAL POLICY UNTIL JUNE 5, 2022	5.0 ----- 0.0	✓						0	0	0
(42) NED DUBILO ----- EC MEMBER UNTIL JUNE 5, 2022	5.0 ----- 0.0	✓						0	0	0
(43) HENRY W DUBINSKY ----- CHAIR, AUDIT COMMITTEE UNTIL JUNE 5, 2022	5.0 ----- 0.0	✓						0	0	0

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(44) SUZANNE D JAFFE ----- EC MEMBER UNTIL JUNE 5, 2022	5.0 ----- 0.0	✓					0	0	0
(45) MARTIN KRALL ----- EC MEMBER UNTIL JUNE 5, 2022	5.0 ----- 0.0	✓					0	0	0
(46) KIM J PIMLEY ----- CHAIR, ADVOCACY UNTIL MARCH 16, 2022	5.0 ----- 0.0	✓					0	0	0
(47) DEBRA SMITH SAIDOFF ----- EC MEMBER UNTIL JUNE 5, 2022	5.0 ----- 0.0	✓					0	0	0

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

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

The organization is not a private foundation because it is: (For lines 1 through 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 **section 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 33¹/₃% 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 33¹/₃% 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		
(A)						
(B)						
(C)						
(D)						
(E)						
Total					0	0

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

Cat. No. 11285F

Schedule A (Form 990) 2022

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	64,972,689	84,568,983	65,918,682	54,381,322	53,786,287	323,627,963
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	64,972,689	84,568,983	65,918,682	54,381,322	53,786,287	323,627,963
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)						51,414,045
6 Public support. Subtract line 5 from line 4						272,213,918

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	64,972,689	84,568,983	65,918,682	54,381,322	53,786,287	323,627,963
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,364,386	3,291,091	2,051,819	2,610,141	2,834,680	14,152,117
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,548,883	1,311,624	25,740	83,334	593,850	3,563,431
11 Total support. Add lines 7 through 10						341,343,511
12 Gross receipts from related activities, etc. (see instructions)					12	4,610,126
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	79.75 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	80.88 %
16a 33 1/3% support test—2022. 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—2021. 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—2022. 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—2021. 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

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 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

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
4c	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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
5b	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?		
5c	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? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
9b	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? <i>If "Yes," provide detail in Part VI.</i>		
9c	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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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 line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

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)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
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 governmental 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? 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.	Yes	No
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? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
2b		
3 Parent of Supported Organizations. Answer 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? If "Yes" or "No," provide details in Part VI .		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
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):		
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 0.85 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2022

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 (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). 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 (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 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-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Part VI

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.)

Return Reference - Identifier	Explanation						
SCHEDULE A, PART II, LINE 10 - OTHER INCOME	Description	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	(1) GROSS INCOME FROM FUNDRAISING EVENTS NOT INCLUDING CONTRIBUTIO NS REPORTED ON PART VIII, LINE 1C	1,548,883	1,311,624	25,740	83,334	593,850	3,563,431
	Total	1,548,883	1,311,624	25,740	83,334	593,850	3,563,431

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[x] 501(c)(3) (enter number) organization

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

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

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

[] 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

[x] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	----- ----- -----	\$ ----- 3,000,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	----- ----- -----	\$ ----- 1,666,200	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

Name of organization AMERICAN JEWISH COMMITTEE	Employer identification number 13-5563393
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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
----- ----- -----	----- ----- -----

**SCHEDULE C
(Form 990)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

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

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	✓		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	✓		
c Media advertisements?		✓	
d Mailings to members, legislators, or the public?	✓		9,342
e Publications, or published or broadcast statements?		✓	
f Grants to other organizations for lobbying purposes?		✓	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	✓		50,068
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		✓	
i Other activities?		✓	
j Total. Add lines 1c through 1i			59,410
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		✓	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

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

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

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

SEE NEXT PAGE

Part IV

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

Return Reference - Identifier	Explanation
<p>SCHEDULE C, PART II-B, LINE 1 - DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY</p>	<p>DURING 2022, AJC SOUGHT TO INFLUENCE STATE, FEDERAL, AND NATIONAL POLICY THROUGH DIRECT CONTACT WITH LEGISLATORS, THEIR STAFF, AND GOVERNMENT OFFICIALS AT THE STATE AND FEDERAL LEVEL. AJC STAFF AND LAY LEADERS HELD MEETINGS ON A REGULAR BASIS WITH THESE INDIVIDUALS. IN CONTACTING FEDERAL AND STATE AGENCY AND ELECTED OFFICIALS REGARDING EXISTING OR PENDING LEGISLATION, AJC'S ACTIVITIES FOCUSED PRINCIPALLY ON FOREIGN AFFAIRS LEGISLATION (INCLUDING SANCTIONING HEZBOLLAH AND HAMAS AS TERRORIST ORGANIZATIONS AND SUPPORT FOR U.S.-ISRAEL COOPERATION); MEASURES DIRECTED AGAINST BOYCOTT OF, DIVESTMENT FROM, AND SANCTIONS AGAINST ISRAEL; IMMIGRATION POLICY (INCLUDING SUPPORT OF COMPREHENSIVE REFORM); AND, INITIATIVES RELATING TO CIVIL RIGHTS, CIVIL LIBERTIES, AND RELIGIOUS LIBERTY.</p>

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: AMERICAN JEWISH COMMITTEE; Employer identification number: 13-5563393

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II Conservation Easements. Includes questions about purpose of easements, total number and acreage, and monitoring expenses. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, and 2d.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and assets for financial gain, with dollar amounts.

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 make 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 program
- 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
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21, 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 on 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	171,687,046	155,398,511	139,686,402	104,873,778	114,677,296
b Contributions	7,851,686	5,546,178	7,053,731	21,674,135	5,099,898
c Net investment earnings, gains, and losses	(21,422,690)	17,473,690	13,733,806	18,107,924	(10,972,458)
d Grants or scholarships	213,450	548,472	248,545	388,928	162,364
e Other expenditures for facilities and programs	5,689,877	5,849,115	4,509,545	4,202,449	3,409,444
f Administrative expenses	398,832	333,746	317,338	378,058	359,150
g End of year balance	151,813,883	171,687,046	155,398,511	139,686,402	104,873,778

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

- a** Board designated or quasi-endowment 22.34 %
- b** Permanent endowment 77.54 %
- c** Term endowment 0.12 %

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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) Related organizations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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		430,126		430,126
b Buildings		19,846,482	15,164,589	4,681,893
c Leasehold improvements		4,178,529	2,782,864	1,395,665
d Equipment		13,529,147	11,965,377	1,563,770
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				8,071,454

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		
(3) Other		
(A) LONG ONLY EQUITIES	33,059,909	END OF YEAR MARKET VALUE
(B) LONG/SHORT EQUITIES	27,468,527	END OF YEAR MARKET VALUE
(C) MULTISTRATEGY/DIVERSIFYING HEDGE FUNDS	24,495,455	END OF YEAR MARKET VALUE
(D) 1-3 YEAR US TREASURY INDEX FUND	15,746,006	END OF YEAR MARKET VALUE
(E) PRIVATE EQUITY INVESTMENTS	14,031,844	END OF YEAR MARKET VALUE
(F) STATE OF ISRAEL BONDS/GIFT ANNUITY BONDS	944,409	END OF YEAR MARKET VALUE
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	115,746,150	

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

Part X Other Liabilities.

Complete if the organization answered "Yes" 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	
(2) ACCRUED UNFUNDED PENSION LIABILITY	9,106,597
(3) LEASE OBLIGATIONS	8,536,021
(4) OTHER RETIREMENT BENEFITS	2,744,937
(5) CHARITABLE GIFT ANNUITIES	2,639,572
(6) SECURITY DEPOSITS	28,727
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	23,055,854

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 FASB 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.

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

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

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

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

Part XIII Supplemental Information.

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

SEE STATEMENT

Series of horizontal dashed lines for providing supplemental information.

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 - Identifier	Explanation
SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	INCOME FROM AJC'S ENDOWMENT FUNDS ARE USED TO PROVIDE A SOURCE OF ONGOING SUPPORT FOR ITS EXEMPT PURPOSES.
SCHEDULE D, PART X, LINE 1 - ACCRUED UNFUNDED PENSION LIABILITY	ACCRUED UNFUNDED PENSION LIABILITY OF \$9,106,598 REPRESENTS THE EXCESS OF PENSION BENEFIT OBLIGATION OVER THE ASSETS OF THE FROZEN PENSION PLAN.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	AJC HAS EVALUATED ITS TAX POSITIONS AND HAS DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS AND THAT IT WILL CONTINUE TO BE EXEMPT FROM FEDERAL AND STATE INCOME TAXES.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2022

Open to Public Inspection

Complete if the organization answered "Yes" on 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the 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) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		48,836,653
(2) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		9,400,814
(3) MIDDLE EAST AND NORTH AFRICA	0	0	INVESTMENTS		4,201,591
(4) EAST ASIA AND THE PACIFIC	0	0	INVESTMENTS		3,857,159
(5) EUROPE (INCLUDING ICELAND AND GREENLAND)	5	20	PROGRAM SERVICES	ADVOCACY	3,381,494
(6) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING		1,505,103
(7) MIDDLE EAST AND NORTH AFRICA	2	14	PROGRAM SERVICES	ADVOCACY	1,473,585
(8) MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		326,000
(9) EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICES	ADVOCACY	159,427
(10) SOUTH AMERICA	0	0	GRANTMAKING		43,320
(11) SOUTH AMERICA	0	1	PROGRAM SERVICES	ADVOCACY	9,881
(12) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		2,000
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	7	36			73,197,027
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	7	36			73,197,027

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)			(SEE STATEMENT)						
(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 a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . ▶ 23

3 Enter total number of other organizations or entities . . . ▶ 0

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)							
(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

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States (continued)

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO JEWISH COMMUNITY OF THESSALONIKI - IN SUPPORT OF ITS ACTIVITIES TO SUPPORT OF AGED HOLOCAUST SURVIVORS.	100,000	WIRE TRANSFER			
(2)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO BRUCKE DER HOFFNUNG E.V. BRIDGES OF HOPE TO SUPPORT OKHMATDYT HOSPITAL IN KIEV, SERVING CHILDREN INJURED BY THE WAR IN UKRAINE.	100,000	WIRE TRANSFER			
(3)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO CHARITABLE ORGANIZATION MEMORY FOUNDATION BABYN YAR TO SUPPORT THE COSTS OF PROVIDING FOOD, HEALTH SUPPLIES AND MEDICINE TO THE EVACUATED UKRAINIANS.	100,000	WIRE TRANSFER			
(4)		MIDDLE EAST AND NORTH AFRICA	GRANT TO ISRAID FOR RELIEF EFFORTS ON BEHALF UKRAINIAN REFUGEES.	100,000	WIRE TRANSFER			
(5)		MIDDLE EAST AND NORTH AFRICA	GRANT TO ISRAID FOR RELIEF EFFORTS ON BEHALF UKRAINIAN REFUGEES IN ROMANIA.	100,000	WIRE TRANSFER			
(6)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO JEWISH COMMUNITY CENTRE OF KRAKOW TO SUPPORT COSTS OF STAFF & SUPPLIES ON BEHALF OF UKRAINIAN REFUGEES.	100,000	WIRE TRANSFER			
(7)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ADDITIONAL GRANT TO JEWISH COMMUNITY CENTRE OF KRAKOW FOR RELIEF EFFORTS ON BEHALF UKRAINIAN REFUGEES.	100,000	WIRE TRANSFER			
(8)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO JEWISH COMMUNITY OF WARSAW FOR UKRAINIAN RELIEF EFFORTS	100,000	WIRE TRANSFER			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			ON BEHALF OF UKRAINIAN REFUGEES.					
(9)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO JEWROPE, N.O. TO SUPPORT THE COSTS OF RELIEF EFFORTS IN THE UKRAINE ON BEHALF OF UKRAINIANS.	100,000	WIRE TRANSFER			
(10)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ADDITIONAL GRANT TO JEWROPE, N.O. TO SUPPORT THE COSTS OF RELIEF EFFORTS IN THE UKRAINE ON BEHALF OF UKRAINIANS.	100,000	WIRE TRANSFER			
(11)		MIDDLE EAST AND NORTH AFRICA	DONATION TO KKL-JNF FOR A PROJECT IN ISRAEL STATE OF THE ART PLAYGROUND IN A COMMUNITY PARK IN ASHDOD.	100,000	WIRE TRANSFER			
(12)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO UUNGO JEWISH CONFEDERATION OF UKRAINE - TO SUPPORT THE EVACUATION AND TRANSPORT OF ELDERLY UKRAINIAN JEWS INCLUDING HOLOCAUST SURVIVORS.	100,000	WIRE TRANSFER			
(13)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO UUNGO JEWISH CONFEDERATION OF UKRAINE TO SUPPORT, EVACUATE AND TRANSPORT ELDERLY UKRAINIAN JEWS INCLUDING HOLOCAUST SURVIVORS.	100,000	WIRE TRANSFER			
(14)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO OUR CHOICE FOUNDATION/UKRAINIAN HOUSE IN WARSAW TO SUPPORT RELIEF EFFORTS ON BEHALF OF UKRAINIAN REFUGEES TO COVER FOOD, HEALTH, SUPPLIES & STAFF.	75,000	WIRE TRANSFER			
(15)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO POLISH CENTER FOR INTERNATIONAL AID FOR RELIEF EFFORTS PROVIDING CASH ASSISTANCE TO UKRAINIAN REFUGEES IN POLAND SUBSIDIZING THEIR EMPLOYMENT.	75,000	WIRE TRANSFER			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(16)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO SAUVETEURS SANS FRONTIERE TO SUPPORT THE COSTS OF RELIEF EFFORTS ON BEHALF OF UKRAINIANS AFFECTED BY THE WAR.	55,070	WIRE TRANSFER			
(17)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO BALINT ZSIDO KOZOSSEGI HAZ ALAPIT TO SUPPORT RELIEF EFFORTS ON BEHALF OF UKRAINIAN REFUGEES TO COVER FOOD, HEALTH SUPPLIES & STAFF.	50,000	WIRE TRANSFER			
(18)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO CHARITABLE ORGANIZATION CF PODILSKA HROMADA KYIV FOR COSTS OF HUMANITARIAN AID TO CIVILIANS STAYING IN THE WAR ZONE AREA.	50,000	WIRE TRANSFER			
(19)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO JEWISH COMMUNITY OF MOLDOVA TO SUPPORT RELIEF EFFORTS ON BEHALF OF UKRAINIAN REFUGEES INCLUDING FOOD, TRANSPORTATION.	50,000	WIRE TRANSFER			
(20)		SOUTH AMERICA	GRANT TO SUPPORT ACTIVITIES AND PROJECTS ALIGNED WITH AJC AND FISESP'S MISSION AND PRIORITIES, TO VALUE JEWISH CULTURE IN BRAZIL, AND TO COMBAT ANTI-SEMITISM AND OTHER FORMS OF DISCRIMINATION, AMONG OTHERS.	43,320	WIRE TRANSFER			
(21)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO PUBLIC ORGANIZATION UKRAINIAN ASSOCIATION OF AMBULATORY PHYSICIAN FOR ITS RELIEF EFFORTS ON BEHALF OF UKRAINIAN REFUGEES.	25,000	WIRE TRANSFER			
(22)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO SUPPORT RESEARCH INTO HUMAN RIGHTS ABUSES INVESTIGATE	24,900	WIRE TRANSFER			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			ALLEGATIONS CONCERNING HUMAN RIGHTS ABUSES DIRECTED AGAINST UKRAINIAN CHILDREN, PARTICULARLY DEPORTATION.					
(23)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO SUPPORT PREPARATION OF HUMAN RIGHTS BRIEFING NOTES ON UN SECURITY COUNCIL AND FOLLOW UP BY YONI HURWITZ IN ACCORD WITH PROPOSAL APPROVED BY THE JBI ADMINISTRATIVE COUNCIL ON DECEMBER 21, 2022.	24,400	WIRE TRANSFER			
(24)		EUROPE (INCLUDING ICELAND AND GREENLAND)	JBI GRANT TO SUPPORT REESTABLISHING THE HUMAN RIGHT ORGANIZATION INTERNATIONAL MEMORIAL AS A NON-PROFIT ORGANIZATION IN EUROPE.	23,000	WIRE TRANSFER			
(25)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO WADI DESIGNATED TO SUPPORT THE EFFORTS TO CREATE AN ONLINE PLATFORM TO ALLOW UKRAINIAN REFUGEES TO BE SURE THEY ARE SEEKING SHELTER IN SAFE PLACES.	16,862	WIRE TRANSFER			
(26)		MIDDLE EAST AND NORTH AFRICA	GRANT TO ISRAAID FOR RELIEF EFFORTS ON BEHALF OF TYPHOON RAI VICTIMS IN THE PHILIPPINES.	15,000	WIRE TRANSFER			
(27)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO JEWISH COMMUNITY OF ESTONIA TO SUPPORT ITS RELIEF EFFORTS ON BEHALF OF UKRAINIAN & RUSSIAN REFUGEES	15,000	WIRE TRANSFER			
(28)		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT MACCABI INDIA'S PARTICIPATION IN WORLD MACCABI GAMES, ISRAEL.	10,000	WIRE TRANSFER			
(29)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO HILLEL DEUTSCHLAND - JUDISCHE FOR RELIEF TO SUPPORT THE PROVISION OF	5,631	WIRE TRANSFER			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			MEDICAL SUPPLIES FOR A HOSPITAL IN LYSSYANKA.					
(30)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FUNDACJA JCC WARSZAWA - TO SUPPORT UKRANIAN REFUGEES.	5,037	WIRE TRANSFER			
(31)		EUROPE (INCLUDING ICELAND AND GREENLAND)	KAMILIANSKA MISJA POMOCY SPOLECZNEJ TO SUPPORT UKRANIAN REFUGEES.	5,037	WIRE TRANSFER			

Part V

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

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	AJC'S GRANT RECIPIENTS CERTIFY THAT THE GRANTS WILL BE USED IN COMPLIANCE WITH ANY APPLICABLE UNITED STATES (US) LAWS, US AND INTERNATIONAL STATUTES, REGULATIONS, RULES AND EXECUTIVE ORDERS, INCLUDING ALL ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, REGULATIONS, RULES AND EXECUTIVE ORDERS. NO FUNDS WILL BE USED IN PARTISAN FASHION TO SUPPORT OR OPPOSE CANDIDATES FOR PUBLIC OFFICE. AJC REQUIRES THE RECIPIENTS TO SUBMIT NARRATIVE AND FINANCIAL REPORTS.
SCHEDULE F, PART I, LINE 3 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL SOUTH AMERICA -ACCRUAL
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL SOUTH AMERICA -ACCRUAL

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 AB DATA, P O BOX 170062, MILWAUKEE, WI 53217-8000	(SEE STATEMENT)	✓		796,086	495,382	300,704
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				796,086	495,382	300,704

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		HERBERT H LEHMAN AWARD (event type)	JUDGE LEARNED HAND AWARD (event type)	22 (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	3,382,861	1,642,598	7,885,792	12,911,251
	2 Less: Contributions	3,372,661	1,589,898	7,354,842	12,317,401
	3 Gross income (line 1 minus line 2)	10,200	52,700	530,950	593,850
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes				0
	6 Rent/facility costs				0
	7 Food and beverages				0
	8 Entertainment				0
	9 Other direct expenses	54,300	127,926	1,252,782	1,435,008
	10 Direct expense summary. Add lines 4 through 9 in column (d)				1,435,008
11 Net income summary. Subtract line 10 from line 3, column (d)				(841,158)	

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? **Yes** **No**
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? **Yes** **No**
- 13** Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

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

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation \$

Description of services provided

- Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

[SEE NEXT PAGE](#)

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Part IV

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

Return Reference - Identifier	Explanation
SCHEDULE G, PART I, LINE 2B(II) - LINE 2B COLUMN (II) ACTIVITY 1	MAIL SOLICITATION & PROGRAM ADVOCACY
SCHEDULE G, PART I, LINE 2B(III) - AB DATA	CHECKS ARE MAILED DIRECTLY TO AB DATA'S PO BOX IN MILWAUKEE. ON A DAILY BASIS, AB DATA RETRIEVES THE CHECKS FROM THE PO BOX AND HANDS THE CHECKS TO THE PERSONNEL FOR DATA ENTRY. THE DATA ENTRY PERSONNEL PHYSICALLY OPEN UP EVERY SINGLE PIECE OF MAIL AND ENTER THE DONATIONS INTO AB DATA'S RECORD-KEEPING SYSTEM. ONCE THE DONATIONS ARE ENTERED INTO THE RECORD-KEEPING SYSTEM, THEY ARE THEN DEPOSITED DIRECTLY INTO AJC'S BANK ACCOUNT. ON A MONTHLY BASIS, AJC'S ACCOUNTING DEPARTMENT RECONCILES THE BANK ACCOUNT TO A REPORT PROVIDED BY AB DATA WHICH LISTS ALL THE DONATIONS.
SCHEDULE G, PART I, LINE 2B(V) - AB DATA	AMOUNTS IN COLUMN (V) REPRESENT PAYMENTS TO PROFESSIONAL FUNDRAISERS FOR FUNDRAISING AND PROGRAMMATIC SERVICES AND REIMBURSEMENT OF FUNDRAISING EXPENSES, SUCH AS: PRINTING, PAPER, ENVELOPES, ETC.
SCHEDULE G, PART II, LINE 9(D) - OTHER DIRECT FUNDRAISING EVENT EXPENSES	AJC REPORTS ALL EXPENDITURES RELATED TO ITS SPECIAL EVENT FUNCTIONS AS "OTHER DIRECT EXPENSES" ON SCHEDULE G, PART II, LINE 9. COSTS OF RUNNING THESE SPECIAL EVENTS ARE FREQUENTLY INVOICED AS ONE FEE BY THE VENDOR, SO THAT THE RENTAL, FOOD AND OTHER COSTS ARE BUNDLED AND FURTHER CATEGORIZATION ON SCHEDULE G, PART II IS NOT POSSIBLE. IT IS THEREFORE MORE ACCURATE TO COMBINE ALL THE EXPENSES.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) (SEE STATEMENT)	23-0053483	501(C)(3) TAX EXEMPT	157,500				(SEE STATEMENT)
(2) (SEE STATEMENT)	23-0053483	501(C)(3) TAX EXEMPT	125,000				(SEE STATEMENT)
(3) (SEE STATEMENT)	23-0053483	501(C)(3) TAX EXEMPT	125,000				(SEE STATEMENT)
(4) (SEE STATEMENT)	13-1656634	501(C)(3) TAX EXEMPT	100,000				(SEE STATEMENT)
(5) (SEE STATEMENT)	13-6219868	501(C)(3) TAX EXEMPT	100,000				(SEE STATEMENT)
(6) (SEE STATEMENT)	13-1996126	501(C)(3) TAX EXEMPT	100,000				(SEE STATEMENT)
(7) (SEE STATEMENT)	13-1656634	501(C)(3) TAX EXEMPT	100,000				(SEE STATEMENT)
(8) (SEE STATEMENT)	13-1656634	501(C)(3) TAX EXEMPT	100,000				(SEE STATEMENT)
(9) (SEE STATEMENT)	31-0896555	501(C)(3) TAX EXEMPT	30,000				(SEE STATEMENT)
(10) (SEE STATEMENT)	27-2480390	501(C)(3) TAX EXEMPT	25,000				(SEE STATEMENT)
(11) (SEE STATEMENT)	13-5633307	501(C)(3) TAX EXEMPT	25,000				(SEE STATEMENT)
(12) (SEE STATEMENT)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 18

3 Enter total number of other organizations listed in the line 1 table 0

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

Cat. No. 50055P

Schedule I (Form 990) 2022

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 CASH	1	200		MV	
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

(SEE STATEMENT)

Part II

Grants and Other Assistance to Governments and Organizations in the United States (continued)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(12) REGENTS OF THE UNIVERSITY OF CALIFORNIA, IRVINE 160 ALDRICH HALL, IRVINE, CA 92697	95-2226406	501(C)(3) TAX EXEMPT	25,000				GRANT TO UNIVERSITY OF CALIFORNIA IRVINE'S INTERNATIONAL JUSTICE CENTER TO CONDUCT A HUMAN RIGHTS WORKSHOP ON AFGHANISTAN.
(13) ATLANTIC COUNCIL OF THE UNITED STATES, INC. 1030 15TH STREET, NW, 12TH FLOOR, WASHINGTON, DC 20005	52-0742294	501(C)(3) TAX EXEMPT	24,850				AWARD TO THE ATLANTIC COUNCIL'S STRATEGIC LITIGATION PROJECT (SLP) TO CARRY OUT AN ADVOCACY CAMPAIGN CONCERNING HUMAN RIGHTS VIOLATIONS AGAINST THE UYGHURS PURSUANT TO A PROPOSAL APPROVED BY THE JBI ADMINISTRATIVE COUNCIL.
(14) IRAN HUMAN RIGHTS DOCUMENTATION CENTER 129 CHURCH STREET ST. 423, NEW HAVEN , CT 06510	20-2744292	501(C)(3) TAX EXEMPT	15,000				GRANT TO COVER COSTS ASSOCIATED WITH THE CONDUCT OF AN ADVOCACY CAMPAIGN TO CREATE AN INDEPENDENT INVESTIGATIVE BODY CONCERNING HUMAN RIGHTS VIOLATIONS IN IRAN.
(15) JEW OR FALSE LLC 2413 PELHAM AVENUE, LOS ANGELES, CA 90025	87-4550969	SINGLE-MEMBER LLC	10,000				RECIPIENT OF THE AJC AWARD FOR THEIR WINNING PROGRAM "YOUNG AMERICAN JEWS TO DISRUPT U.S. ANTISEMITISM".
(16) NEW ZIONIST CONGRESS INC. 156 ORCHARF ST. APT 5A, NEW YORK, NY 10002	86-3512990	501(C)(3) TAX EXEMPT	10,000				RECIPIENT OF THE AJC AWARD FOR THEIR WINNING PROGRAM "YOUNG AMERICAN JEWS TO DISRUPT U.S. ANTISEMITISM".
(17) JACOB BURNS FILM CTR-MEDIA ARTS LAB 405 MANVILLE ROAD, PLEASANTVILLE, NY 10570	13-4038441	501(C)(3) TAX EXEMPT	10,000				SPONSORSHIP OF THE 2022 JEWISH FILM FESTIVAL.
(18) HEBREW UNION COLLEGE - JEWISH INSTITUTE OF RELIGION JACK SKIRBALL CAMPUS, 3077 UNIVERSI, LOS ANGELES , CA 90007	31-0537067	501(C)(3) TAX EXEMPT	10,000				SUPPORT OF THE HEBREW UNION COLLEGE FIELDWORK PROGRAM.

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	AJC'S GRANT RECIPIENTS CERTIFY THAT THE GRANTS WILL BE USED IN COMPLIANCE WITH ANY APPLICABLE UNITED STATES LAWS, STATUTES, REGULATIONS, RULES AND EXECUTIVE ORDERS, INCLUDING ALL ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, REGULATIONS, RULES AND EXECUTIVE ORDERS. NO FUNDS WILL BE USED IN PARTISAN FASHION TO SUPPORT OR OPPOSE CANDIDATES FOR PUBLIC OFFICE. IN MOST OF THE CASES AJC REQUIRES THE RECIPIENTS TO SUBMIT NARRATIVE AND FINANCIAL REPORTS.
(1) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL 633 THIRD AVENUE 21ST FLOOR, NEW YORK, NY 10017
(2) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL 633 THIRD AVENUE 21ST FLOOR, NEW YORK, NY 10002
(3) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL 633 THIRD AVENUE 21ST FLOOR, NEW YORK, NY 10017
(4) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	JOINT DISTRIBUTION COMMITTEE 220 EAST 42ND STREET - ROOM 400, NEW YORK, NY 10017
(5) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	UKRAINIAN CONGRESS COMMITTEE OF AMERICA 203 SECOND AVENUE, NEW YORK, NY 10003
(6) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	AMERICAN FRIENDS OF TEL AVIV UNIVERSITY INC. 8 WEST 40TH STREET, 8TH FLOOR, NEW YORK, NY 10018
(7) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	JOINT DISTRIBUTION COMMITTEE 220 EAST 42ND STREET - ROOM 400, NEW YORK, NY 10017
(8) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	JOINT DISTRIBUTION COMMITTEE 220 EAST 42ND STREET - ROOM 400, NEW YORK, NY 10017
(9) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	UNIVERSITY OF CINCINNATI SRS ACCOUNTING DIVISION, PO BOX 932, CLEVELAND, OH 44193
(10) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	MUFLEHUN 800 MAINE AVE SW, STE 200, WASHINGTON, NY 20024
(11) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	HIAS INC. 1300 SPRING STREET, SUITE 500, SILVER SPRING, MD 20910
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL : ADDITIONAL GRANT TO JEWISH AGENCY FOR ISRAEL TO SPONSOR A SUMMER CAMP SESSION OPERATED BY JEWISH AGENCY FOR UKRAINIAN REFUGEE CHILDREN IN ISRAEL.
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL : GRANT TO JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL FOR RELIEF EFFORTS ON BEHALF OF UKRAINIAN REFUGEES.
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL : 2ND GRANT TO JEWISH AGENCY FOR ISRAEL NORTH AMERICAN COUNCIL TO COVER ITS COSTS TO CHARTER A PLANE TO BRING UKRAINIAN JEWISH REFUGEES FROM BUDAPEST TO ISRAEL.

Return Reference - Identifier	Explanation
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	JOINT DISTRIBUTION COMMITTEE: GRANT TO SUPPORT JOINT DISTRIBUTION COMMITTEE'S RELIEF EFFORTS IN POLAND ON BEHALF OF UKRAINIAN REFUGEES.
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	UKRAINIAN CONGRESS COMMITTEE OF AMERICA : GRANT TO UKRAINIAN CONGRESS COMMITTEE OF AMERICA TO PROVIDE EXCLUSIVE HUMANITARIAN AID TO UKRAINIANS ADVERSELY AFFECTED BY THE RUSSIAN INVASION.
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	AMERICAN FRIENDS OF TEL AVIV UNIVERSITY INC.: GRANT TO AMERICAN FRIENDS OF TEL AVIV UNIVERSITY, INC. TO SUPPORT EMERGENCY FELLOWSHIPS FOR UKRAINIAN STUDENTS AND RESEARCHERS.
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	JOINT DISTRIBUTION COMMITTEE: 2ND GRANT TO JOINT DISTRIBUTION COMMITTEE'S RELIEF EFFORTS IN POLAND ON BEHALF UKRAINIAN REFUGEES.
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	JOINT DISTRIBUTION COMMITTEE: 3RD GRANT TO JOINT DISTRIBUTION COMMITTEE FOR RELIEF EFFORTS IN POLAND ON BEHALF UKRAINIAN REFUGEES.
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	UNIVERSITY OF CINCINNATI : GRANT IS TO BE USED TO ENABLE THE URBAN MORGAN INSTITUTE OF HUMAN RIGHTS AT UC COLLEGE OF LAW TO PRODUCE TWO REPORTS IN A SERIES ENTITLED "PRACTICAL PREVENTION: HOW THE GENOCIDE CONVENTION'S OBLIGATION TO PREVENT APPLIES TO BURMA".
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MUFLEHUN : CURRICULUM UPDATE AND TRAINING DELIVERY OF THE TACKLE UPSTANDER IN NEW JERSEY.
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	HIAS INC. : GRANT TO SUPPORT PROJECT OF HIAS AND THE REFUGEE RIGHTS CLINIC AT TEL AVIV UNIVERSITY TO UTILIZE LEGAL EXPERTISE ON BEHALF OF ASYLUM SEEKER YOUTH IN ISRAEL.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN JEWISH COMMITTEE

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

13-5563393

Part I Questions Regarding Compensation

	Yes	No
<p>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.</p> <p> <input checked="" type="checkbox"/> First-class or charter travel <input type="checkbox"/> Housing allowance or residence for personal use <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) </p>		
<p>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</p>	1b ✓	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?</p>	2 ✓	
<p>3 Indicate which, if any, of the following the 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.</p> <p> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>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:</p>		
<p>a Receive a severance payment or change-of-control payment?</p>	4a	✓
<p>b Participate in or receive payment from a supplemental nonqualified retirement plan?</p>	4b ✓	
<p>c Participate in or receive payment from an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.</p>	4c	✓
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</p>		
<p>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:</p>		
<p>a The organization?</p>	5a	✓
<p>b Any related organization?</p> <p>If "Yes" on line 5a or 5b, describe in Part III.</p>	5b	✓
<p>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:</p>		
<p>a The organization?</p>	6a	✓
<p>b Any related organization?</p> <p>If "Yes" on line 6a or 6b, describe in Part III.</p>	6b	✓
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III</p>	7	✓
<p>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</p>	8	✓
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(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 DAVID HARRIS CHIEF EXECUTIVE OFFICER (SEE SCHEDULE J) - UNTIL SEPTEMBER 30, 2022	(i)	496,010	0	278,933	88,548	51,154	914,645	79,398
	(ii)	0	0	0	0	0	0	0
2 JULIE SCHAIR CHIEF DEVELOPMENT OFFICER	(i)	392,675	0	1,976	9,150	7,998	411,799	0
	(ii)	0	0	0	0	0	0	0
3 RABBI DAVID ROSEN DIRECTOR OF INTERNATIONAL INTERRELIGIOUS AFFAIRS	(i)	312,813	0	0	0	87,587	400,400	0
	(ii)	0	0	0	0	0	0	0
4 RICHARD M HYNE CHIEF FINANCIAL OFFICER	(i)	329,287	0	0	9,150	36,547	374,984	0
	(ii)	0	0	0	0	0	0	0
5 JANET BECKER CHIEF HUMAN RESOURCES AND STRATEGY OFFICER	(i)	305,339	0	15,215	9,150	36,581	366,285	0
	(ii)	0	0	0	0	0	0	0
6 MARC D STERN CHIEF LEGAL OFFICER	(i)	301,903	0	15,003	9,150	35,307	361,363	0
	(ii)	0	0	0	0	0	0	0
7 JASON ISAACSON CHIEF POLICY & POLITICAL AFFAIRS OFFICER	(i)	293,304	0	8,992	9,067	36,572	347,935	0
	(ii)	0	0	0	0	0	0	0
8 ROBERT LEIKIND REGIONAL DIRECTOR, AJC BOSTON	(i)	238,826	0	7,003	7,461	49,490	302,780	0
	(ii)	0	0	0	0	0	0	0
9 DINA SIEGEL VANN DIRECTOR, BILLA	(i)	236,653	0	7,139	7,351	36,021	287,164	0
	(ii)	0	0	0	0	0	0	0
10 MICHAEL GILBERT DIRECTOR REGIONAL OFFICE ADVANCEMENT	(i)	233,529	0	6,909	7,139	32,896	280,473	0
	(ii)	0	0	0	0	0	0	0
11 MELANIE PELL CHIEF FIELD OPERATIONS OFFICER	(i)	250,520	0	876	7,602	3,886	262,884	0
	(ii)	0	0	0	0	0	0	0
12 BELLE YOELI CHIEF ADVOCACY OFFICER	(i)	248,952	0	0	7,519	1,789	258,260	0
	(ii)	0	0	0	0	0	0	0
13 NADINE GREENFIELD-BINSTOCK MANAGING DIRECTOR, LEADERSHIP	(i)	219,430	0	0	6,667	4,550	230,647	0
	(ii)	0	0	0	0	0	0	0
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

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 - Identifier	Explanation
SCHEDULE J, PART I, LINE 1A - FIRST-CLASS OR CHARTER TRAVEL	BUSINESS CLASS AIRLINE TICKETS ARE TYPICALLY BOOKED FOR THE CEO. AJC PAYS FOR ALL THE TRAVEL COSTS OF SPOUSE WHO ACCOMPANIES THE CEO ON AJC TRIPS WHERE HER PRESENCE SERVES A BUSINESS PURPOSE UP TO A TOTAL \$25,000 A YEAR.
SCHEDULE J, PART I, LINE 1A - TRAVEL FOR COMPANIONS	SEE RESPONSES TO LINE 1A ABOVE.
SCHEDULE J, PART I, LINE 4B - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	DURING 2022, PER DAVID HARRIS' CONTRACT, HE RECEIVED A PAYOUT OF \$160,715 FROM HIS SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN. THE BALANCE WAS ACCUMULATED OVER THE CONTRACT PERIOD, FOR ACCOUNTING PURPOSES WAS NOT AN EXPENSE TO AJC IN 2022. THE PAYMENT CONSTITUTED TAXABLE INCOME TO DAVID HARRIS. ALSO IN 2022, PER DAVID HARRIS' CONTRACT, AJC ESTABLISHED A SUPPLEMENTARY EXECUTIVE RETIREMENT PLAN. AS A PORTION OF THE PLAN IS TAXABLE TO DAVID HARRIS EACH YEAR, AJC HAS REMITTED THE AMOUNT OF THE TAXES DUE ON HIS BEHALF, AS IS COMMON PRACTICE, THIS AMOUNT WAS OFFSET AGAINST THE FINAL PAYMENT OF THE PLAN. ACCORDINGLY, SCHEDULE J, PART II, COLUMN B INCLUDES THE 2022 CALENDAR YEAR'S TAXABLE BENEFITS OF \$79,398.
SCHEDULE J, PART II, COLUMN (B)(III) - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	DURING 2022, PER DAVID HARRIS' CONTRACT, HE RECEIVED A PAYOUT OF \$160,715 FROM HIS SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN. THE BALANCE WAS ACCUMULATED OVER THE CONTRACT PERIOD, FOR ACCOUNTING PURPOSES WAS NOT AN EXPENSE TO AJC IN 2022. THE PAYMENT CONSTITUTED TAXABLE INCOME TO DAVID HARRIS. ALSO IN 2022, PER DAVID HARRIS' CONTRACT, AJC ESTABLISHED A SUPPLEMENTARY EXECUTIVE RETIREMENT PLAN. AS A PORTION OF THE PLAN IS TAXABLE TO DAVID HARRIS EACH YEAR, AJC HAS REMITTED THE AMOUNT OF THE TAXES DUE ON HIS BEHALF, AS IS COMMON PRACTICE, THIS AMOUNT WAS OFFSET AGAINST THE FINAL PAYMENT OF THE PLAN. ACCORDINGLY, SCHEDULE J, PART II, COLUMN B INCLUDES THE 2022 CALENDAR YEAR'S TAXABLE BENEFITS OF \$79,398.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN JEWISH COMMITTEE

Employer identification number

13-5563393

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	✓	113	2,168,491	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (.)				
26 Other (.)				
27 Other (.)				
28 Other (.)				

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement	29	0
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	Yes	No
30a		✓
31	✓	
32a		✓
33		

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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

**SCHEDULE O
(Form 990)**

Department of 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 the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the Organization
AMERICAN JEWISH COMMITTEE

Employer Identification Number
13-5563393

Return Reference - Identifier	Explanation
- G. GROSS RECEIPTS	GROSS RECEIPTS REPORTED OF \$194,180,625 IS CALCULATED AS TOTAL REVENUE OF \$68,005,016 PER PART I LINE 12 PLUS RENTAL EXPENSES OF \$248,608, COST BASIS AND SALES EXPENSES FOR INVESTMENTS OF \$124,491,993, AND \$1,435,008 OF DIRECT EXPENSES PER PART VIII.
FORM 990, PART I, LINE 10 - INVESTMENT INCOME	UNREALIZED LOSS OF \$34,698,774 AND UNREALIZED GAIN OF \$15,627,427 IN 2022 AND 2021, RESPECTIVELY WERE INCURRED, BUT ARE NOT REQUIRED TO BE INCLUDED IN THIS LINE.
FORM 990, PART I, LINE 10 - INVESTMENT INCOME	2022 INVESTMENT INCOME OF \$12,865,823 IS \$8,535,615 MORE THAN THE 2021 REPORTED AMOUNT OF \$4,330,208. THIS INCREASE IS LARGELY DUE TO A VARIANCE IN REALIZED GAIN/LOSSES WITH RELATION TO AJC'S INVESTMENT PORTFOLIO BASED ON MARKET PERFORMANCE.
FORM 990, PART III, LINE 4A - PROGRAM SERVICE DESCRIPTION	THROUGHOUT 2022, AJC ADVOCATED TO COUNTER THE MULTIPLE SOURCES OF ANTISEMITISM BY RELEASING ITS ANNUAL STATE OF ANTISEMITISM IN AMERICA REPORT, A "CALL TO ACTION AGAINST ANTISEMITISM IN AMERICA," WHICH PROVIDES THE NECESSARY DATA TO BETTER UNDERSTAND, RESPOND TO, AND PREVENT ANTISEMITISM. THE AGENCY ALSO RALLIED THE UNITED STATES, EUROPEAN AND MIDDLE EAST ALLIES, AND THE INTERNATIONAL COMMUNITY TO UNITE IN ACTION TO DECISIVELY HALT IRAN'S QUEST FOR NUCLEAR WEAPONS, CURTAIL ITS CONVENTIONAL WEAPONS PROGRAM, AND CHECK ITS REGIONAL AGGRESSION AND INTERNAL OPPRESSION.
FORM 990, PART III, LINE 4B - PROGRAM SERVICE DESCRIPTION	IN THE WORLD, AND PROMOTING PLURALISM AND DEMOCRATIC VALUES. MAJOR RESOURCES WERE DEVOTED TO REACHING NEW AUDIENCES THROUGH TRAININGS AND WEBINARS IN THE FIGHT AGAINST ANTISEMITISM AND ADDRESSING GAPS IN HATE CRIME REPORTING IN THE U.S. TO PROTECT COMMUNITIES THAT ARE VICTIMS OF THESE ATTACKS.
FORM 990, PART III, LINE 4C - PROGRAM SERVICE DESCRIPTION	SOCIAL MEDIA ACCOUNTS IN ENGLISH, FRENCH, SPANISH, ARABIC AND GERMAN, AJC INTERACTS FREQUENTLY WITH MILLIONS OF USERS, FROM DIPLOMATS, AND ELECTED OFFICIALS, TO MEDIA ELITES. THEY, IN TURN, SHARE AJC'S ADVOCACY MESSAGES WITH THEIR CONSTITUENCIES, ALLOWING AJC TO REACH AND ENGAGE A WIDE AUDIENCE AROUND THE GLOBE.
FORM 990, PART III, LINE 4D - DESCRIPTION OF OTHER PROGRAM SERVICES	<p>(EXPENSES \$3,707,194 INCLUDING GRANTS OF \$3,750)(REVENUE \$73,616)</p> <p>AJC'S OTHER 2022 PROGRAMMATIC ACTIVITIES INCLUDE: (1) INTERRELIGIOUS AND INTERGROUP RELATIONS: AJC BUILDS COALITIONS WITH LIKE-MINDED PARTNERS TO ADVANCE SHARED INTERESTS AND VALUES, AND TO FURTHER UNDERSTANDING. THE AGENCY FIRMLY BELIEVES THAT THE WELL-BEING OF THE JEWISH COMMUNITY IS LINKED TO THAT OF OTHER FAITH AND MINORITY GROUPS IN THE UNITED STATES AND AROUND THE WORLD.</p> <p>WITH THIS GOAL IN MIND, AJC HAS CONVENED A MUSLIM-JEWISH ADVISORY COUNCIL, A BLACK-JEWISH CONGRESSIONAL COUNCIL, AND A LATINO-JEWISH LEADERSHIP COUNCIL, AMONG OTHER PARTERSHIP BUILDING INITIATIVES; (2) CONTEMPORARY JEWISH LIFE: AJC STRIVES TO STRENGTHEN JEWISH CONTINUITY AND TO ENRICH THE RELATIONSHIP OF JEWS IN THE DIASPORA WITH THE STATE OF ISRAEL, BRIDGING THE GROWING DIVIDE BETWEEN AMERICAN JEWS AND ISRAELI SOCIETY, ENHANCING INTRA-JEWISH RELATIONS, ENRICHING THE QUALITY AND MEANING OF LEADING A JEWISH LIFE, AND RAISING THE KNOWLEDGE LEVEL OF JEWS CONCERNING THE TREASURES OF JUDAIC HERITAGE; (3) YOUNG LEADERSHIP: FROM HIGH SCHOOL AND COLLEGE STUDENTS THROUGH YOUNG PROFESSIONALS, THE ALEXANDER YOUNG LEADERSHIP DEPARTMENT STRIVES TO PROVIDE OPPORTUNITIES FOR YOUNG JEWS TO CONTRIBUTE TO GLOBAL JEWISH ADVOCACY, WHILE RECRUITING AND CULTIVATING THE RISING GENERATION OF AJC LEADERSHIP.</p>
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS	AJC IS A MEMBERSHIP ORGANIZATION UNDER APPLICABLE NEW YORK NONPROFIT CORPORATION LAW, AND THE MEMBERS OF ITS BOARD OF GOVERNORS CONSTITUTES ITS CORPORATE MEMBERSHIP.
FORM 990, PART VI, LINE 7A - MEMBERS OR STOCKHOLDERS ELECTING MEMBERS OF GOVERNING BODY	SEE ABOVE.
FORM 990, PART VI, LINE 7B - DECISIONS REQUIRING APPROVAL BY MEMBERS OR STOCKHOLDERS	SEE ABOVE.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE RETURN WAS PREPARED INTERNALLY AND THEN REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY AJC'S STAFF. THE DRAFT WAS THEN REVIEWED BY AJC'S AUDIT COMMITTEE, AND SUBSEQUENTLY PROVIDED TO AJC'S EXECUTIVE COUNCIL PRIOR TO FILING WITH THE IRS. PURSUANT TO AJC'S BYLAWS, THE EXECUTIVE COUNCIL CONSTITUTES AJC'S BOARD OF DIRECTORS AS THAT TERM IS USED IN THE NEW YORK NOT-FOR-PROFIT CORPORATION LAW.

Return Reference - Identifier	Explanation						
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	AJC HAS WRITTEN CONFLICT OF INTEREST POLICIES COVERING ALL MEMBERS OF THE EXECUTIVE COUNCIL, MEMBERS OF THE INVESTMENT COMMITTEE, OFFICERS, AND EMPLOYEES STIPULATING THAT NO INDIVIDUAL MAY PARTICIPATE IN A DISCUSSION OR DECISION ON ANY MATTER IN WHICH HE OR SHE HAS A MATERIAL FINANCIAL INTEREST, AND HE OR SHE MUST DISCLOSE ANY POTENTIAL CONFLICTS. ALL MEMBERS OF THE EXECUTIVE COUNCIL, OFFICERS, KEY EMPLOYEES WHO HAVE SIGNING AUTHORITY, AND OTHER EMPLOYEES ARE REQUIRED TO CERTIFY COMPLIANCE WITH THE APPROPRIATE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS AND TO INDICATE WHETHER THE ORGANIZATION DOES BUSINESS WITH AN ENTITY IN WHICH THEY HAVE A MATERIAL FINANCIAL INTEREST. RESTRICTIONS IMPOSED ON PERSONS WITH A CONFLICT INCLUDE REFRAINING FROM PARTICIPATING IN DELIBERATIONS AND DISCUSSIONS, AS WELL AS ANY DECISION, RELATING TO THE ALLEGED CONFLICT.						
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	IN 2022, AJC HIRED A COMPENSATION CONSULTANT WHO CONDUCTED A SALARY REVIEW OF CHIEF EXECUTIVE OFFICER COMPENSATION, REVIEWING FAIR MARKET COMPARABLE FOR POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS. THE CHIEF EXECUTIVE OFFICER'S MULTI-YEAR CONTRACT WAS REVIEWED AND APPROVED BY AN INDEPENDENT COMPENSATION COMMITTEE AND SUBSEQUENTLY APPROVED BY THE EXECUTIVE COUNCIL. THE ORGANIZATION MAINTAINS RECORDS REGARDING THE COMPENSATION SETTING PROCESS. COMPENSATION OF OTHER KEY EMPLOYEES FOR THE PAST SEVERAL YEARS HAS BEEN TIED TO THE SALARY INCREASES NEGOTIATED WITH AJC'S LABOR UNIONS, EXCEPT FOR THOSE WHO HAVE RECEIVED PROMOTIONS AND/OR INCREASED RESPONSIBILITIES. ALL DETERMINATIONS OF COMPENSATION ARE CONTEMPORANEOUSLY DOCUMENTED IN WRITING.						
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	IN 2022, SALARIES FOR SENIOR MANAGERS AND KEY EMPLOYEES WERE REVIEWED BY THE EXECUTIVE COMPENSATION COMMITTEE. AJC RETAINED A PROFESSIONAL COMPENSATION FIRM IN 2019 AND PERFORMED A COMPLETE A REVIEW OF RELEVANT SALARIES AND ADOPTED A MULTI-YEAR PLAN FOR ADJUSTING SALARIES OF RELEVANT SENIOR MANAGEMENT. THE REVIEW FROM 2019 WERE PERFORMED AGAIN IN 2022. ALL DETERMINATIONS OF COMPENSATION ARE CONTEMPORANEOUSLY DOCUMENTED IN WRITING.						
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NM, OR, PA, RI, SC, TN, UT, VA, WI, WV						
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	AJC CURRENTLY DOES NOT MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC. AJC CURRENTLY MAKES ITS CONFLICT OF INTEREST POLICY AND WHISTLEBLOWER POLICY AVAILABLE TO THE PUBLIC ON ITS WEBSITE. THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE ALSO AVAILABLE ON ITS WEBSITE AND FORM 990T IS AVAILABLE UPON REQUEST. THE IRS DOES NOT REQUIRE THE PUBLIC DISSEMINATION OF AJC'S IRS FORM 1023 BECAUSE THE ORGANIZATION WAS INITIALLY RECOGNIZED AS TAX EXEMPT IN 1929 AND PUBLIC AVAILABILITY IS NOT REQUIRED WHERE THE ORGANIZATION DID NOT HAVE A COPY OF ITS EXEMPTION APPLICATION ON THE EFFECTIVE DATE OF THE REQUIREMENT IN JULY 1987.						
FORM 990, PART VII, SECTION A -	AJC'S EXECUTIVE COUNCIL SERVES AS ITS FIDUCIARY BOARD.						
FORM 990, PART VII, SECTION A, LINE 1A, COLUMN (D) -	DURING 2022, PER DAVID HARRIS' CONTRACT, HE RECEIVED A PAYOUT OF \$160,715 FROM HIS SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN. THE BALANCE WAS ACCUMULATED OVER THE CONTRACT PERIOD, FOR ACCOUNTING PURPOSES WAS NOT AN EXPENSE TO AJC IN 2022. THE PAYMENT CONSTITUTED TAXABLE INCOME TO DAVID HARRIS. ALSO IN 2022, PER DAVID HARRIS' CONTRACT, AJC ESTABLISHED A SUPPLEMENTARY EXECUTIVE RETIREMENT PLAN. AS A PORTION OF THE PLAN IS TAXABLE TO DAVID HARRIS EACH YEAR, AJC HAS REMITTED THE AMOUNT OF THE TAXES DUE ON HIS BEHALF, AS IS COMMON PRACTICE, THIS AMOUNT WAS OFFSET AGAINST THE FINAL PAYMENT OF THE PLAN. ACCORDINGLY, SCHEDULE J, PART II, COLUMN B INCLUDES THE 2022 CALENDAR YEAR'S TAXABLE BENEFITS OF \$79,398.						
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table border="1" data-bbox="456 1367 1521 1535"> <thead> <tr> <th data-bbox="456 1367 1300 1409">(a) Description</th> <th data-bbox="1305 1367 1521 1409">(b) Amount</th> </tr> </thead> <tbody> <tr> <td data-bbox="456 1415 1300 1493">PENSION AND POSTRETIREMENT CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS REPRESENTS THE NON-CASH CHARGE TAKEN PRIMARILY DUE TO THE INCREASE IN THE DISCOUNT RATE USED IN CALCULATING THE BENEFIT OBLIGATION</td> <td data-bbox="1305 1415 1521 1493">4,737,059</td> </tr> <tr> <td data-bbox="456 1499 1300 1535">CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT</td> <td data-bbox="1305 1499 1521 1535">- 2,498,099</td> </tr> </tbody> </table>	(a) Description	(b) Amount	PENSION AND POSTRETIREMENT CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS REPRESENTS THE NON-CASH CHARGE TAKEN PRIMARILY DUE TO THE INCREASE IN THE DISCOUNT RATE USED IN CALCULATING THE BENEFIT OBLIGATION	4,737,059	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT	- 2,498,099
(a) Description	(b) Amount						
PENSION AND POSTRETIREMENT CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS REPRESENTS THE NON-CASH CHARGE TAKEN PRIMARILY DUE TO THE INCREASE IN THE DISCOUNT RATE USED IN CALCULATING THE BENEFIT OBLIGATION	4,737,059						
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT	- 2,498,099						
GENERAL NOTE -	IN GENERAL, NUMBERS IN THIS FORM 990 AND AJC'S ANNUAL FINANCIAL AUDIT REPORT ARE IDENTICAL. HOWEVER, IN A FEW PLACES, THERE ARE NON-MATERIAL DIFFERENCES BASED ON DIFFERENCES BETWEEN THE STANDARDS OF THE ACCOUNTING PROFESSION FOR A FINANCIAL REPORT, AND THE INQUIRIES ON THE FORM 990.						
PAGE 1 - F - NAME OF PRINCIPAL OFFICER	THEODORE (TED) DEUTCH SUCCEEDED DAVID HARRIS AS CEO ON OCTOBER 1, 2022. AJC ENTERED INTO AN EMPLOYMENT CONTRACT WITH MR DEUTCH.						
PART I SUMMARY - LINE 13 GRANTS AND SIMILAR AMOUNTS PAID	GRANTS PAID IN 2022 TOTALING \$2,998,012 IS \$2,414,541 GREATER THAN THE AMOUNT REPORTED IN 2021 WHICH EQUALED \$583,471. THIS INCREASE IS PRIMARILY DUE TO GRANTS PROVIDED IN SUPPORT OF RELIEF EFFORTS FOR THE PEOPLE OF UKRAINE DURING 2022.						
PART X - BALANCE SHEET - LINE 1 - CASH - NON-INTEREST BEARING	DURING 2022, AJC'S CASH BALANCE DECLINED BY \$4,320,463 FROM \$39,386,738 DOWN TO \$35,066,275. WHILE REVENUE EXCEEDED EXPENSES BY \$5,973,309 IN 2022 WHICH TYPICALLY RESULTS IN INCREASED CASH, \$9,425,000 OF CASH WAS INVESTED TO SEEK HIGHER RETURNS, WHICH MORE THAN OFFSET THE SURPLUS.						

Return Reference - Identifier	Explanation
PART X - BALANCE SHEET - LINE 32 - TOTAL NET ASSETS	TOTAL NET ASSETS OF \$244,532,998 AT DECEMBER 31, 2022 IS \$26,486,505 LESS THAN THE AMOUNT OF \$271,019,503 REPORTED AT DECEMBER 31, 2021. THIS DECLINE IS LARGELY DRIVEN BY DECLINES IN THE FAIR MARKET VALUE OF INVESTMENTS DURING 2022 DUE TO MARKET CONDITIONS.
PART X BALANCE SHEET - LINE 15 OTHER ASSETS AND LINE 25 OTHER LIABILITIES	IN FEBRUARY 2016, THE FASB ISSUED ASU 2016-02, LEASES. THIS ASU REQUIRE LESSEES TO RECOGNIZE ALMOST ALL LEASES ON THE BALANCE SHEET AS A RIGHT-OF-USE ASSET AND A LEASE LIABILITY. FOR STATEMENT OF ACTIVITY PURPOSES, THE FASB RETAINED A DUAL MODEL, REQUIRING LEASES TO BE CLASSIFIED AS FINANCE LEASES OR OPERATING LEASES. THIS UPDATE IS EFFECTIVE FOR AJC'S FISCAL YEAR BEGINNING JANUARY 1, 2022, AND WAS ADOPTED WITH AJC'S FINANCIAL STATEMENTS AND FORM 990 FOR 2022. THE IMPACT WAS THE RECOGNITION OF A RIGHT-OF-USE ASSET TOTALING \$7,696,521 APPEARING ON PART X - BALANCE SHEET - LINE 15 - OTHER ASSETS AND LEASE OBLIGATIONS TOTALING \$8,536,021 APPEARING ON PART X - BALANCE SHEET - LINE 25 - OTHER LIABILITIES.
SCHEDULE D - PART X - LINE 1 - (2)	IN JULY 2023 AJC APPROVED A PLAN TO REDUCE THE UNFUNDED LIABILITY ASSOCIATED WITH THE DEFINED BENEFIT PENSION PLAN. AJC WILL OFFER ELIGIBLE PENSION PLAN PARTICIPANTS IN SEPTEMBER 2023 A ONE-TIME OPPORTUNITY TO RECEIVE LUMP SUM PAYMENTS THAT SATISFY THE LIABILITY OF THE PLAN FOR THOSE PARTICIPANTS. THE LUMP SUM OFFER, WHICH WILL BE COMPLETED BY DECEMBER 31, 2023, SHALL CONFORM IN ALL RESPECTS TO THE REQUIREMENTS OF THE EMPLOYMENT RETIREMENT INCOME SECURITY ACT (ERISA).
SCHEDULE D, PART V - LINE 1C	2022 NET INVESTMENT LOSSES OF \$21,422,690 IS \$38,896,380 LESS THAN THE 2021 REPORTED AMOUNT OF \$17,473,690. THIS DECREASE IS LARGELY DUE TO A VARIANCE IN GAIN/LOSSES WITH RELATION TO AJC'S INVESTMENT PORTFOLIO BASED ON MARKET PERFORMANCE.
SCHEDULE D, PART VII - LINE 3 A THROUGH D	INVESTMENTS ARE NOT READILY MARKETABLE AND ARE REPORTED AT FAIR VALUE BASED ON NET ASSET VALUE, AS A PRACTICAL EXPEDIENT, PROVIDED BY THE FUND MANAGERS.
SCHEDULE R, PART II -	THE FORM 990 INCLUDES ALL ACTIVITY OF OUR FOREIGN AFFILIATES SINCE THE ACTIVITIES ARE CONDUCTED SOLELY BY EMPLOYEES OF FOREIGN AFFILIATES WHICH EXIST AS FLOW-THROUGH ENTITIES FOR PURPOSES OF ACTING WITHIN THE FOREIGN COUNTRIES. IN ADDITION, SHOWING ALL ACTIVITY PROVIDES A MORE ACCURATE AND COMPLETE PICTURE OF AJC AND ENHANCES THE TRANSPARENCY OF OUR REPORTING AS OPPOSED TO REPORTING ONLY OUR U.S. ACTIVITIES. FOR EACH OF AJC'S FOREIGN AFFILIATES, AJC HAS CONTRACTED WITH LOCAL ACCOUNTING FIRMS TO COMPILE FINANCIAL INFORMATION AND PREPARE LOCAL REGULATORY FILINGS. ALL RECORDS ARE MAINTAINED IN THE UNITED STATES. ADDITIONALLY, PERIODICALLY, AJC STAFF IN THE FINANCE, LEGAL AND ADMINISTRATIVE AREAS VISIT THE FOREIGN OFFICES TO REVIEW INTERNAL CONTROLS AND MONITOR COMPLIANCE WITH LOCAL REGULATIONS.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN JEWISH COMMITTEE

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

2022

Open to Public Inspection

Employer identification number

13-5563393

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) INSTITUTE OF HUMAN RELATIONS (23-7389215) 165 EAST 56TH STREET, NEW YORK, NY 10022	SUPPORTING ORGANIZATION	NY	501(C)(3)	12	AJC	✓	
(2) TRANS-ATLANTIC INSTITUTE AVENUE DES ARTS, 43-6 EME ETAGE (6, BRUXELLES, 1040, BE	ADVOCACY	BELGIUM			AJC	✓	
(3) AJC BERLIN LEIPZIGER PLATZ 15, BERLIN, 10117, GM	ADVOCACY	GERMANY			AJC	✓	
(4) FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE MYSIEJ 5, WARSAW, 00-496, PL	ADVOCACY	POLAND			AJC	✓	
(5) AJC FRANCE 5 BIS CIRQUE, PARIS, 75008, FR	ADVOCACY	FRANCE			AJC	✓	
(6) AJC JERUSALEM MESILAT YESHARIM 11, JERUSALEM, 91370, IS	ADVOCACY	ISRAEL			AJC	✓	
(7) AJC ABU DHABI 711 AL KHATEM TOWER, ABU DHABI GLOB, ABU DHABI, AE	ADVOCACY	UNITED ARAB EMIRATES			AJC	✓	

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

Cat. No. 50135Y

Schedule R (Form 990) 2022

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

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

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

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

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
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)		✓

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) AJC JERUSALEM	B	1,983,531	FMV
(2) AJC BERLIN	B	1,101,593	FMV
(3) AJC FRANCE	B	1,097,122	FMV
(4) TRANS-ATLANTIC INSTITUTE	B	599,470	FMV
(5) FUNDAJCA AMERICAN JEWISH COMMITTEE CENTRAL EUROPE	B	296,036	FMV
(6)			

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

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

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

Part IV**Identification of Related Organizations Taxable as a Corporation or Trust** (continued)

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUSTS (2) OLD WESTBURY, OLD WESTBURY, NY 11568	INVESTMENT	NY	AJC	TRUST				✓	
(2) CHARITABLE REMAINDER TRUST DELRAY BEACH, DELRAY BEACH, FL 33446	INVESTMENT	FL	AJC	TRUST				✓	

Tax Exempt Entity Declaration and Signature for Electronic Filing

For calendar year 2022, or tax year beginning 12/31, 2022, and ending 12/31, 2022

2022

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP
Go to www.irs.gov/Form8453TE for the latest information.

Name of filer

AMERICAN JEWISH COMMITTEE

EIN or SSN

13-5563393

Part I Type of Return and Return Information

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	68,011,015
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration of Officer or Person Subject to Tax

- 11a I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- b If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named entity or I am the person subject to tax with respect to (name of entity) _____, (EIN) _____,

and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Richard Nyno | 10.13.23 | CFO
Here Signature of officer or person subject to tax Date Title, if applicable

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

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

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

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	DANIEL ROMANO	<u>[Signature]</u>	10.13.23		P00504182
	Firm's name	GRANT THORNTON LLP		Firm's EIN	36-6055558
	Firm's address	757 THIRD AVENUE, 3RD FLOOR, NEW YORK, NY 10017-2013		Phone no.	(212) 599-0100