efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Return of Organization Exempt From Income Tax

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

DLN: 93493283010018 OMB No 1545-0047

Open to Public Inspection

Department of the Treasure Internal Revenue Service

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

For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017 Name of organization WORLD JEWISH CONGRESS AMERICAN SECTION INC D Employer identification number B Check if applicable ☐ Address change 13-1790756 % CHAIM REISS ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) ☐ Amended return 501 MADISON AVENUE ☐ Application pending (212) 755-5770 City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10022 G Gross receipts \$ 29,103,828 F Name and address of principal officer H(a) Is this a group return for Betty Ehrenberg ☐Yes ☑No subordinates? 501 MADISON AVENUE H(b) Are all subordinates NEW YORK, NY 10022 ☐ Yes ☐No included? Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► www worldjewishcongress org/aff_american html L Year of formation 1950 M State of legal domicile NY Summary 1 Briefly describe the organization's mission or most significant activities See attachment 1 Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 29 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 0 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) . . . 6 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 ${f b}$ Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 22,489,205 24,620,951 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) 157,959 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 81.673 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 48,818 30,549 22,619,696 24,809,459 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 15,752,000 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 14,119,000 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1,026,639 1,335,899 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 390,000 390,000 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶2,107,220 **17** Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . 3,303,090 5,638,119 20,471,729 21,483,018 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,147,967 3,326,441 19 Revenue less expenses Subtract line 18 from line 12 . Assets or d Balances **End of Year Beginning of Current Year** 13,312,255 9.974.539 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 244,768 279,248 9,729,771 13,033,007 22 Net assets or fund balances Subtract line 21 from line 20 .

Part III Signature Block

Under penalties of perjury, I declare that I have examined this return, inclu-knowledge and belief, it is true, correct, and complete Declaration of prepa any knowledge

Sian Here

Signature of officer CHAIM REISS CFO Type or print name and title Print/Type preparer's name CANDICE METH Preparer's signature CANDICE METH

Paid **Preparer Use Only** Firm's address ► 750 THIRD AVENUE NEW YORK, NY 100172703

May the IRS discuss this return with the preparer shown above? (see instru

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2017)					Page 2
Par	t IIII Statement	of Program Servi	ce Accomplis	hments		
	Check If Sche	dule O contains a resp	onse or note to a	any line in this Part III		🗹
1		organization's mission				
REPR AROL WOR	ESENTING JEWISH CO JND THE WORLD THE K FOR HUMAN RIGHTS	DMMUNITIES IN THE US MISSION OF THE WIC S, TOLERANCE, COMBA	SA ÁND IS THE Y : AMERICAN SEC .T RACISM AND /	VOICE OF THE PRÉMIER TION IS TO SUPPORT T	IAN RIGHTS, AND ADVOCACY ORG GLOBAL JEWISH UMBRELLA FOR HE AIMS OF THE WORLD JEWISH DVOCATE FOR JEWISH COMMUNI NIZATIONS	JEWISH COMMUNITIES CONGRESS, AND TO
2	Did the organization	undertake any significa	ant program ser	vices during the year wh	nich were not listed on	
		or 990-EZ? ese new services on Sc				☐ Yes ☑ No
3	services?	cease conducting, or n		changes in how it condu	cts, any program	☐ Yes ☑ No
4	Describe the organiz Section 501(c)(3) ar	ation's program service	e accomplishmer ons are required	to report the amount o	largest program services, as meas f grants and allocations to others,	
4a	(Code See Additional Data) (Expenses \$	12,963,574	including grants of \$	10,589,250) (Revenue \$)
4b	(Code See Additional Data) (Expenses \$	783,187	ıncludıng grants of \$	705,950) (Revenue \$)
4 c	(Code See Additional Data) (Expenses \$	3,771,690	ıncludıng grants of \$	1,411,900) (Revenue \$)
	(Code Academic, Cultural, and) (Expenses \$ Youth	1,548,140	ıncludıng grants of \$	1,411,900) (Revenue \$)
4d	Other program servi	ces (Describe in Sched 1,548,140 inc	ule O) luding grants of	\$ 1,411.9	00) (Revenue \$)
4e	Total program ser	<u> </u>	19,066,5	<u> </u>		<u> </u>

Part IV Checklist of Required Schedules

Page 3

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Nο

Form **990** (2017)

Yes

Yes

Yes

Yes

Yes

Yes

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12a

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

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

5 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 💆 . . .

6 7 9

Did the organization maintain collections of works of art, historical treasures, or other similar assets? 8 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable

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

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

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

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

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

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🟂

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

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

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

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

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

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

13 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . 14a business, investment, and program service activities outside the United States, or aggregate foreign investments

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

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

14h 15

foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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

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

29

Part IV Checklist of Required Schedules (continued) Yes 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a No

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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 If "Yes,

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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

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

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

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

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

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

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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

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

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

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

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

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

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

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

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

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

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

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20b

Page 4

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Yes

Form 990 (2017)

Yes

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

	990 (2017)			Page 5
Par	t 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	٠,		<u> </u>
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 9			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
Č	The state of the state of guille and the organization me form occor in the first of the state of	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			orm 00	0 (2017)

Ollin	330 (2017)			Page 0
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No	" respo	nse to li	nes
	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			✓
Se	Check if Schedule O contains a response or note to any line in this Part VI			
<u> </u>	Ction A. Governing body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year label 1a 29			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 29			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
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?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
112	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	10b		
	form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	12b	Yes	
12	Schedule O how this was done	12c	Yes Yes	
13 14	Did the organization have a written whistleblower policy?	14	Yes	
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?	14	162	
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
_				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	4.5,		
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		_
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , FL , GA , MD , MA , MI , MN , MS , NV , NH , NJ , N	HI , IL M , NY	, NC , N	
Se	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , FL , GA , , MD , MA , MI , MN , MS , NV , NH , NJ , N , OK , OR , PA , RI , SC , TN , UT , VA , WA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)	HI , IL M , NY	, NC , N	
S e	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , FL , GA , , MD , MA , MI , MN , MS , NV , NH , NJ , N , OK , OR , PA , RI , SC , TN , UT , VA , WA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available.	HI , IL M , NY	, NC , N	
S e	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , FL , GA , , MD , MA , MI , MN , MS , NV , NH , NJ , N , OK , OR , PA , RI , SC , TN , UT , VA , WA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O). Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest.	HI , IL M , NY	, NC , N	
Se 17 18	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , FL , GA , , MD , MA , MI , MN , MS , NV , NH , NJ , N , OK , OR , PA , RI , SC , TN , UT , VA , WA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)	HI , IL M , NY	, NC , N	

Form 990 (2	2017)										Page 7
Part VII			Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part VI	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
year .	·		•	•							
of compens	ation Enter -0- in columns (D), (E), and (F) if no	compe	nsatı	on w	as p	paid			-	
	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										
who receive	ed reportable compensation (Box										
							pensat	ed e	employees who rece	ved more than \$10	0,000
											2
			ectors,	ınstıtı	ution	nal t	rustee	s, of	ficers, key employe	es, highest	
Check 1	this box if neither the organizatio	n nor any relate	d organ	nzatio	on co	omp	ensate	d ar	y current officer, di	rector, or trustee	
(A) Name and Title (B) Average hours per week (list any hours (B) Average hours per week (list any hours (B) Average hours per week (list any hours (C) (C) (D) (E) Reportable compensation from the organization with compensation from the organization (W-2/1090-MISC) (W-2/1090-MISC)											
		below dotted	some or note to any line in this Part VII s, Key Employees, and Highest Combe listed Report compensation for the calend directors, trustees (whether individuals or or id (F) if no compensation was paid loyees, if any See instructions for definition of impensated employees (other than an officer, orm W-2 and/or Box 7 of Form 1099-MISC) of the experimental organizations or trustees that received, in the capacity and any related organization and any release or directors, institutional trustees, office or trustees or directors, institutional trustees, office organization compensated any compensated organization compensated and compensated organization compensated organization compensated	2/1099-MISC)							
See Addition	al Data Table										
							i .				

ARLINGTON, VA 22209

90 COMMERCE DRIVE ASTON, PA 19014 Foremost Caterers Inc,

65 Anderson Avenue MOONACHIE, NJ 07074 ZIP Mailing Services,

6304 Sheriff road LANDOVER, MD 20785 MDI Imaging Mail,

21955 Cascades Parkway

compensation from the organization ▶ 10

Action Mailing Inc,

Name and Title

Average

hours per

week (list

Part VII

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

amount of other

compensation

Page 8

271,448

211,041

208,067

188,263

Form **990** (2017)

							ation (W-	organizations (from				
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/109	9-MISC)	2/1099-MISC		organizati relati organiza	ed
See	Addıtıonal Data Table													
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1b.	Sub-Total						<u> </u> ▶					十		
	Fotal from continuation sheets to Pa			•			•					+		
d	Total (add lines 1b and 1c)						▶		-	729,619		0		166,043
2	Total number of individuals (including of reportable compensation from the			e list	ed a	bove	e) who	rec	eived mo	re than \$1	00,000			
													Yes	No
3	Did the organization list any former of			ee, k	ey e	mple	oyee,	or hi	ghest cor	npensated	employee on			
	line 1a? <i>If "Yes," complete Schedule 3</i>	for such individ	dual .	•	•	•		•				3		No
4	For any individual listed on line 1a, is organization and related organization										the			
	individual	• • • •	• •	•	•	•	·	•	· · ·	• •		4	Yes	
5	Did any person listed on line 1a receiv	e or accrue cor	npensal	tion fi	rom	any	unrela	ated	organizat	ion or indi	vidual for	•	1 100	
	services rendered to the organization	PIf "Yes," compi	ete Sch	edule	J fo	or su	ıch pei	rson				5		No
Se	ection B. Independent Contract	ors											'	
1	Complete this table for your five high- from the organization Report comper											npens	sation	
	<u> </u>	(A) ind business addre									(B) ription of services		(C Compen	
1600	man Cubine Adams Hussy, Wilson Blvd	Dusiness dudit								Fundraising/	•		соттрет	390,000

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

Position (do not check more

than one box, unless person

is both an officer and a

Reportable

compensation

from the

mailing

catering

mailing

mailing

Reportable

compensation

from related

Part \		t of Revenue	2 rosno	enco or noto to any	line in this Bart VII	т		
	Check II Scr	ledule O contains	a respo	inse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
10	1a Federated cam	paigns	1a			revenue		512-514
ants	b Membership di	ues	1b					
5.5 F 0 F 1	c Fundraising ev	ents	1c	1,817,137				
#S, FA	d Related organi	zations	1d					
:5 <u>≅</u>	e Government gran	nts (contributions)	1e					
Contributions, Gitts, Grants and Other Similar Amounts	f All other contribution and similar amount above	tions, gifts, grants, ints not included	1f	22,803,814				
ontrib nd Oth	g Noncash contri in lines 1a-1f \$			6,095				
	h Total.Add lines	la-ir	• •	 -	24,620,951			
표	2a			Business	Code			
상			_					
ر د ۳	ь ———							
Ę	d —							
S E	e ———							
Program Service Revenue	f All other progra	m service revenue	=					
ĕ	gTotal.Add lines 2	2a-2f	. 1	•	0			
	3 Investment incon				80,74	2		80,74
	similar amounts) 4 Income from inve			and proceeds		0		00,742
	5 Royalties		-			0		
		(ı) Rea		(II) Personal	<u> </u>			
	6a Gross rents							
	b Less rental exper	nses			-			
	c Rental income or (loss)		0	'	0			
	d Net rental incor	me or (loss) .			1	0		
		(ı) Securi	ties	(II) Other				
	7a Gross amount from sales of	4,	156,095					
	assets other than inventory		·					
	b Less cost or				-			
	other basis and sales expenses	4,	078,878					
	C Gain or (loss)		77,217]			
	d Net gain or (los	•		•	77,21	7		77,217
	8a Gross income from (not including \$							
듄	contributions re	ported on line 1c)	. a	215 401				
e v	b Less direct exp		ŀ	215,491	_			
7	c Net income or (_ L	<u> </u>	_			
Other Revenue	9a Gross income fr		ies	<u> </u>				
0	See Part IV, line	19	a	0				
	b Less direct exp	enses	b	0	_			
	c Net income or (L	es >	_	О		
-	10aGross sales of ir			•				
	returns and allo	wances	a	0				
	b Less cost of go	ods sold	Ь	0	-			
	c Net income or (ı f ınvent	ory >	_	О		
	Miscellan	eous Revenue		Business Code				
	11a _{LIST} SALES			90009	9 30,54	9		30,549
	ь							
	С							
	d All other revenu							
	e Total. Add lines			•	30,54	9		
_	12 Total revenue.	See Instructions		• • • •	24,809,45	9		188,508
						•	•	Farma 000 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses	-l All ables a sure		lata asluman (A)	
Section 501(c)(3) and 501(c)(4) organizations must complete all co	_	·	nete column (A)	
Check if Schedule O contains a response or note to any	/ line in this Part IX	(B)	(C)	<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	14,119,000	14,119,000		
2 Grants and other assistance to domestic individuals See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	0			
4 Benefits paid to or for members	0			_
5 Compensation of current officers, directors, trustees, and key employees	0			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	1,013,487	707,830	165,042	140,615
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	61,393	42,881	9,996	8,516
9 Other employee benefits	185,749	129,726	30,250	25,773
10 Payroll taxes	75,270	52,570	12,257	10,443
11 Fees for services (non-employees)				
a Management	0			
b Legal	0			
c Accounting	28,001	19,556	4,560	3,885
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	390,000			390,000
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	89,599	62,577	14,591	12,431
12 Advertising and promotion	0			
13 Office expenses	45,900	32,058	7,474	6,368
14 Information technology	0			
15 Royalties	0			
16 Occupancy	201,084	140,439	32,746	27,899
17 Travel	416,537	411,457	2,743	2,337
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •	0			
19 Conferences, conventions, and meetings	1,838,532	1,824,398	7,633	6,501
20 Interest	0			
21 Payments to affiliates	0			

81,706

1,430,363

6,909

2,650

2,471

19,066,591

1,430,363

19,051

1,611

618

635

309,207

16,231

1,453,914

1,372

526

409

2,107,220

1,843,914

Form **990** (2017)

116,988

2,884,277

9,892

3,794

3,515

21,483,018

3,274,277

0

22 Depreciation, depletion, and amortization

b BOOKS,SUBCRIPTIONS,& MEMBERSH

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ✓ If following SOP 98-2 (ASC 958-720)

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

23 Insurance . . .

expenses on Schedule O)

c PRINTING AND PUBLICATION

a DIRECT MAIL COSTS

d MISCELLAENOUS

e All other expenses

11

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15

16

17

18

19

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34

iabilities 22

Fund Balances

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Assets 31

Net

Page **11**

1.442.971

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279,248

11.486.235

1,446,772

13,033,007

13.312.255 Form **990** (2017)

100.000

105,747

336.935

5.125.636

13.312.255

279.248

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9.974.539

230.401

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0

0 24

14.367

244.768

8.722.266

907.505

100,000

9,729,771

9.974.539

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

Investments—publicly traded securities .

Intangible assets

Accounts payable and accrued expenses

Grants payable . . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

Investments—other securities See Part IV, line 11 . . .

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

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties

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

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

check here ▶ 🔲 and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

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

Loans and other payables to current and former officers, directors, trustees,

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

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

Investments—program-related See Part IV, line 11

Other assets See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

	(A) Beginning of year		(B) End of year
Cash-non-interest-bearing	3,858,208	1	3,737,822
2 Savings and temporary cash investments	4,523,560	2	2,548,498

2 Savings and temporary cash investments . . 903.942 3 3 Pledges and grants receivable, net . 8.468 4 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 0 5 II of Schedule L Loans and other receivables from other disqualified persons (as defined under

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 0 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Assets 0 Notes and loans receivable, net . . Inventories for sale or use 0 8 136,661 Prepaid expenses and deferred charges . 9 10a Land, buildings, and equipment cost or other 10a 785.178 basis Complete Part VI of Schedule D 448,243 442.378 10b 10c **b** Less accumulated depreciation

Page **12**

No

Nο

Form 990 (2017)

2a

2b

2c

3а

3b

Yes

Yes

3	Revenue less expenses Subtract line 2 from line 1	3	3,326,441
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,729,771
5	Net unrealized gains (losses) on investments	5	-23,205
6	Donated services and use of facilities	6	

7 Investment expenses . 8 Prior period adjustments . .

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

Consolidated basis

Consolidated 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 compiled or reviewed on a

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

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

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

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

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

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

Form 990 (2017)

Schedule O

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

Other changes in net assets or fund balances (explain in Schedule O) . 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10

13,033,007 **Financial Statements and Reporting** Check if Schedule O contains a response or note to any line in this Part XII . . .

Yes No

Part XII ☐ Cash ☑ Accrual ☐ Other **1** Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in

Both consolidated and separate basis

Both consolidated and separate basis

Additional Data

Software ID:

Software Version:

EIN: 13-1790756

Name: WORLD JEWISH CONGRESS AMERICAN SECTION INC.

Form 990 (2017)

Form 990, Part III, Line 4a:

INTERNATIONAL AFFAIRS - ATTENDED CONFERENCES AND MEETINGS TO DISCUSS CURRENT TOPICS OF INTERNATIONAL IMPORTANCE HELD CONFERENCES AND ATTENDED MEETINGS TO DISCUSS THE RISE OF ANTI-SEMITISM IN EUROPE, THE CURRENT SITUATION IN THE MIDDLE EAST, AND IMPORTANT DEVELOPMENTS IN THE UNITED NATIONS MET WITH INTERNATIONAL GOVERNMENTAL OFFICIALS, INTERNATIONAL INTERFAITH LEADERSHIP, WORLD JEWISH LEADERSHIP, AND REPORTED ON

PUBLIC AFFAIRS TOPICS AS PERTAINING TO THE UNITED STATES AND NORTH AMERICA

Form 990, Part III, Line 4b: ORGANIZATIONAL AND INTER-RELIGIOUS AFFAIRS - THE WIC AMERICAN SECTION SERVES AS A COORDINATING AND RESOURCE BODY FOR MANY JEWISH

THE JEWISH COMMITTEE FOR INTERRELIGIOUS CONSULTATIONS (IJCIC), A CONSORTIUM OF JEWISH ORGANIZATIONS THAT WORK TOGETHER WITH THE VATICAN, THE

JEWISH AND CHRISTIAN COMMUNITIES

WORLD COUNCIL OF CHURCHES, AND MODERATE MUSLIM ORGANIZATIONS TO INCREASE MUTUAL UNDERSTANDING AND WORK TOWARDS PEACEFUL CO-EXISTENCE WJC PREVIOUSLY SERVED AS CHAIR OF IJCIC AND IN OTHER OFFICIAL CAPACITIES. PARTICIPATED IN ITS INTERNATIONAL LIAISON COMMITTEE MEETING IN PARIS.

FRANCE, MADRID SPAIN, AND IN WARSAW, POLAND, AND IN HIGH LEVEL INTERFAITH MEETINGS IN GENEVA, BRUSSELS, LONDON, AND IN THE UNITED NATIONS SYMPOSIUM ON THE 50TH ANNIVERSARY OF THE SECOND VATICAN COUNCIL. HELD SYMPOSIA IN NEW YORK WITH EXPERT SPEAKERS AND NOTABLE LEADERS OF THE

ORGANIZATIONS AND PROVIDES MUCH OPPORTUNITY FOR INTERACTION, COOPERATION, AND INTEGRATION IN THE COMMUNITY WJC IS A MEMBER ORGANIZATION OF

Form 990, Part III, Line 4c:

ACTIVITIES, ANALYSES OF TIMELY ISSUES AS WELL AS OPINION PIECES AND PRESS ITEMS THAT PERTAIN TO THE RISE OF ANTI-SEMITISM. THE IRANIAN THREAT.

PUBLIC INFORMATION - DISSEMINATE INFORMATION TO THE JEWISH COMMUNITY ISSUED PERIODICAL PRESS RELEASES. REPORTS AND WEEKLY SUMMARIES OF

ISSUES AFFECTING ISRAEL AND THE MIDDLE EAST, AND JEWISH COMMUNITY NEWS

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

	any hours					omce (ustee		organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Rabbı Joel Meyers	5 0	Х		х				0	0	0
Chairman	0.0									
Gail Perl	2 0	×		×				0	0	0
Vice Chair	0.0									
Jeffrey Wiesenfeld	2 0	x		х				0	0	0
Treasurer	0.0									
Cheryl Fishbein	2 0	X						0	0	0
Governing Board		'`	l	l				l ĭl	ľ	ľ

vice citali	0 0					
Jeffrey Wiesenfeld	2 0	×	x		0	
Treasurer	0 0					
Cheryl Fishbein	2 0	×			n	
Governing Board	0 0				Ĭ	
Dr Gerald Platt	2 0	V				

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and Independent Contractors

Governing Board

Governing Board

Governing Board

Governing Board

Governing Board

Governing Board

Fran Hirmes

Cheryl Bier

Eli Hertz

Florence Tatistcheff

Sam Bloch

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

and Independent Contractors

Governing Board

Rabbi Mark Dratch

Governing Board

Governing Board

Governing Board

Governing Board

Governing Board

David Drimmer

Governing Board

Jeanette Schechter

Dr David Moskovits

Rabbi Daniel Polish

Rabbi Joseph Karasick

	any hours	any hours and a director/trustee)							organizations	from the
	for related organizations below dotted line)		Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Joan Lurie Goldberg Governing Board	2 0	×						0	0	0
Rositta Kenigsberg Governing Board	2 0	×						0	0	0
Harold Cohen Governing Board	2 0	×						0	0	0
Rabbi Sholom Rephun	2 0							0	0	0

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

and Independent Contractors

Russell Robinson

Governing Board

Rodrigo Slelatt

Gloria Landy

Secretary

Governing Board

Evelyn Sommer

Governing Board

Betty Ehrenberg

Executive Director

	any hours	and a director/trustee)						organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Robert Fagenson Governing Board	2 0	х						0	0	0
Robert Fisher Governing Board	2 0	x						0	0	0
Richard Janvey Governing Board	2 0	х						0	0	0
Judith Menikoff	2 0									

Richard Janvey	2 0	.,					
Governing Board	0.0	×			0	0	
Judith Menikoff	2 0	×	Х		n	0	
Associate Treasurer	0.0		^				
Barrie Modlin	2 0	.,					
Governing Board	0.0	×			ا	٥	

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14,421

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and Independent Contractors (A) (C) (D) (E) (B) Name and Title Position (do not check more Reportable Reportable Estimated

(F)

2,118

103,564

wanie and Tide	hours per week (list any hours	pers	an on on Is	e bo both	x, u 1 an	inless office ustee	er	compensation from the organization	compensation from related organizations	amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated emptoxies	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Chaim Reiss Chief Financial Officer	20 0			х				0	0	0
Randı Dubno Gardner Dırector Dr Development	40 0					x		164,159	0	47,755
Janice Wolpo Dir Campaign Relations/Comm	40 0					х		144,981	0	49,137
Cheryl Bailes Dir of Direct Mail Fundraising	40 0					х		110,006	0	43,819
Anna Berefeld Donor Relations & S Gifts Off	40 0 0 0					х		111,807	0	8,793
Bonnie Biondi	40 0									

0 0

Director of Major Gifts

efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493283010018
SCI	HED m 990	ULE A		Public (Charity Staturganization is a sect	ion 501(c)(3) o empt charitable	organization or trust.	ort	2017
•		the Treasury	▶ Info	ormation abou	► Attach to Form It Schedule A (Form			ictions is at	Open to Public Inspection
Nam	e of th	nie Service he organiza SH CONGRESS	tion AMERICAN SE	TION INC	www.n 3.g	<u> </u>		Employer identific	
								13-1790756	
	rt I				us (All organization it is (For lines 1 thro			See instructions.	
1					sociation of churches			(A)(i).	
2		•		·	1)(A)(ii). (Attach Sch				
3					vice organization desc	•	• •		
4		•	•	•	ed in conjunction with			•	ator the beenital's
7	Ш		and state _	nization operati	ed in conjunction with	a nospital descri	bed in Section .	170(D)(1)(A)(III). E	ter the hospital's
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170
6		,	·	-	governmental unit de				
7	\checkmark			mally receives (vi). (Complete	a substantıal part of ıt Part II)	s support from a	governmental u	init or from the genera	al public described in
8					170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10		from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ation organize	ed and operated	l exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	l exclusively for the be described in section 5 the type of supporting	09(a)(1) or se (ction 509(a)(2). See section 509(a	
а		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or c appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting o nt of the sup	rganization sup porting organiza	ervised or controlled i ation vested in the sar				
С		Type III f	unctionally i		supporting organizatio ons) You must com				ted with, its
d		Type III n	on-function integrated	ally integrate The organizatio	d. A supporting organ n generally must satis t IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported orgar	` '
e		Check this	, box if the org	anızatıon recei	, ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Ento			on-functionally lorganizations	integrated supporting	organization			
g				-	ipported organization(c)		_	
		Name of support	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	e of (iv) Is the organization listed tion in your governing document? (see instructions) (vi other (see instructions)			
						Yes	No		
Tota		want Dade	Lian A-L NI-	inn north 7	structions for	Cat No 11285	<u> </u>	Sahadula A /F 0	90 or 990-EZ) 2017

(b)(1)(A)(ix)(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

_	Section A. Public Support	ans to quanty ur	idel tile tests lis	ted below, pieds	se complete ran			
	Calendar year							
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2	1017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not	18,423,520	18,936,374	20,270,350	22,489,205	2.	4,620,951	104,740,400
2	Include any "unusual grant ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							C
3	The value of services or facilities furnished by a governmental unit to							C
4	Total. Add lines 1 through 3	18,423,520	18,936,374	20,270,350	22,489,205	2,	4,620,951	104,740,400
	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	20,120,020	20,200,00	20,210,000	22,100,200		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	55,461,575
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from line 4							49,278,825
S	ection B. Total Support							
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d) 2016	(e)2	:017	(f) Total
7		18,423,520	18,936,374	20,270,350	22,489,205	2	4,620,951	104,740,400
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties	1,711	1,397	13,054	23,645	80,742		120,549
9	and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on							C
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	27,526	40,582	25,516	48,818	48,818 30,549		172,991
11	Total support. Add lines 7 through 10)			1.5		105,033,940
	Gross receipts from related activities,					12		
13	First five years. If the Form 990 is for	-			•		· / · / <u>-</u>	
	check this box and stop here						<u>▶∟</u>	<u> </u>
	ection C. Computation of Publi							
	Public support percentage for 2017 (li			olumn (f))		14		46 917 %
	Public support percentage for 2016 Sc					15		49 319 %
16 a	33 1/3% support test—2017. If the	organization did	not check the box	on line 13, and lin	e 14 is 33 1/3% oi	r more, c	heck this h	
Ь	and stop here. The organization qual 33 1/3% support test—2016. If the	ifies as a publicly s ne organization did	supported organiza I not check a box o	ition n line 13 or 16a, a	and line 15 is 33 i	/3% or m	nore, check	► ☑ < this
17a	box and stop here. The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2017. If the or on meets the "facts	ganization did not s-and-circumstance	check a box on lines" test, check this	s box and stop he	re. Expla	ain	▶□
b	organization 10%-facts-and-circumstances tes 15 is 10% or more, and if the organization Explain in Part VI how the organization	zation meets the "	facts-and-circumst	ances" test, check	this box and sto	p here.		▶□

20

Р	art III Support Schedule for	Organization	s Described in	Section 509(a	a)(2)			
	(Complete only if you c					o quali	fy unde	r Part II. If
_	the organization fails to	qualify under t	the tests listed I	pelow, please co	omplete Part II.)			
Se	ection A. Public Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 20)17	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")						\longrightarrow	
2	Gross receipts from admissions, merchandise sold or services							
	performed, or facilities furnished in							
	any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business							
4	under section 513 Tax revenues levied for the						+	
4	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							
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
Ь	Amounts included on lines 2 and 3							
	received from other than disqualified							
	persons that exceed the greater of							
	\$5,000 or 1% of the amount on line 13 for the year							
_	Add lines 7a and 7b						-	
8	Public support. (Subtract line 7c						-	
•	from line 6)							
Se	ction B. Total Support							
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 20	117	(f) Total
_	(or fiscal year beginning in) ▶	(4) 2013	(5) 2011	(0, 2013	(4) 2010	(0) 2.		(1) 10ta
9	Amounts from line 6							
0a	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							
С	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is							
	regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets							
	(Explain in Part VI)							
13	Total support. (Add lines 9, 10c,							
	11, and 12)	u Hara a sura di di			<u> </u>	5011	-)(2)	
L4	First five years. If the Form 990 is for	r the organization	is first, second, th	nira, fourth, or fift	n tax year as a sect	on 501(c)(3) org	_
e-	check this box and stop here ection C. Computation of Public S	Support Bores	ntage					▶□
<u> </u>	Public support percentage for 2017 (lin			column (f))		15		
15 16	Public support percentage from 2016 S							
		•	•			16		
	ection D. Computation of Investi Investment income percentage for 201			line 13 column (f))	1 4 - 1		
L7	investment income percentage for 201	is (iiiie toc, colul	iii (i) aivided by	mie 15, column (1	//	17		

Investment income percentage from 2016 Schedule A, Part III, line 17 18 19a 331/3% support tests—2017. 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—2016. 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

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

ightharpoons

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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		

	they describe in the supported organization and accignated by diase or purpose,		
	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied		

		~	l 1	
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		

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

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

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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

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

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

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

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

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

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

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

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

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

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

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

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

amendment to the organizing document)

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

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

organization's organizing document?

provide detail in Part VI.

answer line 10b below

6

7

8

10a

elect at least a majority of the organization's di VI how the supported organization(s) effectivel organization had more than one supported organization had more than one supported organizations were allocated among the supported or powers during the tax year 2 Did the organization operate for the benefit of a operated, supervised, or controlled the supported organization Section C. Type II Supporting Organization organization Section C. Type II Supporting Organization organization organization organization supporting organization was vested in the same supporting organization was vested in the same of the organization provide to each of its supporting organization organization provide to each of its supported organization, and the documents in effect on the date of notification, 2 Were any of the organization's officers, director (s) or (ii) serving on the governing body of a sumaintained a close and continuous working relations organization's investment policies and in directive organization organization satisfied the Activities of the organization organization satisfied the Activities of the organization organization satisfied the Activities of the organization organizations, and explain how these activities organizations and explain how these activities organizations and explain how these activities organization's position that its supported organization, and explain how these activities organization's position that its supported organization involvement 3 Parent of Supported Organizations Answer (a a Did the organization have the power to regularly organization.				age 5
a A person who directly or indirectly controls, eith governing body of a supported organization? b A family member of a person described in (a) a c A 35% controlled entity of a person described in Section B. Type I Supporting Organization? 1 Did the directors, trustees, or membership of oil elect at least a majority of the organization's di VI how the supported organization (s) effectivel organization had more than one supported organization had more than one supported organization had more than one supported organization by the tax year. 2 Did the organization operate for the benefit of a operated, supervised, or controlled the supported carried out the purposes of the supported organization. Section C. Type II Supporting Organization. Section D. All Type III Supporting Organization was vested in the same. Section D. All Type III Supporting Organization organization was vested in the same. Section D. All Type III Supporting Organization organization organization was vested in the same. Section D. All Type III Supporting Organization organization organization organization organization, and the documents in effect on the date of notification, (s) or (ii) serving on the governing body of a sumaintained a close and continuous working relations or (ii) serving on the governing body of a sumaintained a close and continuous working relations investment policies and in directive organization's investment organization and explain how these activities organization supported organization, and substantially all of the organization organization, and organi	nued)			
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Section B. Type I Supporting Organization 1 Did the directors, trustees, or membership of one lect at least a majority of the organization's divident by I how the supported organization and more than one supported organization had more than one supported organization had more than one supported organization had more than one supported organization and more than one supported organization that we supported organization operated, supervised, or controlled the supported organization Section C. Type II Supporting Organization organization Section D. All Type III Supporting Organization organization organization was vested in the same of the organization was vested in the same organization organization was vested in the same organization	2000	11a 11b		
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 Were a majority of the organization's directors each of the organization's supported organization supporting organization was vested in the same. Section D. All Type III Supporting Organ. Did the organization provide to each of its supp tax year, (i) a written notice describing the type Form 990 that was most recently filed as of the documents in effect on the date of notification, Were any of the organization's officers, director (s) or (ii) serving on the governing body of a sumaintained a close and continuous working relationship described in (2), corganization's investment policies and in directly year? If "Yes," describe in Part VI the role the Section E. Type III Functionally-Integrated The organization satisfied the Activities of The organization is the parent of each of the organization supported a government of the organization supported a government organizations and explain how these activities are substantially all of the organizations, and substantially all of its activities. Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization involvement. Parent of Supported Organizations Answer (a a Did the organization have the power to regular! 	ny supported organization other than the supported organization(s) that ng organization? If "Yes," explain in Part VI how providing such benefit ization(s) that operated, supervised or controlled the supporting	2		
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(s) or (ii) serving on the governing body of a sumaintained a close and continuous working relationship described in (2), corganization's investment policies and in direction year? If "Yes," describe in Part VI the role the Section E. Type III Functionally-Integrated the Check the box next to the method that the organization satisfied the Activities and in the organization is the parent of each of the organization supported a government of the organization supported a government of the organization supported and (b) below. Activities Test Answer (a) and (b) below. Did substantially all of the organization's activities supported organizations and explain how these activities responsive to those supported organizations, and substantially all of its activities b Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization involvement Parent of Supported Organizations Answer (a a Did the organization have the power to regularly supported organization in the power to regularly and the organization have the	orted organizations, by the last day of the fifth month of the organization's and amount of support provided during the prior tax year, (ii) a copy of the date of notification, and (iii) copies of the organization's governing to the extent not previously provided?			
(s) or (ii) serving on the governing body of a sumaintained a close and continuous working relationship described in (2), corganization's investment policies and in direction year? If "Yes," describe in Part VI the role the Section E. Type III Functionally-Integrated the Check the box next to the method that the organization satisfied the Activities and in the organization is the parent of each of the organization supported a government of the organization supported a government of the organization supported and (b) below. Activities Test Answer (a) and (b) below. Did substantially all of the organization's activities supported organizations and explain how these activities responsive to those supported organizations, and substantially all of its activities b Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization involvement Parent of Supported Organizations Answer (a a Did the organization have the power to regularly supported organization in the power to regularly and the organization have the		1		
organization's investment policies and in directive year? If "Yes," describe in Part VI the role the Section E. Type III Functionally-Integrat Check the box next to the method that the organization satisfied the Activities by The organization is the parent of each of the organization supported a government Activities Test Answer (a) and (b) below. Did substantially all of the organization's activity supported organization(s) to which the organizations and explain how these activities organizations and explain how these activities bubstantially all of its activities Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization's novities that its supported organization's position that its supported organization's position that its supported organization's parent of Supported Organizations Answer (a) and the organization have the power to regularly	s, or trustees either (I) appointed or elected by the supported organization pported organization? If "No," explain in Part VI how the organization trionship with the supported organization(s)			
organization's investment policies and in directive year? If "Yes," describe in Part VI the role the Section E. Type III Functionally-Integrat Check the box next to the method that the organization satisfied the Activities by The organization is the parent of each of the organization supported a government Activities Test Answer (a) and (b) below. Did substantially all of the organization's activity supported organization(s) to which the organizations and explain how these activities organizations and explain how these activities bubstantially all of its activities Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization's novities that its supported organization's position that its supported organization's position that its supported organization's parent of Supported Organizations Answer (a) and the organization have the power to regularly		2		
 Check the box next to the method that the organization satisfied the Activities and the organization is the parent of each of the organization supported a government. Activities Test Answer (a) and (b) below. Did substantially all of the organization's activities supported organization(s) to which the organizations and explain how these activities responsive to those supported organizations, and substantially all of its activities. Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization's position that its supported organization's parent of Supported Organizations. Parent of Supported Organizations Answer (a Did the organization have the power to regular) 	Id the organization's supported organizations have a significant voice in the ng the use of the organization's income or assets at all times during the tax organization's supported organizations played in this regard	3		
a The organization satisfied the Activities b The organization is the parent of each of c The organization supported a government 2 Activities Test Answer (a) and (b) below. a Did substantially all of the organization's activity supported organization(s) to which the organizations and explain how these activities responsive to those supported organizations, and substantially all of its activities b Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization/vement 3 Parent of Supported Organizations Answer (a a Did the organization have the power to regularly	ed Supporting Organizations		<u>'</u>	
b The organization is the parent of each of c The organization supported a government The organization supported a government The organization supported a government The organization supported organization and the organization organization and explain how these activities responsive to those supported organizations, and substantially all of its activities The organization o	nization used to satisfy the Integral Part Test during the year (see instruct	ions)		
 The organization supported a government Activities Test Answer (a) and (b) below. a Did substantially all of the organization's activities supported organization(s) to which the organizations and explain how these activities responsive to those supported organizations, and substantially all of its activities b Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization involvement Parent of Supported Organizations Answer (a a Did the organization have the power to regularly 	est Complete line 2 below			
 Activities Test Answer (a) and (b) below. a Did substantially all of the organization's activity supported organization(s) to which the organizations and explain how these activities responsive to those supported organizations, as substantially all of its activities b Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization/vement Parent of Supported Organizations Answer (a a Did the organization have the power to regularl 	its supported organizations Complete line 3 below			
 a Did substantially all of the organization's activit supported organization(s) to which the organizations and explain how these activities responsive to those supported organizations, as substantially all of its activities b Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization/vement 3 Parent of Supported Organizations Answer (a a Did the organization have the power to regularly 	ital entity Describe in Part VI how you supported a government entity (see	ınstru	ctions)	
supported organization(s) to which the organizations and explain how these activities responsive to those supported organizations, as substantially all of its activities b Did the activities described in (a) constitute act organization's supported organization(s) would organization's position that its supported organization/ement 3 Parent of Supported Organizations Answer (a Did the organization have the power to regularly			Yes	No
organization's supported organization(s) would organization's position that its supported organization's position that its supported organizations answer (a a Did the organization have the power to regularly	es during the tax year directly further the exempt purposes of the tion was responsive? If "Yes," then in Part VI identify those supported is directly furthered their exempt purposes, how the organization was directly furthered their exempt purposes, activities constituted	2a		
Parent of Supported Organizations Answer (aa Did the organization have the power to regularl	vities that, but for the organization's involvement, one or more of the nave been engaged in? If "Yes," explain in Part VI the reasons for the zation(s) would have engaged in these activities but for the organization's	2b		
a Did the organization have the power to regularl	and (b) below.	20		
the supported organizations? Provide details in	v appoint or elect a majority of the officers, directors, or trustees of each of	3a		
	ee of direction over the policies, programs and activities of each of its art VI. the role played by the organization in this regard	3b		

Sched	dule A (Form 990 or 990-EZ) 2017			Page 6
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
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 1-1/2% 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 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegrat	ed Type III supporting or	ganization (see

7 Total annual distributions. Add lines 1 through 6							
Distributions to attentive supported organizations to v details in Part VI) See instructions							
9 Distributable amount for 2017 from Section C, line 6	9 Distributable amount for 2017 from Section C, line 6						
10 Line 8 amount divided by Line 9 amount	10 Line 8 amount divided by Line 9 amount						
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017						
1 Distributable amount for 2017 from Section C, line							

8 Distributions to attentive supported organizations to wh details in Part VI) See instructions						
9 Distributable amount for 2017 from Section C, line 6						
10 Line 8 amount divided by Line 9 amount						
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017			
1 Distributable amount for 2017 from Section C, line 6						
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI)						

details in Part VI) See instructions	Sive (provide		
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			

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

b From 2013. **c** From 2014. **d** From 2015. e From 2016. f Total of lines 3a through e

instructions)

See instructions

31 and 4c 8 Breakdown of line 7

\$

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

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

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

a Excess from 2013. **b** Excess from 2014. . . . c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

Additional Data

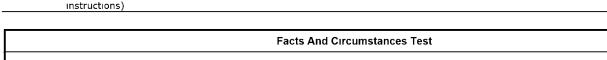
Software ID: Software Version:

EIN: 13-1790756

EIN. 13-1790730

Name: WORLD JEWISH CONGRESS AMERICAN SECTION INC

chedule A (Form 990 or 990-EZ) 2017	Pag
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, F	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,	art 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	n 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	l information (See



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

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.

DLN: 93493283010018 OMB No 1545-0047

(Form 990)

► Attach to Form 990. Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. **Inspection** Internal Revenue Service Name of the organization **Employer identification number** WORLD JEWISH CONGRESS AMERICAN SECTION INC 13-1790756 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements 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. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2017

Par	t IIII	Organizations Maintaining (Collections of A	rt, Histo	rical T	reas	ures, or Othe	er Similar A	ssets (c	ontinued)	
3		the organization's acquisition, acces (check all that apply)	sion, and other rec	ords, chec	k any of	the f	following that are	e a significant	use of its	collection	
а		Public exhibition		d		Loai	n or exchange p	rograms			
b		Scholarly research		e		Oth	er				
С		Preservation for future generations									
4	Provid Part >	de a description of the organization's KIII	collections and exp	plain how t	hey furt	her th	ne organization's	exempt purp	ose in		
5		g the year, did the organization solic s to be sold to raise funds rather thai							☐ Yes	s □ No)
Pa	rt IV	Escrow and Custodial Arran Complete if the organization at X, line 21.		n Form 99	90, Part	IV,	line 9, or repo	rted an amo	unt on F	orm 990, F	Part
1a		e organization an agent, trustee, cust ded on Form 990, Part X?	odian or other inte	rmediary f	or contr	ibutio	ns or other asse	ts not	☐ Yes	s 🗆 No	,
ь	If "Y∈	es," explain the arrangement in Part >	XIII and complete t	the followin	ng table			-	Amount		-
c	Begin	ining balance	·		-		1c				-
d	Addıtı	ions during the year					1d				-
е	Dıstrı	butions during the year					1e				•
f	Endın	g balance					1f				•
2 a	Dıd th	ne organization include an amount or	Form 990, Part X,	line 21, fo	or escro	v or c	ustodial account	: liability?	☐ Yes	s 🗆 No	· •
b	If "Ye	s," explain the arrangement in Part >	KIII Check here if	the explan	ation ha	s bee	n provided in Pa	rt XIII			
Pā	irt V	Endowment Funds. Complete	e if the organizat	ion answ	ered "Y	'es" c	on Form 990, F	Part IV, line	10.		
			(a)Current ye		Prior yea		(c)Two years bad			(e)Four years	back
	_	ing of year balance	103	,563	10	2,848	102,1	1/4	101,574		
		outions		238		715		574	600		00,000 1,574
		restment earnings, gains, and losses		236		/15		0/4	- 600		1,574
		or scholarships									
	and pro	expenditures for facilities ograms									
		strative expenses									
g	End of	year balance	103	,801	10	3,563	102,8	348	102,174	1	01,574
2		de the estimated percentage of the c	urrent year end ba	lance (line	1g, colu	ımn (a	a)) held as				
а		d designated or quasi-endowment >									
b	Perm	anent endowment ► 96 340 %									
c	Temp	orarily restricted endowment >	3 660 %								
		ercentages on lines 2a, 2b, and 2c sl									
3a	organ	nere endowment funds not in the pos	-	anızatıon tl	nat are h	neld a	nd admınıstered	for the		Yes	No
		related organizations								a(i)	No
ь		elated organizations is" on 3a(ii), are the related organiza		ured on Sc	 hadula F					(ii) Bb	No
4		tibe in Part XIII the intended uses of	·						ٔ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	rt VI	Land, Buildings, and Equipm									
		Complete if the organization ar		n Form 99	0, Part	ΙV,	line 11a. See l	Form 990, Pa	art X, lın	e 10.	
	Descri		r other basis (b)) Cost or oth	er basıs ((other)	(c) Accumulate	ed depreciation	(4	d) Book value	
1a	Land										
b	Buildin	gs									
		old improvements				20,61	1	8,720			11,891
		nent			7	64,567	7	439,523			325,044
	Other							•			
		lines 1a through 1e (Column (d) mus	st equal Form 990,	Part X, co.	lumn (B,), line	10(c))	>			336,935

Part VII Investments—Other Securities. Complete if See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)	(b) book value	Cost or end-of-year market v	alue
.) Financial derivatives			
) Other) CERTIFICATES OF DEPOSIT	1,350,287	F	
) CORPORATE BONDS	3,229,625	F	
·)			
o)			
=)			
=)			
G)			
H)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 4,579,912		
Investments—Program Related. Complete if the organization answered 'Yes' or	n Form 990, Part IV, line 11	.c. See Form 990, Part X, line 1	3.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market v	
1)		,	
2)			
3)			
4)			
5)			
5)			
7)			
8)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
otal. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answer			
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)			: 15 Book value
Otal. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answer (a) Descript			
Otal. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answer (a) Descript 1)			
Otal. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answer (a) Descript 1) 2)			
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Other Assets. Complete if the organization answer (a) Descript 1) 2) 3) 4)			
Other Assets. Complete if the organization answer (a) Descript (b) Mark 13 (a) Descript (c) Descript (d) Descript (e) Descript (g) Descr			
Other Assets. Complete if the organization answer (a) Descript (b) Must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answer (a) Descript (b) Descript (c) Descript (d) Descript (e) Descript (f) Descript (g) Desc	ion	(b)	
Other Assets. Complete if the organization answer (a) Descript (b) Descript (c) Descript (d) Descript (e) Descript (e) Descript (f) Descript (g) Des	ion	(b)	
Other Assets. Complete if the organization answer (a) Descript (b) Descript (c) Descript (d) Descript (e) Descript (e) Descript (f) Descript (g) Des	ion	(b)	
Other Assets. Complete if the organization answer (a) Description (b) Must equal Form 990, Part X, col (B) line 13) (c) Description (d) Description (e) Description (f) Description (g) Description (g) Description (g) Description of liability	n answered 'Yes' on Form 9	(b)	
Other Assets. Complete if the organization answer (a) Description (b) Must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answer (a) Description (b) Description (c) Description (d) Description (e) Description of liability (f) Federal income taxes	n answered 'Yes' on Form 9	(b)	
Other Assets. Complete if the organization answer (a) Description (b) Must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answer (a) Description (b) Description (c) Description (d) Description (e) Description of liability (f) Federal income taxes	n answered 'Yes' on Form 9	(b)	
Other Assets. Complete if the organization answer (a) Description (b) Description (c) Description (a) Description (b) Description (c) Description (d) Description (e) Description (g) Description (g) Description (h) Description (g) Description (h) Description (g) Description of liability (h) Federal income taxes	n answered 'Yes' on Form 9	(b)	
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Other Assets. Complete if the organization answer (a) Descript (b) Must equal Form 990, Part X, col (B) line 13) (c) Descript (d) Descript (e) Descript (f) Descript (g) Descript (h) Description of liability (h) Federal income taxes	n answered 'Yes' on Form 9	(b)	

Part XI

2

b

d

е

3

4

1

2

Schedule D (Form 990) 2017

Page 4

-23,205

24,809,459

24.809.459

21,483,018

Schedule D (Form 990) 2017

а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a					
b	Other (Describe in Part XIII)	4b					
c	Add lines 4a and 4b					4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)					5	
Par	t XII Reconciliation of Expenses per Audited Financial Statem	ents	With	Ехре	enses pei	Retur	n.
	Complete if the organization answered 'Yes' on Form 990, Part	: IV, I	ine 12	2a.			

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2a

2b

2c

24

2a 2h

-23.205

2e

3

1

2c 2d Other (Describe in Part XIII) d Add lines 2a through 2d . . 2e 3 3 21,483,018

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b b

Add lines **4a** and **4b** 4c

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 21.483.018 Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Return Reference Explanation

See Additional Data Table

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Amounts included on line 1 but not on Form 990, Part IX, line 25

Donated services and use of facilities . . .

Prior year adjustments

Schedule D (Form 990) 2017	Page 5
Part XIII Supplemental Information (conti	
Return Reference	Explanation
	Schedule D (Form 990) 2017

Additional Data

Software ID:

Software Version: **EIN:** 13-1790756

Name: WORLD JEWISH CONGRESS AMERICAN SECTION INC.

Supplemental Information

Schedule D, Part V, Line 4

purposes

Endowment The American Section's endowment consists of one individual fund established for general

Return Reference Explanation

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2	The American Section is subject to the provisions of the Financial Accounting Standards Bo ard's (the "FASB") Accounting Standards Codification ("ASC") Topic 740, Income Taxes, as it relates to accounting and reporting for uncertainty in income taxes. Because of the American Section's general tax-exempt status, management believes ASC Topic 740 has not had, and is not anticipated to have, a material impact on the American Section's financial state ments.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. OMB No 1545-0047

DLN: 93493283010018

Open to Public Inspection

Employer identification number

to
,210
,210

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

	edule G (Form 990 or 990-EZ) 2017				Page 2
Pa	rt II Fundraising Events. Comple				
	than \$15,000 of fundraising e gross receipts greater than \$		gross income on Form	1 990-EZ, lines 1 and (ob. List events with
	gross receipts greater than \$.	(a)Event #1	(b) Event #2	(c)Other events	(d)
			(b) Event #2		Total events
		Dinner (event type)	(event type)	(total number)	(add col (a) through
		(event type)	(event type)	(total number)	col (c))
<i>a</i> .					
Reversie					
Λe					
\aleph					
	1 Gross receipts	2,032,628			2,032,628
	2 Less Contributions	1,817,137			1,817,137
	3 Gross income (line 1 minus	2,017,137			2,027,1237
	line 2)	215,491			215,491
	4 Cash prizes				
	5 Noncash prizes				
es					
su:	6 Rent/facility costs	10,000			10,000
ă	7 Food and beverages	150,332			150,332
т. Ш	8 Entertainment				
Direct Expenses	9 Other direct expenses	55.450			55.450
△		55,159			55,159
	10 Direct expense summary Add lines 4	through 9 in column (d)			215,491
	11 Net income summary Subtract line 10) from line 3, column (d)		•	
Pai	t IIII Gaming. Complete if the org	anization answered "Ye	s" on Form 990, Part 1	IV, line 19, or reported	more than \$15,000
	on Form 990-EZ, line 6a.			· · · · · · · · · · · · · · · · · · ·	
<u>e</u>		() 5	(b) Pull tabs/Instant		(d) Total gaming (add
Revenue		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
ě					
~	1 Gross revenue				
န္					
'nS.	2 Cash prizes				
Expenses	3 Noncash prizes				
ect	4 Rent/facility costs				
ā	5 Other direct expenses				
	5 Other direct expenses	□ v 0/			
		☐ Yes%	☐ Yes %	Yes%	
	6 Volunteer labor	☐ No	☐ No	│	
	7 Direct expense summary Add lines 2	through 5 in column (d)			
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	n (d)		
	,	,	,		
9	Enter the state(s) in which the organizat	ion conducts gaming activ	ities		
а	Is the organization licensed to conduct g	aming activities in each of	these states?		☐ Yes ☐ No
b	If "No," explain				
10-	Word any of the organization's gaming by	concoc rovokod cucnondo	d or terminated during th		
10a b	Were any of the organization's gaming lif If "Yes," explain	censes revoked, suspende	u or terminated during th	e tax year	∐Yes ∐No
D	11 165, Explain				
				Schedule G (Form 990 or 990-EZ) 2017

Sche	dule G (Form 990 or 990-EZ) 2017					F	Page 3
11	Does the organization conduct gaming	activities with nonmember	s?		Yes	□No	
12	Is the organization a grantor, benefici- formed to administer charitable gamin		a member of a partnership or other entity		□Yes		
13	Indicate the percentage of gaming act	ivity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
14	Enter the name and address of the pe	rson who prepares the orga	nization's gaming/special events books and re	ecords			
	Name >						
	Address P						
15a	Does the organization have a contract revenue?	with a third party from wh	om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming amount of gaming revenue retained b			ne			
С	If "Yes," enter name and address of the	ne third party					
	Name ►						
	Address ►						
16	Gaming manager information						
	Name ►						
	Gaming manager compensation ► \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions						
а	Is the organization required under sta retain the state gaming license?	te law to make charitable d	istributions from the gaming proceeds to		Yes	Пио	
b	·		uted to other exempt organizations or spent				
Da.	in the organization's own exempt active tive. Supplemental Information		\$ tions required by Part I, line 2b, column	e (m) a	nd (v): a	nd Dart	
لكس			olicable. Also provide any additional info				s)
	Return Reference		Explanation				

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLN: 93493283010018		
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. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 .							OMB No 1545-0047 2017 Open to Public Inspection		
Internal Revenue Service Name of the organization WORLD JEWISH CONGRESS AME	RICAN SECTION INC	2				Employ 13-179	er identification number 0756		
 Does the organization mainst the selection criteria used Describe in Part IV the org Part II Grants and Other 	ntain records to subs to award the grants anization's procedur Assistance to Dom	or assistance? res for monitoring the usestic Organizations a	se of grant funds in the Ur	ited States		,	✓ Yes □ No		
(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) Descript noncash assi			
(1) World Jewish Congress LLC 501 MADISON AVENUE New York, NY 10010	98-0507871		14,119,000				Program Support		
2 Enter total number of sect 3 Enter total number of othe For Paperwork Reduction Act Notice	r organizations liste	d in the line 1 table .					► 1 Schedule I (Form 990) 2017		

Return Reference **Explanation**

Schedule I. Part I. Line 2 Monitoring Grant funds The World Jewish Congress American Section requests a use of funds report to ensure granted amounts comply with grant provisions Schedule I (Form 990) 2017

efil	e GRAPHIC pr	int - DO NOT PROCESS As Fi	led Dat	a -	DLN: 934	9328	33010	018	
Sch	edule J	Comp	ensat	ion Information	OM	1B No	1545-0	0047	
(For	n 990)	For certain Officers, Dir	ectors, T	rustees, Key Employees, and Hig	hest				
		Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					2017		
		_	▶ Attach	i to Form 990.					
•	tment of the Treasury al Revenue Service			I (Form 990) and its instructions ingov/form990.	s at •		to Pul ectio		
Nar	ne of the organiza	ation			Employer identificat	_			
WO	RLD JEWISH CONGR	ESS AMERICAN SECTION INC			13-1790756				
Pa	rt I Questi	ons Regarding Compensation							
	•						Yes	No	
1a		piate box(es) if the organization providection A, line 1a Complete Part III to p							
	First-class	or charter travel		Housing allowance or residence for	•				
		companions		Payments for business use of persoi					
	_	nification and gross-up payments		Health or social club dues or initiation					
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	reur, cner)				
b		kes in line 1a are checked, did the orga Il of the expenses described above? If			ent or reimbursement	1b			
2		tion require substantiation prior to rein			. 1-2	2			
	directors, truste	es, officers, including the CEO/Executiv	e Directo	r, regarding the items checked in line	: Ia'				
3		of any, of the following the filing organiz			ne				
		EO/Executive Director Check all that a d organization to establish compensation			n Part III				
			✓						
		ition committee ent compensation consultant	✓	Written employment contract Compensation survey or study					
		of other organizations	\overline{\cute{V}}	Approval by the board or compensa	tion committee				
4		did any person listed on Form 990, Pa	rt VII. Se						
	related organiza		,	, , ,	3 3				
а	Receive a sever	ance payment or change-of-control pay	ment?			4a		No	
b	Participate in, o	receive payment from, a supplementa	l nonqual	ıfıed retırement plan?		4b		No	
C	•	receive payment from, an equity-base		-		4c		No	
	If "Yes" to any o	f lines 4a-c, list the persons and provid	le the app	olicable amounts for each item in Part	: 111				
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organ	izations	must complete lines 5-9.					
5	For persons liste	d on Form 990, Part VII, Section A, line							
	compensation c	ontingent on the revenues of							
а	The organization					5a		No	
b	Any related orga	inization? 5a or 5b, describe in Part III				5b		No	
_	·	·		All a company of the					
6		d on Form 990, Part VII, Section A, ling ontingent on the net earnings of	e Ia, uiu	the organization pay or accrue any					
a	The organization					6a		No	
b	Any related orga					6b		No	
7	•	6a or 6b, describe in Part III	. 1	L la	.				
7		d on Form 990, Part VII, Section A, lin- escribed in lines 5 and 6? If "Yes," desc			1	7		No	
8	subject to the in	nts reported on Form 990, Part VII, par itial contract exception described in Re			escribe				
	ın Part III					8		No	
9	If "Yes" on line 3 53 4958-6(c)?	3, did the organization also follow the re	ebuttable	presumption procedure described in	Regulations section	9			
For I	Danerwork Pedi	ction Act Notice, see the Instructio	ns for Fo	orm 990 Cat No 5	0053T Schedule 1	(Forn	990)	2017	

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

			y Employees, and Hig					
instructions, on row (ii) [Do no	ot list any individuals that	rted on Schedule J, report at are not listed on Form 99 ndividual must equal the tot	90, Part VII		-	•	at individual
(A) Name and Title		(B) Breakdown	n of W-2 and/or 1099-MISC	C compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(I)-(D)	as deferred on prior Form 990
1 Randi Dubno Gardner Director Dr Development	(i)	164,159	0	0	13,421	34,334	211,914	0
	(ii)	0	0	0	0	0	0	0
2 Janice Wolpo Dir Campaign	(i)	144,981	0	0	12,010	37,127	194,118	0
Relations/Comm	(ii)	0	0	0	0	0	0	0
3 Cheryl Bailes Dir of Direct Mail Fundraising	(i)	110,006	0	0	9,200	34,619	153,825	0
	(ii)	0	0	0	0	0	0	0
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	$\mid \mid \mid$							
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Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation Schedule J. Part I. Line 3 Compensation Information The process for determining compensation includes a Board review and approval of current and comparable salaries within similar lorganizations This is documented in the Board Minutes

Schedule J (Form 990) 2017

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN:	9349328	3010	018
	EDULE M			loncash Contri	hutione		OMB No 1	.545-0	047
(For	m 990)		ľ	ioncasii contin	Dutions		20	1 -	7
		▶Complete if the o	organizati	ons answered "Yes" on Fo	orm 990, Part IV, lines 2	9 or 30.	20	1/	′
		► Attach to Form							
	tment of the Treasury	▶Information abo	ut Schedu	lle M (Form 990) and its in	nstructions is at <u>www.ir</u> s	s.gov/form990	Open to		
	e of the organizat					Employer identi	fication n	umbe	
WORL	D JEWISH CONGRES	SS AMERICAN SECTION	INC			13-1790756			
Pa	rt I Types	of Property							
		• •	(a)	(b)	(c)		(d)		
			1	Number of contributions or	Noncash contribution		of determi		1
			applicable	items contributed	amounts reported on Form 990, Part VIII, line	noncash cor	itribution a	imoun	[S
					1g				
1	Art—Works of art								
2	Art—Historical tr								
3	Art—Fractional in								
4 5	Books and public Clothing and hou								
,									
6	Cars and other v	ehicles							
7	Boats and planes								
8	Intellectual prope	•							
9	Securities—Public Securities—Close	•	X	19	4,156,09	FMV			
	Securities—Close Securities—Partr	•							
	or trust interest								
12	Securities—Misce	ellaneous							
13	•								
	contribution—Hi structures								
14	Qualified conserv								
	contribution—Of								
	Real estate—Res								
16 17	Real estate—Cor Real estate—Oth								
18	Collectibles .								
19	Food inventory								
20	Drugs and medic								
21	Taxidermy .								
22	Historical artifact	:s							
	Scientific specim								
	Archeological art								
	Other ► (•				+			
26 27	Other ► (•							
	Other • (·							
			he organiza	ition during the tax year for	contributions				
		,	_	3, Part IV, Donee Acknowled		29			
								Yes	No
30a				contribution any property r					
				e of the initial contribution, a			·		ļ
						- •	30a		No
b	If "Yes," describ	e the arrangement in	n Part II						ļ
31	Does the organi	zation have a gift acc	ceptance p	olicy that requires the reviev	of any nonstandard contri	butions?	31	Yes	<u> </u>
32a				or related organizations to so	olicit, process, or sell nonca	sh			ļ
							32a		No
	If "Yes," describ				and the form of the second	an alamatan t			
53	If the organizati describe in Part	·	amount in	column (c) for a type of pro	perty for which column (a)	is cnecked,			
		n Act Notice, see the	Instruction	es for Form 990	Cat No. 512271	Cab a d	ule M (Form		(2017)

Schedule M (Form 990) (2017)	Page 2					
Part II Supplemental Info						
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 add	this part for any additional information.					
Return Reference	Explanation					
	Schedule M (Form 990) (2017)					

efile GRAPHIC print - DO NOT PROCESS					DLN:	93493283010018
SCHEDULE O (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. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.				ons on n.	OMB No 1545-0047 2017 Open to Public Inspection	
	NGRESS	n AMERICAN SECTION INC Ipplemental Informatio	n		Employer identi 13-1790756	fication number
Return Reference				Explanation		
FORM 990, PART V, QUESTION 2A	PAYROLL The world jewish congress american section currently employs 11 individuals. Payr oil is processed through another organization, the World Jewish Congress LLC, which is the n reimbursed by the world jewish congress american section. Therefore, there is no form w-3 filed for the world jewish congress american section. The payroll expense reflected on the 990 represents amounts paid to individuals in their capacity as World Jewish Congress. A merican Section employees. FORM 990, PART VI, SECTION B, LINE 11B 990 REVIEW PROCESS. The executive committee of the Board of Directors and the Executive Director review the 990 provided for review and approval, the Form 990 is given to the full board for review and then filed by the Organization. FORM 990, PART VI, SECTION B LINE 12C CONFLICT OF INTEREST POLICY. The organization regularly and consistently monitors and enforces complian ce with the conflict of interest policy by requiring all officers, directors and employees to sign the form annually. FORM 990, PART VI, SECTION B LINE 15B DETERMINING COMPENSATION. The process for determining compensation includes a Board review and approval of current and comparable salaries within similar organizations. This is documented in the Board Min utes. FORM 990, PART VI, SECTION C, LINE 19 Disclosure Governing Documents, Conflict of Interest and Financials. In its efforts to follow 'best practices' in all areas of governanc. e, financial control and transparency, the World Jewish Congress (American Section), Inc. makes available on the website its Privacy Policy, Code of Ethics Policy, Conflict of Interest Policy and Whistleblower Policy Further, its IRS Form 990 is available on its websit e and the internet via Guidestar. All policy statements and financial information are also available upon request.					

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4D	OTHER PROGRAM SERVICES ACADEMIC, CULTURAL AND YOUTH PROGRAMS- PROVIDE FORUM AND SUPPORT TO BRING YOUNG PEOPLE INTO ORGANIZATIONAL ACTIVITIES MEETINGS ARE HELD WHERE YOUNG LEADERS ARE INVITED TO PARTICIPATE INCLUDING UNITED NATIONS MEETINGS WITH AMBASSADORS AND OTHER MEMBERS OF UNITED NATIONS DELEGATIONS, INTERFAITH CONFERENCES, GOVERNING BOARD MEETINGS AND OTHER INFORMATIONAL MEETINGS WHERE YOUNG LEADERSHIP IS INCLUDED TO PARTICIPATE FREELY WE ASSIST OUR YOUNG LEADERSHIP DIVISION IN THE ORGANIZATION OF THEIR OWN ACTIVITIES, INCLUDING MEETINGS, RALLIES, AND EDUCATIONAL BRIEFINGS IN ORDER TO HELP INTEGRATE YOUNG PEOPLE IN TO ESTABLISHED COMMUNITY ORGANIZATIONS