efile GRAPHIC print - DO NOT PROCESS As Filed Data -Form **990**

Return of Organization Exempt From Income Tax

% ₃	
Department of the T	r
Internal December Se	

 \square Address change

☐ Name change

☐ Initial return

Activities & Governance

Here

Use Only

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private ▶ Do not enter social security numbers on this form as it may be made public Open to Public easur ▶ Information about Form 990 and its instructions is at www.irs.gov/form990 Inspection For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017 C Name of organization D Employer identification number B Check if applicable CONFERENCE ON JEWISH MATERIAL CLAIMS AGAINST GERMANY INC 13-1677841 % AMY MOYER / CLAIMS CONFERENCE Doing business as ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return 1359 BROADWAY Suite 2000 ☐ Application pending (212) 696-4944 City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10018 **G** Gross receipts \$ 1,658,076,407 Name and address of principal officer H(a) Is this a group return for **GREGORY SCHNEIDER** □Yes ☑No subordinates? 1359 BROADWAY ROOM 2000 H(b) Are all subordinates NEW YORK, NY 10018 ☐ Yes ☐No ıncluded? Tax-exempt status ☐ 501(c)(3) **☑** 501(c)(4) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW CLAIMSCON ORG L Year of formation 1952 M State of legal domicile NY K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities THE CONFERENCE ON JEWISH MATERIAL CLAIMS AGAINST GERMANY WORKS TO SECURE COMPENSATION AND RESTITUTION FOR SURVIVORS OF THE HOLOCAUST AND HEIRS OF VICTIMS Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 60 144 742 567 348 ,129 ,528 910

_ ×خ	3	Number of voting members of the governing body (Part VI, line 1a)		3	
	4	Number of independent voting members of the governing body (Part VI, line 1b) $$.		4	
Ě	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		5	
Activities	6	Total number of volunteers (estimate if necessary)		6	
⋖	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	
	ь	Net unrelated business taxable income from Form 990-T, line 34		7b	
			Prior Year		Current Year
Qı.	8	Contributions and grants (Part VIII, line 1h)	780,674,810		739,129
Ravenua	9	Program service revenue (Part VIII, line 2g)	59,406,361		36,135
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,598,063		3,909
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,453,802		-121
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	844,133,036		779,053
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	838,815,766		779,229
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0		
SS.	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	20,390,764		21,122
Expenses	16a	a Professional fundraising fees (Part IX, column (A), line 11e)	0		
e di	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶0			
ā	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	53,058,404		33,723
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	912,264,934		834,075
	19	Revenue less expenses Subtract line 18 from line 12	-68,131,898		-55,021
8.8			Beginning of Current Year		End of Year
d Balances				<u> </u>	
Ba	20	Total assets (Part X, line 16)	666,300,237	<u> </u>	593,698
ੋਂ⊤ਾ	21	Total liabilities (Part X, line 26)	335.342.335	i	221.478

Part III Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my on all information of which preparer has

knowledge and	belief,	ıt ıs true,	correct, a	nd complete	Declaration of	f preparer	(other tha	n officer)	ıs based i
any knowledge									

2018-11-06 Signature of officer Sign

Paid	Print/Type Phillip Gro
Preparer	Firm's nam

21 Total liabilities (Part X, line 26) .

GREGORY SCHNEIDER EXECUTIVE VP Type or print name and title

Print/Type preparer's name Phillip Groff	Preparer's signature Phillip Groff	Date 2018-11-07	Check I if self-employed	PTIN P01247783	
Firm's name KPMG LLP			Firm's EIN ▶		
Firm's address ▶ 345 Park Avenue			Phone no (212) 758-97) 758-9700	
New York, NY 101540102					

22 Net assets or fund balances Subtract line 21 from line 20

335,342,335

330,957,902

☑ Yes ☐ No

0 315

054 279 751

593,698,752 221,478,275

372,220,477

DLN: 93493312007358 OMB No 1545-0047

Form	990 (2017)					Page 2
Par	t IIII Statement	of Program Ser	vice Accomplis	hments		
	Check If Sche	dule O contains a re	sponse or note to a	any line in this Part III		🗹
1	Briefly describe the o			,		
—	CONFERENCE ON JEWI HOLOCAUST AND HEIF		MS AGAINST GERM	IANY WORKS TO SECUR	RE COMPENSATION AND RESTITU	JTION FOR SURVIVORS OF
2				vices during the year w	hich were not listed on	
	the prior Form 990 o					🗌 Yes 🗹 No
3	-		r make significant	changes in how it condi	ucts, any program	□ Yes 🗹 No
	If "Yes," describe the	ese changes on Sche	dule O			
4		nd 501(c)(4) organiza	ations are required	to report the amount of	largest program services, as med of grants and allocations to others	
4a	(Code) (Expenses \$	384,365,328	including grants of \$	384,365,328) (Revenue \$)
	See Additional Data		. ,			,
4b	(Code) (Expenses \$	339,254,886	including grants of \$	339,254,886) (Revenue \$)
	See Additional Data					
4c	(Code) (Expenses \$	62,295,330	including grants of \$	45,219,238) (Revenue \$	36,135,567)
	See Additional Data					
4d	Other program servi	ces (Describe in Sch	edule O)			
	(Expenses \$	10,390,458	including grants of	\$ 10,390,4	158) (Revenue \$)
4e	Total program serv	vice expenses ▶	796,306,0	02		

or X as applicable

Checklist of Required Schedules

Page 3

No

Νo

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

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

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

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

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

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

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

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

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,

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

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

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

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

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

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

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

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

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

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

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

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

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

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

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

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

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

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,

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11b

11c

11d

11e

11f

12a

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14a

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Form **990** (2017)

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Yes

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35a

35h

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Yes

Yes

Form 990 (2017)

ΙV	Checklist of Required Schedules	(continued)

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

instructions for applicable filing thresholds, conditions, and exceptions)

	oncernot of Reduired Senedates (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	

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, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's	

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

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?

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

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

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

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

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

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

Did the organization receive 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 organization? If "Yes," complete Schedule R, Part V, line 2

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.

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

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

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

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

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21
Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22
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,"	23

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			Page 5
Гаг	Check if Schedule O contains a response or note to any line in this Part V			✓
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 36			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		No
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►IS , GM , AU , EI , UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
	See instructions for mining requirements for fine EN FORM 114, Report of Foreign Bank and Financial Accounts (FBAK)			
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?	_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	5c 6a		No
b	solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were	6b		
7	not tax deductible?	6 D		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	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			
	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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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			
	Enter the amount of reserves on hand			
	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		<u> </u>

orm	990 (2017)			Page 6
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to lı	nes ✓
Se	Check if Schedule O contains a response or note to any line in this Part VI	• •		
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 61			
	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 60			
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		No
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		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	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	2.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction 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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
So	ction C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (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)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records NAMY MOYER CLAIMS CONFERENC 1359 BROADWAY ROOM 2000 NEW YORK, NY 10018 (646) 485-2011			

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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Name and Title Reportable Average Position (do not check more Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from related from the compensation any hours director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Individual trustee or director Highest compensated employee organizations Institutional Trustee related below dotted organizations employee line) See Additional Data Table

		·			

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

services rendered to the organization? If "Yes," complete Schedule J for such person .

5

GRANT THORNTON LLP.

GERMAN OFFICE CONTRACTOR-See schedu,

compensation from the organization ▶ 14

757 THIRD AVE NEW YORK, NY 10017 BDO USA LLP,

100 PARK AVÉ NEW YORK, NY 10017

Section B. Independent Contractors

c Total from continuation sheets to Part VII, Section A .

d.	Total (add lines 1b and 1c)	>	3,066,080	()		323,121
2	Total number of individuals (including but not limited to those listed above of reportable compensation from the organization \blacktriangleright 34) wh	o received more than	\$100,000			
						Yes	No
				_		res	110

	of reportable compensation from the organization ▶ 34			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	

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

5

COMPLIANCE & REVIEW

ACCOUNTING ADVISORY

LEGAL SERVICES

Νo

276,361

235,769

230,728

Form 990 (2017)

(A)	(B)	(C)
Name and business address	Description of services	Compensation
KPMG LLP, 345 Park Avenue NEW YORK, NY 10154	AUDIT & GRANT REVIEW	384,240
BERKMAN WECHSLER BLOOM CO,	LEGAL SERVICES	339,851

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

NEW TORK, WE TOTAL		
BERKMAN WECHSLER BLOOM CO,	LEGAL SERVICES	
1 AZRIELI CTR		
TEL AVIV, 0 67021		
IS .		

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

Part	VII										
		Check If Schedul	e O contains :	a respo	onse or note to any	(,	nis Part VIII A) evenue	(B) Related exemp	or ot	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1.							revenu		revenue	512-514
इ इ		a Federated campaigi		1a							
ran our		b Membership dues .		1 b							
6 G		c Fundraising events		1c							
iffs		d Related organizatio		1d							
3, G m ::		e Government grants (co		1e	734,649,514						
Sign	1	 All other contributions, and similar amounts no 	, gıfts, grants, ot ıncluded	1f	4,480,228						
Contributions, Gifts, Grants and Other Similar Amounts	١	above 9 Noncash contribution	ons included		4,400,220						
Contained and	h	in lines 1a-1f \$ Total.Add lines 1a-1	f	. .	•	739	,129,742				
					Business		,123,742			Τ	
Service Revenue	2a	UNCLAIMED JEWISH PRO	OPERTY FUND			900099	36,13	35,567	36,135,56	57	
₹ ^	ь			_							
e Ce	c										
χerν	d	=		_						-	
E	е	. ————		_							
Program	f	All other program se	rvice revenue								
Ĕ	g	Total.Add lines 2a-2f			▶ 36,1	35,567					
		Investment income (ir			nterest, and other		2 272 012				2,273,013
		similar amounts) .				<u> </u>	2,273,013				2,2/3,013
		Income from investme Royalties					0				
		Royaldes I I I	(ı) Rea		(II) Personal	<u> </u>					
	6a	Gross rents	(7)		(.,,	1					
		l		33,125		-					
	b	Less rental expenses		15,457							
	c	Rental income or	-1	.82,332	C	<u> </u>					
		(loss)	(1)				-182,332				102 222
	u	Net rental income of	r (loss) (ı) Securit		· · · ▶ (II) Other		-102,332				-182,332
	7a	Gross amount from sales of assets other than inventory	, ,	143,757	(II) Other	-					
	b	Less cost or other basis and sales expenses	878,4	07,422		-					
	c	Gain or (loss)	1,€	36,335]					
		Net gain or (loss) .			•		1,636,335				1,636,335
Other Revenue	8a	Gross income from fu (not including \$ contributions reporte See Part IV, line 18	ed on line 1c)	of	0						
}e∧	H	Less direct expenses		ь	0	1					
ar F		: Net income or (loss)			ents	J	0				
)th	9a	Gross income from g	amıng actıvıtı	es							
J		See Part IV, line 19		а	0						
	ь	Less direct expenses	s	b	0	1					
		: Net income or (loss)		actıvıt	ies	J	0				
	10a	Gross sales of invent returns and allowanc									
	ь	Less cost of goods s	sold	a b		_					
		: Net income or (loss)				J	0				
		Miscellaneous			Business Code						
	11	aLEGAL ESCROW ACC	COUNT		900099		61,203		61,203		
	Ь										
	C	:									
	d	All other revenue .									
		Total. Add lines 11a			>	1					
	12	: Total revenue. See	Instructions				61,203				
							779,053,528	3	5,196,770		3,727,016 Form 990 (2017)

Forr	n 990 (2017)				Page 10
	IT IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nızatıons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX			🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	131,138,955	131,138,955		
2	Grants and other assistance to domestic individuals See Part IV, line 22	50,619,011	50,619,011		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	597,471,944	597,471,944		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,969,559		1,969,559	
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	13,352,657		13,352,657	
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
9	Other employee benefits	3,696,488		3,696,488	
10	Payroll taxes	2,103,611		2,103,611	
11	Fees for services (non-employees)				
ä	a Management	0			
ı	Legal	439,580		439,580	
	: Accounting	989,791		989,791	
	il Lobbying	0			
	Professional fundraising services See Part IV, line 17	0			
1	Investment management fees	1,060		1,060	
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,420,692		1,420,692	
12	Advertising and promotion	0			
13	Office expenses	2,651,957		2,651,957	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	3,089,052		3,089,052	
	Travel	1,002,763		1,002,763	
	Payments of travel or entertainment expenses for any federal, state, or local public officials •	0			
19	Conferences, conventions, and meetings	0			
	Interest	0			
21	Payments to affiliates	0			
	Depreciation, depletion, and amortization	0			
	Insurance	653,165		653,165	
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	·		·	
	a GOODWILL FUND	11,229,998	11,229,998		
	b PROPERTY RESEARCH & RECOVERY	5,379,671	5,379,671		
	c OVERSIGHT & MONITORING	3,251,029		3,251,029	
	d PUBLIC INFO & OUTREACH	1,085,684		1,085,684	
	e All other expenses	2,528,612	466,423	2,062,189	
25	Total functional expenses. Add lines 1 through 24e	834,075,279	796,306,002	37,769,277	0
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)				

Form **990** (2017)

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Liabilities

Fund Balances

Assets or 30

Net

28

29

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32

33

34

420.960.665

6.786.320

593.698.752

27,692,428 167,243,065

195,851

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26.346.931

221,478,275

361,110,875

11.109.602

372,220,477

593.698.752

Form **990** (2017)

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Page **11**

0

		Beginning of year		End of year
1	Cash-non-interest-bearing	0	1	0
2	Savings and temporary cash investments	194,687,612	2	152,092,956
3	Pledges and grants receivable, net	39.945.798	3	4.105.737

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414.368.179

7.877.550

666,300,237

28,226,875

258,274,999

15,031,025

33.809.436

335,342,335

314.213.793

16.744.109

330,957,902

666,300,237

0 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

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

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 324,000 Notes and loans receivable, net . Inventories for sale or use . 8

10b

Assets 285.000 0 9.097.098 9 9.468.074 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D

14 Intangible assets 15 Other assets See Part IV, line 11 . 16 17 Accounts payable and accrued expenses 18 Grants payable . . .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11

Investments—publicly traded securities .

b Less accumulated depreciation

Total assets.Add lines 1 through 15 (must equal line 34) . . . 19 Deferred revenue . . . Tax-exempt bond liabilities 20

21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . Secured mortgages and notes payable to unrelated third parties . . .

22

23 24 25 and other liabilities not included on lines 17-24)

Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third parties,

Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 .

26 27

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

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

Unrestricted net assets

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

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2	Total expenses (must equal Part IX, column (A), line 25)	2	834
3	Revenue less expenses Subtract line 2 from line 1	3	-55
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	330
5	Net unrealized gains (losses) on investments	5	

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

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

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

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

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

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?

Form 990 (2017)

Reconcilliation of Net Assets

Donated services and use of facilities .

Other changes in net assets or fund balances (explain in

Financial Statements and Reporting

10 Net assets or fund balances at end of year Combine line

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

Prior period adjustments . . .

Investment expenses .

Part XI

Part XII

Schedule O

qual Part X, line 33, column (A))	4	330,957,902
	5	345,977
	6	
	7	
	8	
Schedule O)	9	95,938,349
s 3 through 9 (must equal Part X, line 33, column (B))	10	372,220,477

Page **12**

Yes

Yes

Yes

2a

2b

2c

3a

3b

No

Nο

No

Form 990 (2017)

Additional Data

Software ID: Software Version:

EIN: 13-1677841

Name: CONFERENCE ON JEWISH MATERIAL CLAIMS

AGAINST GERMANY INC

Form 990 (2017)

Form 990, Part III, Line 4a:

GERMAN FEDERAL GOVERNMENT HOMECARE FUND TO PROVIDE GRANTS TO INSTITUTIONS WHICH PROVIDE IN-HOME SERVICES TO AGED JEWISH VICTIMS OF NAZI PERSECUTION PURSUANT TO AN AGREEMENT WITH THE GERMAN FEDERAL GOVERNMENT

Form 990, Part III, Line 4b: GERMAN GOVERNMENT FUNDS. TO PROVIDE PAYMENTS TO JEWISH VICTIMS OF NAZI PERSECUTION PURSUANT TO AGREEMENTS BETWEEN THE CONFERENCE ON JEWISH MATERIAL CLAIMS AGAINST GERMANY AND THE GERMAN FEDERAL GOVERNMENT. SUCH PAYMENTS ARE MADE TO INDIVIDUAL VICTIMS OF NAZI PERSECUTION. IN 2017.

80.358 INDIVIDUALS BENEFITED FROM THESE PROGRAMS

Form 990, Part III, Line 4c: CLAIMS CONFERENCE AS SUCCESSOR ORGANIZATION PROGRAM. TO SHARE IN THE PROCEEDS RECEIVED FROM THE RECOVERY OF RESTITUTED PROPERTY PURSUANT TO THE GERMAN FEDERAL GOVERNMENT PROPERTY RESTITUTION LAW SUCH PROCEEDS FROM THESE RECOVERIES ARE ALLOCATED TO HOLOCAUST SURVIVORS, OR THEIR

HEIRS OR INSTITUTIONS BENEFITING HOLOCAUST SURVIVORS, OR CARRYING OUT PROGRAMS OF HOLOCAUST RESEARCH, DOCUMENTATION AND EDUCATION

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

	any nours and a director/trustee)		'	organization	organizations	erganization and			
	for related organizations below dotted line)	mer thest compensated plovee struttonal Trustee struttonal Trustee director		(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations			
JULIUS BERMAN PRESIDENT & AD PERSONAM	16 0	×		x			0	0	0
ABRAHAM BIDERMAN VP & DIRECTOR	16 0	×		х			0	0	0
NATAN SHARANSKY VP & DIRECTOR	4 0	×		х			0	0	0
ALAN PINES TREASURER & DIRECTOR	10 0	×		x			0	0	0
COLETTE AVITAL SECRETARY & DIRECTOR	6 0	×		x			0	0	0

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JONATHAN ARKUSH

DIRECTOR

DIRECTOR

SAM BLOCH

DIRECTOR

DIRECTOR

ANTON BLOCK

ANDREW BAKER

MICHAEL BLAKE

.......

DIRECTOR (BEG 07-01-17)

and Independent Contractors

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

	for related 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
DAVID BOAS DIRECTOR (BEG 07-01-17)	4 0	×						0	0	0
MATTHEW BRONFMAN DIRECTOR	0 0 4 0	×						0	0	0
RON COHEN DIRECTOR	4 0	×						0	0	0
ROGER CUKIERMAN DIRECTOR (BEG 07-01-17)	2 0	×						0	0	0
MARK DATNOW	2.0									

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DIRECTOR
ROGER CUKIERMAN
DIRECTOR (BEG 07-01-17)
MARK DAINOW
DIRECTOR

MICHAEL DONEN

AVRAHAM DUVDEVANI

MARC EISENBERG

DIRECTOR (BEG 07-01-17)

VICTOR MAURO GARELIK

......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

ROBERT GOOT

and Independent Contractors

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

and Independent Contractors

DIRECTOR

DIRECTOR

JACK JACOBS

ALEXEY KARPOV

ROMAN KENT

DIRECTOR

MARY KLUK

DIRECTOR

DIRECTOR

PINKAS KORNFELD

DIRECTOR (BEG 07-01-17)

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4	المصلحات أسمكا							1 (1) 2 (1000	(14, 2/1000	organization and	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JEAN-FRANCOIS GUTHMANN DIRECTOR	4 0	×						0	0	0	
RICHARD HEIDEMAN DIRECTOR (BEG 07-01-17)	2 0	×						0	0	0	
BEN HELFGOTT DIRECTOR	10 0	×						0	0	0	

DIRECTOR (BEG 07-01-17)	0 0					
BEN HELFGOTT	10 0	V			0	
DIRECTOR	0 0	^			U	
WILLIAM HESS	10 0	×			0	
DIRECTOR	0 0	''				
MICHAEL HILSENRATH	2 0					

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

and Independent Contractors

OLEG MORTKOVICH

MICHAEL NEWMAN

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JACK ROSEN

MENACHEM ROSENSAFT

DIRECTOR (BEG 07-01-17)

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ILANA CICUREL REVCOLEVSCHI

	any nours	Land	a dir	ecto	יז /זנ	rustee)	<u>/</u>	organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	101	key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
TOMAS KRAUS DIRECTOR (BEG 07-01-17)	2 0	×						o	0	0
RONALD LAUDER DIRECTOR	4 0	x						0	0	0
ARIEH LEBOWITZ DIRECTOR	2 0	x						0	0	0
MAX ARPELS LEZER	2 0						П	0	0	0

ARIEH LEBOWITZ	2 0	_v				0	0	
DIRECTOR	0 0	^					3	
MAX ARPELS LEZER	2 0			Ī				
DIRECTOR	0 0	×				0	0	
DANIEL MARIASCHIN	8 0	v				0	0	
DIRECTOR	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 hours per compensation amount of other person is both an officer week (list from the from related compensation

)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
ABRAHAM ROSENTAL DIRECTOR	4 0	×						0	0	0	
NIGEL ROSS DIRECTOR	2 0	х						0	0	0	
GARY SALTZMAN DIRECTOR	2 0	х						0	0	0	
DAVID SCHIZER DIRECTOR (BEG 07-01-17)	2 0	×						0	0	0	
RAYMOND SCHRAG DIRECTOR	2 0	х						0	0	0	

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DIRECTOR (BEG 07-01-17)
RAYMOND SCHRAG
DIRECTOR
HARVEY SCHULWEIS

DIRECTOR

DIRECTOR

STEFANIE SELTZER

MARILYN SINCLAIR

NAOMI SMOOK

SIDNEY ZOLTAK

DIRECTOR

DIRECTOR (BEG 07-01-17)

DIRECTOR (BEG 07-01-17)

.......

and Independent Contractors

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

and Independent Contractors

DALIA ITZIK

AD PERSONAM

MEIR KAHALON

AD PERSONAM

....... AD PERSONAM

AVRAHAM NATAN

MARLENE POST

AD PERSONAM

BARUCH SHUB

AD PERSONAM

AD PERSONAM (BEG 07-01-17)

JONA LAKS

	any nours	and	a dir	ecto	r/tr	rustee))	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
CHAIM CHESLER AD PERSONAM	8 0	×						0	0	0
JEHUDA EVRON AD PERSONAM	2 0	×						О	0	0
ALLA GERBER	2 0	X						0	0	0

		X			l n	
AD PERSONAM	0 0	,			J	
ALLA GERBER	2 0	×			n	
AD PERSONAM	0 0	χ.				
MENACHEM HACOHEN	8 0	>				
AD PERSONAM	0 0	^			U	
DALIA ITZIV	2 0					

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

	any hours	1-4-1)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
MARK WILF AD PERSONAM (BEG 07-01-17)	2 0	Х						0	0	0	
BENJAMIN ALBALAS DIRECTOR (THRU 06-30-17)	2 0	х						0	0	0	
MIKHAIL CHLENOV DIRECTOR (THRU 06-30-17)	2 0	х						0	0	0	
ALAN GILL DIRECTOR (THRU 06-30-17)	2 0	X						0	0	0	
ALAN HOFFMANN	4 0	х						0	0	0	

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DIRECTOR (THRU 06-30-17)

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......

RAYA KALENOVA

KEITH LANDY

SHAI PINTO

REUVEN MERHAV

DIRECTOR (THRU 06-30-17)

DIRECTOR (THRU 06-30-17)

DIRECTOR (THRU 02-24-17)

DIRECTOR (THRU 06-30-17)

DIRECTOR (THRU 06-30-17)

ANATOLY KLEYMENOV

and Independent Contractors

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

	<i> </i>					111 2/1000	(14, 24,000	avanniantion and		
	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
SALOMON VAZ DIAS	2 0	×						0	0	0
DIRECTOR (THRU 06-30-17)	0 0									
YEHOSHUA GROSS	2 0	x						0	0	0
AD PERSONAM (THRU 06-30-17)	0 0									
EVA MADJIBOJ	2 0	×						0	0	0
AD PERSONAM (THRU 06-30-17)	0 0									
GREGORY SCHNEIDER	35 0			×				571,702	0	35,448
EXECUTIVE VICE PRESIDENT			l	l	1	1 1				

Х

Х

Х

Х

Х

Х

532,242

484,513

237,445

298,545

262,628

250,653

26,717

42,333

31,869

34,468

22,762

90,426

0

35 0

0 0 35 0

0 0 35 0

0 0 35 0

0.0 35 0

0 0

......

AD PERSONAM (THRU 06-30-17)
GREGORY SCHNEIDER
EXECUTIVE VICE PRESIDENT
JOSEPH BERGER

CHIEF FINANCIAL & INVEST OFFCR

GERMAN OFFICE EMPLOYEES

CHIEF OPERATING OFFICER

ASSISTANT EXECUTIVE VP

DIRECTOR, COMPENSATION PRGMS

SEE SCHEDULE J & O

MICHAEL ELKIN

KAREN HEILIG

RAEL RUBINSTEIN

ARIE BUCHEISTER

CHIEF OF STAFF

and Independent Contractors

and Independent Contractors (A) Name and Title

MIRIAM WEINER

AMY MOYER

CONTROLLER

ASST EXEC VP OF NORTH AMERICA

	hours per week (list any hours for related organizations below dotted line)
	35 C
•••	
	0.0
	35 C

0.0

(B)

Average

Institutional

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

(C)

Position (do not check more than one box, unless person is both an officer and a director/trustee) employee Х

Former

(D) Reportable compensation from the organization (W- 2/1099-MISC) 227,414 200,938

from related

organizations (W- 2/1099-MISC)

(E)

Reportable

compensation

compensation from the organization and related organizations 35,448

3,650

(F)

Estimated

amount of other

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
SCHEDULE D | Supplemental Final

Supplemental Financial Statements

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

2017

DLN: 93493312007358 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

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

Open to Public Inspection ation number

	me of the organization IFERENCE ON JEWISH MATERIAL CLAIMS			Employer iden	tification number			
	INST GERMANY INC			13-1677841				
Pa	organizations Maintaining Donor Adv			or Accounts.				
	Complete if the organization answered "Y		dvised funds	(b)Funds a	and other accounts			
	Total number at end of year	(u) Bollor u	avisca ranas	(B) and c	ma other accounts			
,	Aggregate value of contributions to (during year)							
- }	Aggregate value of grants from (during year)							
ı	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisorganization's property, subject to the organization's e		assets held in donor a	dvised funds are th	e Yes No			
5	Did the organization inform all grantees, donors, and or charitable purposes and not for the benefit of the dono private benefit?				ssible			
Par	t III Conservation Easements. Complete if	the organization ans	wered "Yes" on For	m 990, Part IV, I				
L	Purpose(s) of conservation easements held by the org			,				
	Preservation of land for public use (e.g., recreation	on or education)	Preservation of a	n historically import	ant land area			
	Protection of natural habitat	. [Preservation of a	certified historic st	ructure			
	Preservation of open space	_						
,	Complete lines 2a through 2d if the organization held	a qualified conservation	contribution in the f	orm of a concernation	nn			
•	easement on the last day of the tax year	a quanneu conservation	r contribution in the R		the End of the Year			
а	Total number of conservation easements			2a				
b	Total acreage restricted by conservation easements			2b				
c	Number of conservation easements on a certified histo	rıc structure ıncluded ır	n (a)	2c				
d	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register							
3	Number of conservation easements modified, transfer tax year ▶	ed, released, extinguis	hed, or terminated by	y the organization d	uring the			
Ļ	Number of states where property subject to conservat	on easement is located	ı ▶					
5	Does the organization have a written policy regarding and enforcement of the conservation easements it hole		, inspection, handling	_	☐ Yes ☐ No			
5	Staff and volunteer hours devoted to monitoring, insperience.	ecting, handling of viola	ations, and enforcing o	conservation easem	ents during the year			
,	Amount of expenses incurred in monitoring, inspecting \$ \begin{align*} \text{*}	, handling of violations	, and enforcing conse	ervation easements	during the year			
3	Does each conservation easement reported on line 2(c	l) above satisfy the req	uirements of section	170(h)(4)(B)(ı)				
	and section 170(h)(4)(B)(II)?	,,			☐ Yes ☐ No			
)	In Part XIII, describe how the organization reports cor balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organ						
ar	Organizations Maintaining Collections Complete if the organization answered "Y			her Similar Ass	ets.			
La	If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	r public exhibition, edu	cation, or research in					
b								
(i) Revenue included on Form 990, Part VIII, line 1			▶ \$				
(i	i)Assets included in Form 990, Part X			▶ \$				
2	If the organization received or held works of art, histo following amounts required to be reported under SFAS			ancıal gaın, provide	the			
а	Revenue included on Form 990, Part VIII, line 1	, ,	-	▶ \$				
	Assets included in Form 990, Part X			 ▶ \$				
	Paperwork Poduction Act Notice see the Instruction	f F 000	C-+ N-	F +	ulo D /Form 990\ 201			

Par		Organizations Maintai	ning Collection	ons of Art,	, Histori	ical T	reas	ures, or	Other	Similar	· Assets (contin	ued)	
3		the organization's acquisition (check all that apply)	, accession, and	other record	ds, check	any of	the f	ollowing t	hat are	a significa	nt use of it	s colle	ction	
а		Public exhibition			d		Loar	n or excha	ange pro	grams				
b		Scholarly research			e		Othe	er						
c	Preservation for future generations													
4	Provide Part	de a description of the organiz KIII	ation's collection	s and explai	ın how th	ey furtl	her th	ne organız	ation's e	exempt pu	irpose in			
5		g the year, did the organizations to be sold to raise funds rati								mılar	□ Y	es	□ N-	0
Pai	rt IV	Escrow and Custodial Complete if the organiza X, line 21.			orm 990), Part	IV,	line 9, or	report	ed an an	nount on	Form	990,	Part
1a	Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No													
ь	If "Ye	es," explain the arrangement i	n Part XIII and c	omplete the	following	table					Amount			_
С	Begin	ning balance							1c					
d	Addıt	ions during the year							1d					
е	Dıstrı	butions during the year							1e					
f	Endın	ig balance							1 f					_
2 a	Dıd tl	ne organization include an am	ount on Form 99	0, Part X, lır	ne 21, for	escrov	v or c	ustodial a	ccount l	iability?	□ Y	es	□ N	0
b	If "Ye	s," explain the arrangement i	n Part XIII Chec	k here if the	explanat	ion has	s beer	n provided	d in Part	XIII				
Pa	rt V	Endowment Funds. Co	mplete if the c	rganızatıor	n answei	red "Y	es" c	n Form	990, Pa	ırt IV, lın	e 10.			
			(a)	Current year	(b)P	rıor yea	ır	(c)Two ye	ears back	(d)Three	years back	(e) Fo	ur year	s back_
	_	ing of year balance												
		outions												
		estment earnings, gains, and	losses											
		or scholarships												
е		expenditures for facilities ograms												
		strative expenses												
g	End of	year balance												
2		de the estimated percentage o	•	ar end balan	ce (line 1	g, colu	mn (a	a)) held a	s					
а		d designated or quasi-endowm	nent 🟲											
b		anent endowment 🟲												
c	Temp	orarily restricted endowment	>											
_		percentages on lines 2a, 2b, ar												
3а		here endowment funds not in nization by	the possession o	t the organiz	zation tha	t are h	eld ai	nd admini	stered f	or the		Г	Yes	No
	-	nrelated organizations									3	a(i)	103	
	(ii) r	elated organizations									3	a(ii)		
b		es" on 3a(II), are the related o	-				? .					3b		
4	Descr	ribe in Part XIII the intended i	uses of the organ	ization's end	dowment	funds								
Pai	rt VI	Land, Buildings, and E		"Voo" on F	OOC	\ Dowt		11.	C 0 0 F 0	000	Dowt V. Ju	na 10		
	Descri	Complete if the organiza	Cost or other basi		ost or other	•				depreciatio		(d) Boo		<u> </u>
		parama proposa,	(investment)					ļ , ,						
1a	Land													
b	Buildin	gs						1						
С	Leaseh	old improvements												
d	Equipn	nent												
Tota	ıl. Add	lines 1a through 1e (Column ((d) must equal F	orm 990, Pa	rt X, colui	mn (B)	, line	10(c)).		>				

Investments—Other Securities. Complete if t See Form 990, Part X, line 12.	he organizat	ion answere	ed "Yes" on Form 990	, Fait IV, line IID.
(a) Description of security or category (including name of security)		(b) Book value		of valuation year market value
Financial derivatives				
Closely-held equity interests Other	· · ·			
al. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
rt VIII Investments—Program Related. Complete if the organization answered 'Yes' on	Form 990, P			
(a) Description of investment	(b) Bo	ok value		of valuation year market value
tal. (Column (b) must equal Form 990, Part X, col (B) line 13)	•			
Other Assets. Complete if the organization answere (a) Description		n 990, Part I\	/, line 11d See Form 99	90, Part X, line 15 (b) Book value
tal. (Column (b) must equal Form 990, Part X, col (B) line 15) art X Other Liabilities. Complete if the organization	answered 'Ye	· · ·		▶ e or 11f.
	answered 'Ye	es' on Form	· · · · · ·	
Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	answered 'Ye	(b) Book	value 0	
Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	answered 'Ye	(b) Book	value	
See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	answered 'Ye	(b) Book	value 0	
Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	answered 'Ye	(b) Book	value 0	
See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	answered 'Ye	(b) Book	value 0	
See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	answered 'Ye	(b) Book	value 0	
al. (Column (b) must equal Form 990, Part X, col (B) line 15) art X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes ODWILL FUND CLAIMANTS LIAB	answered 'Ye	(b) Book	value 0	
tal. (Column (b) must equal Form 990, Part X, col (B) line 15) art X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes ODWILL FUND CLAIMANTS LIAB	answered 'Ye	(b) Book	value 0	
See Form 990, Part X, line 25.	answered 'Ye	(b) Book	value 0	
tal. (Column (b) must equal Form 990, Part X, col (B) line 15) art X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes ODWILL FUND CLAIMANTS LIAB	answered 'Ye	(b) Book	value 0	

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

а Net unrealized gains (losses) on investments 2a 345.977 2b b

2c c d 2d 73.195

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

2e e 3 3 779,668,985

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

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

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

4 Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b -615.457 b

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

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

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

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

Schedule D (Form 990) 2017

Part XI

Part XII

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5

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

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

Add lines 2a through 2d

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 . .

2a 2b

2c

2d

4a

4b

Explanation

Page 4

780,088,157

419,172

-615,457

779,053,528

740,401,591

-93,673,688

834,075,279

834.075.279

Schedule D (Form 990) 2017

4c

5

2e

3

4c

5

-93,673,688

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

Schedule D (Form 990) 2017

Additional Data

Software ID:

Software Version:

EIN: 13-1677841

Name: CONFERENCE ON JEWISH MATERIAL CLAIMS AGAINST GERMANY INC

Supplemental Information

Return Reference	Explanation
OTHER ASSETS	SCHEDULE D, PART IX PROPERTY COMPENSATION RECEIVABLE

Supplemental Imeliation	
Return Reference	Explanation
UNCERTAIN TAX POSITIONS	SCHEDULE D, PART X, LINE 2 THE CLAIMS CONFERENCE IS A NOT-FOR-PROFIT AGENCY EXEMPT FROM U S FEDERAL INCOME TAX UNDER SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE, AND STATE AND LOCAL INCOME TAXES THE CLAIMS CONFERENCE IS EXEMPT FROM TAXES IN GERMANY AND ISRAEL BASED ON LOCAL TAX CODES THE CLAIMS CONFERENCE FOLLOWS ACCOUNTING STANDARDS UPDATE NO 2009-06 , IMPLEMENTATION GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND DISCLOSURE AME NDMENTS FOR NONPUBLIC ENTITIES ACCORDINGLY, THE CLAIMS CONFERENCE RECOGNIZES THE EFFECT O F INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED

Supplemental Information

Supplemental Information Return Reference Explanation RECONCILIATION OF REVENUE SCHEDULE D, PART XI, LINES 2D AND 4B LINE 2D NET CHANGE IN YEAR-END ESTIMATED VALUE OF UNS

PER AUDITED FINANCIAL STATEMENTS WITH FORM 990 --------\$ 73,195 LINE 4B RECLASSIFICATION OF RENTAL EXPENSE -\$ (615,457) -------TOTAL OTHER CHANGES LINE 4B -----\$ (615,457)

Supplemental Information	
Return Reference	Explanation
RECONCILIATION OF EXPENSES PER AUDITED FINANCIAL STATEMENTS WITH FORM 990	SCHEDULE D, PART XII, LINE 2D RECLASSIFICATION OF RENTAL EXPENSE\$ 615,457 GRANT CANCELLATIONS AND ADJUSTMENTS\$ (94,307,661) RELATED TAX-EXEMPT ORGANIZA TION EXPENSES\$ 18,516 TOTAL OTHER CHANGES LINE 2D

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data	ta - DLN: 934933120							
SCHEDULE F (Form 990)	Statement o	f Activities	s Outside the United States							
(► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.									
	► Attach to Form 990. ► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Open to Public									
Department of the Treasurv Internal Revenue Service		,		,	Inspection					
Name of the organization				Employer ider	tification number					
CONFERENCE ON JEWISH M AGAINST GERMANY INC	IATERIAL CLAIMS			13-1677841						
	formation on Activiti art IV, line 14b.	es Outside the l	Jnited States. Comple	ete if the organization a	nswered "Yes" to					
other assistance, the to award the grants	e grantees' eligibility for or assistance? Describe in Part V the o	the grants or assi	substantiate the amoun stance, and the selection dures for monitoring the	-	✓ Yes □ No her assistance					
3 Activites per Region	(The following Part I, line	3 table can be dupl	cated if additional space is	s needed)						
(a) Region	(b) Number offices in the region		(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region					
(1) See Add'l Data										
(2)										
(3)										
(4)										
(5)										
3a Sub-total b Total from continuatio Part I	n sheets to	9 267			743,468,545					
c Totals (add lines 3a a		9 267		No 50082W Schedu	743,468,545 le F (Form 990) 2017					

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data	1							
(2)								
(3)								
(4)								
(5)							Schedule	F (Form 990) 2017
(6)								
(7)								
(8)								

(7)				
(8)				
(9)				
(10)				

(11) (12) (13)

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(14)

(15) (16) 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

127

(3) (4)

(5) (6)

(7) (8) (9) (10) (11) (12)

(13) (14)

(15) (16) (17) (18) Page 3

Schedule F (Form 990) 2017

Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement non-cash of non-cash valuation (book, FMV,

		3	assistance	assistance	
(1) See Add'l Data					

appraisal, other)

(2)

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

Schedule F (Form 990) 2017 Page 5 Part V Supplemental Information equired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;

I GI C C	Supplemental Informati
	Provide the information red

amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions). Return Explanation

Reference	Explanation
MONITORING FOREIGN GRANTS	SCHEDULE F, PART I, LINE 2 THE CLAIMS CONFERENCE BOARD OF DIRECTORS APPROVES NEW INSTITUTIONAL ALLOCATIONS APPROXIMATELY EVERY SIX MONTHS ONCE THE GRANTS ARE APPROVED, INSTITUTIONS RECEIVE AN OFFICIAL LETTER OF NOTIFICATION THE GRANT LETTER INCLUDES THE ALLOCATION AMOUNT, PURPOSE OF THE GRANT AND ALL OTHER TERMS AND CONDITIONS OF IMPLEMENTATION INSTITUTIONS MUST CONFIRM ACCEPTANCE OF THE GRANT TERMS AND ARE GENERALLY REQUIRED TO SUBMIT AN AMENDED BUDGET BEFORE THEY CAN BEGIN IMPLEMENTATION SOCIAL SERVICES PROGRAMS FOR ON-GOING SERVICES ARE REQUIRED TO REPORT QUARTERLY ON THE PROGRESS OF THE PROJECTS AND RESEARCH, EDUCATION AND DOCUMENTATION PROJECTS ARE REQUIRED TO SUBMIT SEMI-ANNUAL REPORTS THE REPORTS INCLUDE A PROGRAMMATIC, FINANCIAL AND STATISTICAL REPORT (WHERE APPLICABLE) CAPITAL PROJECTS REPORT ACCORDING TO THE PROGRESS OF THE PROJECTS, AND SUCH REPORTING GENERALLY INCLUDE A STATEMENT FROM AUDITORS DETAILING EXPENDITURES OF THE PROJECTS TO DATE THE PROGRESS OF EACH GRANT IS CLOSELY MONITORED BY THE CLAIMS CONFERENCE STAFF, WHICH IS RESPONSIBLE FOR REVIEWING ALL OF THE FINANCIAL AND PROGRAMMATIC ACTIVITIES TO E INSURE ACCOUNTABILITY AND CONFORMITY TO THE PROGRAM PLAN AND COMPLIANCE WITH REQUIREMENTS AND REGULATIONS FUNDS ARE RELEASED AFTER THE REVIEW OF REPORTS, ALTHOUGH FUNDS MAY BE ADVANCED BASED UPON INSTITUTION NEED ALL GRANTS OF \$125,000 AND ABOVE ARE REQUIRED. UPON COMPLETION OF THE PROJECT, TO SUBMIT A SEPARATE AUDIT OR PROCEDURE WHICH INCLUDES AN AUDITOR'S CONFIRMATION OF THE AMOUNT RECEIVED FROM THE CLAIMS CONFERENCE, THE TOTAL AMOUNT EXPENDED AND THAT THE FUNDS WERE USED FOR THE PURPOSES FOR WHICH THEY WERE GRANTED THE CLAIMS CONFERENCE ADMINISTERS ONE-TIME, MONTHLY AND QUARTERLY PAYMENT PROGRAMS FOR INDIVIDUAL VICTIMS OF NAZI PERSECUTION APPLICATIONS ARE SUBMITTED TO THE CLAIMS CONFERENCE OFFICES LOCATED IN NEW YORK, FRANKFURT OR TEL AVIV THE INFORMATION IN EACH APPLICATION IS ENTERED AND SCHORED UPON THE BANKING INFORMATION PROVIDED BY THE INDIVIDUAL CLAIMANT FILE IS GENERATED BANKED UPON THE

Return Reference	Explanation
RANT	SCHEDULE F, PART II & PART III PURPOSE OF ALL GRANTS - ASSISTANCE TO JEWISH VICTIMS OF NAZI
URPOSE	PERSECUTION

Additional Data

Middle East and North Africa

Software ID: Software Version:

EIN: 13-1677841

EIN. 13-10//04.

Name: CONFERENCE ON JEWISH MATERIAL CLAIMS AGAINST GERMANY INC

FACILITATE

GRANTMAKING

8,038,252

Form	990	Schedule F	Part I -	Activities	Outside	The U	nited States	
		ocircuaic i		ACCIVICIOS	O utside		incea states	

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	4	155	· · · · 3 · · · · · · · · · · · · · · · · · · ·	FACILITATE GRANTMAKING	26,809,101

110 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Russia and the Newly 2 Program Services FACILITATE 26.964 Independent States IGRANTMAKING Central America and the Grants to Recipients 78.092 |Grantmaking Carıbbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) East Asia and the Pacific 17.324.664 |Grantmaking Grants to Recipients Europe (Including Iceland and Grantmakıng Grants to Recipients 180,070,753 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Middle Fast and North Africa 251.153.786 l Grantmakına Grants to Recipients North America Grantmakıng Grants to Recipients 32,859,235

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 109.000.080 Russia and the Newly |Grantmaking Grants to Recipients Independent States 6,800,876 South America |Grantmaking Grants to Recipients

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South Asia 4.615 lGrantmakınd Grants to Recipients Sub-Saharan Africa Grantmakıng Grants to Recipients 179,843

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures ın region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 47.890.071 lInvestments Greenland) Middle East and North Africa 63,232,213 Investments

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) IEast Asia and ISEE PART V 9,457,048 Wire Ithe Pacific East Asia and ISEE PART V 15.000 Wire

Ithe Pacific

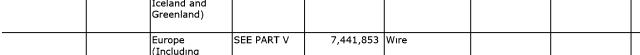
(i) Method of ' (h) Description . l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 28,247 Wire Europe (Includina Iceland and Greenland)

Greenland)

Europe SEE PART V 1,972,232 Wire (Including

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 28,839 Wire ISEE PART V Europe (Includina Iceland and Greenland) ISEE PART V 14.350 Wire Europe (Includina

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 5,806 Wire lEurope (Includina Iceland and Greenland)



(I) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 80,000 Wire Europe (Includina Iceland and Greenland) SEE PART V 964.825 Wire

Europe (Includina Iceland and Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States

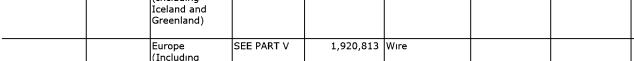
(i) Method of ' (h) Description . l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 1,634,659 Wire lEurope (Includina Iceland and Greenland)

ISEE PART V 359.540 Wire Europe (Includina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 56,493 Wire ISEE PART V Europe (Includina Iceland and Greenland) ISEE PART V 9.764 Wire Europe

(Includina

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 1,258,562 Wire lEurope (Includina Iceland and Greenland)



Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 8,710 Wire ISEE PART V Europe (Includina Iceland and Greenland) ISEE PART V 8.452 Wire Europe (Includina

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 1.710,803 Wire lEurope (Includina Iceland and Greenland)

ISEE PART V 866.500 Wire Europe (Includina

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 4,283,927 Wire lEurope (Includina Iceland and Greenland)

ISEE PART V 46.385 Wire Europe (Includina

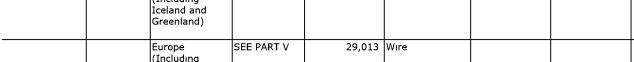
Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 25,022 Wire ISEE PART V Europe (Includina Iceland and Greenland) ISEE PART V 10.960 Wire Europe (Includina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 5,480 Wire ISEE PART V Europe (Includina Iceland and Greenland) ISEE PART V 60.000 Wire Europe (Includina

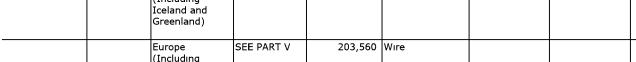
(i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 23,411 Wire Europe l (Includina Iceland and Greenland) SEE PART V 18,152,097 Wire Europe

(Includina

(i) Method of ' (h) Description . l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 1,093,232 Wire lEurope (Includina Iceland and Greenland)



(I) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 31,637 Wire Europe (Includina Iceland and Greenland)



(I) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 202,836 Wire Europe (Includina Iceland and Greenland)

720.730 Wire

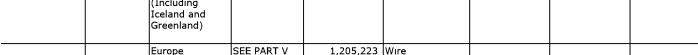
Form 990 Schedule F Part II - Grants or Entities Outside The United States

Europe (Including Iceland and Greenland) SEE PART V

(I) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 794,812 Wire Europe (Includina Iceland and Greenland)

SEE PART V 707.359 Wire Europe (Includina

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 2,393,410 Wire lEurope (Includina Iceland and Greenland)



(Includina lIceland and (Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 98,611 Wire ISEE PART V Europe (Includina Iceland and Greenland) ISEE PART V 13.982 Wire Europe (Includina

(i) Method of ' (h) Description . l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 5,649 Wire lEurope (Includina Iceland and Greenland)



(I) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 18,000 Wire Europe (Includina Iceland and Greenland)

SEE PART V 318.631 Wire Europe (Includina

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 1,108,512 Wire lEurope (Includina Iceland and Greenland)

ISEE PART V 610.624 Wire Europe (Includina

(I) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 16,948 Wire Europe (Includina Iceland and Greenland) SEE PART V 516.443 Wire

Europe (Includina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISEE PART V 6,250 Wire Europe (Includina Iceland and Greenland) ISEE PART V 19.200 Wire Europe (Includina

(I) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 41,583 Wire Europe (Includina Iceland and Greenland)

SEE PART V 551.799 Wire Europe (Includina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SEE PART V 81,748 Wire Europe (Includina Iceland and Greenland) Middle East and SEE PART V 278.194 Wire

North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 466,314 Wire land North Africa Middle East ISEE PART V 556.389 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 294,886 Wire land North Africa Middle East ISEE PART V 125.187 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal. applicable) assistance other) Middle East SEE PART V 278,194 Wire land North Africa Middle East SEE PART V 1.005.829 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 358,036 Wire land North Africa Middle East ISEE PART V 242.029 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 114,171 Wire and North Africa Middle East ISEE PART V 506.625 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 191,954 Wire land North Africa Middle East ISEE PART V 79.285 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East SEE PART V 27,193 Wire land North Africa Middle East SEE PART V 12.519 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 226,033 Wire land North Africa Middle East ISEE PART V 744,170 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 119,701,133 Wire land North Africa Middle East ISEE PART V 66.356 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 20,976 Wire and North Africa Middle East ISEE PART V 150.225 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 125,841 Wire land North Africa Middle East ISEE PART V 203.082 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 22,951 Wire land North Africa Middle East ISEE PART V 100.150 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 241,925 Wire land North Africa Middle East ISEE PART V 312,412 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 12,853 Wire and North Africa Middle East ISEE PART V 264.285 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal. applicable) assistance other) Middle East SEE PART V 284,315 Wire land North Africa Middle East SEE PART V 1.947.360 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 26,150,264 Wire Middle East SEE PART V land North Africa Middle East ISEE PART V 20.308 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 125,187 Wire land North Africa Middle East ISEE PART V 281.199 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East SEE PART V 41,729 Wire land North Africa Middle East SEE PART V 39.643 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal. applicable) assistance other) Middle East SEE PART V 41,173 Wire land North Africa Middle East SEE PART V 2.030.818 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal. applicable) assistance other) Middle East SEE PART V 36,868 Wire land North Africa Middle East SEE PART V 2.917.069 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East SEE PART V 18,083 Wire land North Africa Middle East SEE PART V 48.128 Wire land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 222,555 Wire land North Africa Middle East ISEE PART V 11.128 Wire and North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East ISEE PART V 64,193 Wire land North Africa North America ISEE PART V 6.169 Wire

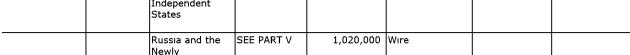
Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) North America SEE PART V 9,311,442 Wire North America SEE PART V 7,923,416 Wire

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) North America ISEE PART V 294,247 Wire North America SEE PART V 296,350 Wire

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) North America SEE PART V 1.159.724 Wire North America SEE PART V 265,324 Wire

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of |(d) Purpose of|(e) Amount of| section (c) Region (book, FMV, non-cash cash and EIN(ıf cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) North America ISEE PART V 70,500 Wire Russia and the ISEE PART V 40,000 Wire Newly Independent States

(i) Method of l(b) IRS codel (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) Russia and the ISEE PART V 520,000 Wire Newly Independent States



Form 990 Schedule F Part II - Grants or Entities Outside The United States

Independent States

(ı) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. cash non-cash and EIN(If organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Russia and the ISEE PART V 107,766 Wire lNewly Independent States Russia and the ISEE PART V 19.836.052 Wire

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Newly Independent States

(I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(ıf cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Russia and the ISEE PART V 45,000 Wire Newly Independent States Russia and the ISEE PART V 92,470 Wire

Newly Independent States

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV. cash non-cash and EIN(If organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Russia and the ISEE PART V 3,488,906 Wire lNewly Independent States Russia and the ISEE PART V 28.085.343 Wire

Newly

Independent States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) Russia and the ISEE PART V 80,750 Wire Newly Independent States Russia and the ISEE PART V 780.000 Wire Newly Independent

States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (a) Name of (d) Purpose of (e) Amount of I section (c) Region (book, FMV, non-cash cash and EIN(ıf cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Russia and the ISEE PART V 7.433 Wire Newly Independent States ISEE PART V 13,875 Wire South America

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) South America SEE PART V 307,568 Wire ISouth America ISEE PART V 38,500 Wire

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) South America SEE PART V 129,671 Wire |South America | SEE PART V 1,958,090 Wire

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization arant non-cash disbursement assistance appraisal. applicable) assistance other) South America SEE PART V 2,220,745 Wire Sub-Saharan SEE PART V 24.250 Wire Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (e) Manner of cash (g) Description of (h) Method of (c)Number (d) Amount of (f) Amount of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) See Part V 19 78,092 Wire Central America and the Carıbbean See Part V 1.186 5,392,199 Wire East Asia and the Pacific

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (e) Manner of cash (f) Amount of (q) Description of (h) Method of (c)Number (d) Amount of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) See Part V 27,953 125,766,964 Wire Europe (Including Iceland and (Greenland See Part V 21,686 90,140,605 Wire Middle East and North Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (d) Amount of (e) Manner of cash (g) Description of (h) Method of (c)Number (f) Amount of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) 13,532,063 Wire See Part V 4,683 North America 54,896,360 Wire See Part V 15,841 Russia and the Newly Independent States

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (c)Number (d) Amount of (e) Manner of cash (f) Amount of (q) Description of (h) Method of (b) Region assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV. appraisal. other) See Part V 477 2,132,427 Wire South America See Part V 4,615 Wire South Asia

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) See Part V 34 155,593 Wire Sub-Saharan Africa

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLI	N: 934933120	07358
Schedule I (Form 990) Department of the Treasury	Co	Governments mplete if the organiz	Other Assistandand Individual ation answered "Yes," Attach to Form le I (Form 990) and its	S in the Unite on Form 990, Part IV n 990.	d States , line 21 or 22.		O	2017 Open to Public Inspection	
Internal Revenue Service Name of the organization						Emplo	yer ıdentıfic	ation number	
CONFERENCE ON JEWISH MATER AGAINST GERMANY INC						13-16	77841		
		and Assistance							
 Does the organization main the selection criteria used Describe in Part IV the org 	to award the grants Janization's procedur	or assistance? res for monitoring the u	se of grant funds in the U	nited States			Doub IV June	✓ Yes	□ No
			ditional space is needed	ents. Complete if the o	rganızatıon answered "Yes	on Form 990, i	Part IV, line	21, for any recip	ient
(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) Descrip noncash ass		(h) Purpose of or assistance	f grant
(1) See Addıtıonal Data									
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2 Enter total number of sect3 Enter total number of othe		-					. •		95 9
For Paperwork Reduction Act Note				Cat No 50055			Sch	edule I (Form 990) 2017

recipients

Schedule I (Form 990) 2017

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(1) SEE PART IV	11201	50,619,011	CASH	
(2)				
(3)				
(4)				
(5)				
(6)				

noncash assistance

FMV, appraisal, other)

Page 2

Schedule I (Form 990) 2017

(6)						
(7)						
Part IV Supplemental 3	Information	on. Provide the in	nformation required in	Part I, line 2; Part III,	column (b); and any other	addıtıonal ınformatıon.
Return Reference	Explanation	on				
MONITORING GRANTS	ONCE THE	GRANTS ARE APPRO	OVED, INSTITUTIONS REC	EIVE AN OFFICIAL LETTE	R OF NOTIFICATION THE GRAN	ALLOCATIONS APPROXIMATELY EVIT LETTER INCLUDES THE ALLOCATION OF THE CONTRACT

VERY SIX MONTHS ATION AMOUNT, PURPOSE OF THE GRANT AND ALL OTHER TERMS AND CONDITIONS OF IMPLEMENTATION INSTITUTIONS MUST CONFIRM ACCEPTANCE OF THE GRANT TERMS AND ARE GENERALLY REQUIRED TO SUBMIT AN AMENDED BUDGET BEFORE THEY CAN BEGIN IMPLEMENTATION SOCIAL SERVICES PROGRAMS FOR ON-GOING SERVICES ARE REQUIRED TO REPORT QUARTERLY ON THE PROGRESS OF THE PROJECTS AND RESEARCH. EDUCATION AND DOCUMENTATION PROJECTS ARE REQUIRED TO SUBMIT SEMI-ANNUAL REPORTS THE REPORTS INCLUDE A PROGRAMMATIC, FINANCIAL AND STATISTICAL REPORT (WHERE APPLICABLE) CAPITAL PROJECTS REPORT ACCORDING TO THE PROGRESS OF THE PROJECTS, AND SUCH REPORTING GENERALLY INCLUDE A STATEMENT FROM AUDITORS DETAILING EXPENDITURES OF THE PROJECTS TO DATE THE PROGRESS OF EACH GRANT IS CLOSELY MONITORED BY THE CLAIMS CONFERENCE STAFF, WHICH IS RESPONSIBLE FOR REVIEWING ALL OF THE FINANCIAL AND PROGRAMMATIC ACTIVITIES TO ENSURE ACCOUNTABILITY AND CONFORMITY TO THE PROGRAM PLAN AND COMPLIANCE WITH REQUIREMENTS AND REGULATIONS. FUNDS ARE RELEASED AFTER THE REVIEW OF REPORTS, ALTHOUGH FUNDS MAY BE ADVANCED BASED UPON INSTITUTION NEED ALL GRANTS OF \$125,000 AND ABOVE ARE REQUIRED. UPON COMPLETION OF THE PROJECT, TO SUBMIT A SEPARATE AUDIT OR PROCEDURE WHICH INCLUDES AN AUDITOR'S CONFIRMATION OF THE AMOUNT RECEIVED FROM THE CLAIMS CONFERENCE, THE TOTAL AMOUNT EXPENDED AND THAT THE FUNDS WERE USED FOR THE PURPOSES FOR WHICH THEY WERE GRANTED THE CLAIMS CONFERENCE ADMINISTERS ONE-TIME, MONTHLY AND QUARTERLY PAYMENT PROGRAMS FOR INDIVIDUAL VICTIMS OF NAZI PERSECUTION APPLICATIONS ARE SUBMITTED TO THE CLAIMS CONFERENCE OFFICES LOCATED IN NEW YORK, FRANKFURT OR TEL AVIV THE INFORMATION IN EACH APPLICATION IS ENTERED AND SCANNED INTO A DATABASE SHARED BY EACH OF THE OFFICES CLAIMS CONFERENCE STAFF REVIEW THE INFORMATION FOR ELIGIBILITY (AS DETERMINED BY THE GERMAN GOVERNMENT) AND AFTER SUPERVISORY APPROVAL, THE INFORMATION IS BATCHED AND SENT FOR A FINAL REVIEW BEFORE A PAYMENT FILE IS GENERATED BASED UPON THE BANKING INFORMATION PROVIDED BY THE INDIVIDUAL CLAIMANT FOR THOSE PROGRAMS THAT ARE ONGOING IN NATURE. THE CLAIMANT INFORMATION IS REVIEWED ON AN ANNUAL BASIS THE PAYMENT FILE IS THEN ENCRYPTED AND SENT TO THE CLAIMS CONFERENCE'S TRANSFER AGENT. THE GERMAN GOVERNMENT PERFORMS REGULAR AUDITS OF VARIOUS ASPECTS OF THE PROCESS SCHEDULE I. PART II & III PURPOSE OF ALL GRANTS - ASSISTANCE TO JEWISH VICTIMS OF NAZI PERSECUTION GRANT PURPOSE

Additional Data

AHAVAS YISRAEL CHARITY

3207 FALLSTAFF RD Baltimore, MD 21215 Amer Assn Jewish Holocaust

Surv Grtr Boston 391 Boylston St Brookline, MA 02445

FUND

Software ID: **Software Version:**

EIN: 13-1677841

Name: CONFERENCE ON JEWISH MATERIAL CLAIMS

65,000

20,000

AGAINST GERMANY INC

52-1219478

04-2602020

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation

501(c)3

501(c)3

ıf applicable	grant	cash	(book, FMV, appraisal,	1
		assistance	other)	ĺ
				ĺ
		ıf applicable grant	assistance	assistance other)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(g) Description of

non-cash assistance

(h) Purpose of grant

or assistance

SEE PART IV

SEE PART IV

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Amer Jewish Joint Distribution 13-1656634 501(c)3 100.000 SEE PART IV Committee 711 Third Ave 10th Flr New York, NY 10017 Assn of Holocaust Survivors 11-3395358 501(c)3 15.900 SEE PART IV

from the FSU 11 Seacoast Terr Ste C Brooklyn, NY 11235

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 23-2230551 501(c)3 11.305 SEE PART IV Assn of Jewish Holocaust Survivors in Philadelphia 2102 Bowler St Philadelphia, PA 19115

14.400

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Auschwitz Inst Peace &

Reconciliation 2 W 45th St Ste 1602 New York, NY 10036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Bet Tzedek Legal Services 23-7304205 501(c)3 30.000 SEE PART IV 3250 Wilshire Blvd

Los Angeles, CA 90010 Bikur Cholim of Rockland 13-3211807 501(c)3 683,507 SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

County 25 Robert Pitt Dr Ste 101 Monsey, NY 10952

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Blue Card Inc 13-1623910 501(c)3 1,465,142 SEE PART IV 171 Madison Ave New York, NY 10016

42.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Center for Holocaust and

Humanity Education 8401 Montgomery Rd Cincinnati, OH 45236

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Center for Medicine After the 27-2702772 501(c)3 47.800 SEE PART IV Holocaust

3122 Robinhood St Houston, TX 77005

60.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Clark University 950 Main St

Worcester, MA 01610

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 13-1677841 501(c)3 75.000 SEE PART IV Claims Conference -Independent Evaluations 1359 Broadway Rm 2000 New York, NY 10018

60.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Claims Conf Holocaust

Awareness and Knowledge 1359 Broadway Rm 2000 New York, NY 10018

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 13-3683265 501(c)3 143.047 SEE PART IV Community Improvement Council Inc

766 N Main St Ste 108 Spring Valley, NY 10977 Dev Fdn NC CTR for 56-1884667 501(c)3 38.250 SEE PART IV Advancement of Teaching

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

276NCCATDr Cuowhee, NC 28723

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Edith and Carl Marks Jewish 11-1633484 501(c)3 22.035 SEE PART IV Community House of Ben 7802 Bav Pkwv Brooklyn, NY 11214 Facing History & Ourselves 04-2761636 501(c)3 63.750 SEE PART IV

National Fdn 16 Hurd Rd

Brookline, MA 02445

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance F&G Alpert Jewish Family & 59-1520581 501(c)3 3.358.527 SEE PART IV Children's Svc 5841 Corporate Way W Palm Beach, FL 33407 Goodman Jewish Family Svcs 59-0995106 501(c)3 17.370.988 SEE PART IV Inc Broward Ctv

100 S Pine Island Rd Plantation, FL 33324

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Guardians of the Sick Bikur 11-6003433 501(c)3 8.152.030 SEE PART IV Cholim Hesed Org 5216 11th Ave Brooklyn, NY 11219

921.076

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Gulf Coast Jewish Family &

Community Svcs 14041 Icot Blvd Clearwater, FL 33760

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Headfirst Arts & Media 46-2843898 501(c)3 30.000 SEE PART IV

1122 Francisco St Berkeley, CA 94702

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

New York, NY 10158

Hidden Child Foundation - ADL 13-1818723 501(c)3 18,200 SEE PART IV 605 Third Ave

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Holocaust & Jewish Resistance 13-3128513 501(c)3 145.200 SEE PART IV Teacher Training P

Teacher Training P
PO BOX 1922
New York, NY 10156

7.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

New York, NY 10156

Holocaust Awareness Museum 10100 Jamison Ave

Philadelphia, PA 19115

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Holocaust Child Survivors of 22-3218819 501(c)3 6.650 SEE PART IV

Connecticut
20 Tubbs Spring Ct
Weston, CT 06883

Holocaust Survivors Charity
Inc

SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2880 W 12th St Rm 6 Brooklyn, NY 11224

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 11-3376124 501(c)3 14.200 SEE PART IV Jewish Community Center at Starrett City 1475 Geneva Loop Ste 6F Brooklyn, NY 11239

15.292.896

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Jewish Community Council Grtr

Coney Island 3001 W 37th St Brooklyn, NY 11224

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 52-0607909 501(c)3 1,601,123 SEE PART IV Jewish Community Services 5750 Park Heights Ave

Baltimore, MD 21215 Jewish Community Services of 59-0637867 501(c)3 8.647.931

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SEE PART IV South Florida Inc. 735 NE 125th St Miami, FL 33161

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Jewish Family & Children's Svc 21-0634563 501(c)3 187.144 SEE PART IV Grtr Mercer Cty 707 Alexander Rd Princeton, NJ 08540 Jewish Family & Children's Svc 22-2158627 501(c)3 521,534 SEE PART IV

of Monmout Cty 705 Summerfield Ave Asbury Park, NJ 07712

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Jewish Family & Children's Svc 22-2140175 501(c)3 996.194 SEE PART IV of Ocean Cty 1235A Rt 70 Lakewood, NJ 08701

205.413

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Jewish Family & Children's Svc

Pittsburgh 5743 Bartlett St Pittsburgh, PA 15217

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Jewish Family & Children's 86-0623896 501(c)3 586.312 SEE PART IV Svcs Southern AZ 4301 E Fifth St Tucson, AZ 85711 Jewish Family & Community 94-3250304 501(c)3 417.539 SEE PART IV

Services East Bay 2484 Shattuck Ave Berkeley, CA 94704

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 59-0637868 501(c)3 66.000 SEE PART IV Jewish Family & Community Services Inc 6261 Dupont Station Ct East

1,622,863

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Jacksonville, FL 32217

Jewish Family & Vocational Svc of Middlesex County

32 Ford Ave 2nd Flr Milltown, NJ 08850

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-1479212 501(c)3 1.269.993 SEE PART IV Jewish Family and Career Services 4549 Chamblee Dunwoody Rd Atlanta, GA 30338 Jewish Family and Child 93-0386851 501(c)3 588.459 SEE PART IV

Service

1221 SW Yamhill Ste 301 Portland, OR 97205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Jewish Family and Children's 95-2273033 501(c)3 80.360 SEE PART IV Service 3801 E Willow St Long Beach, CA 90815 Jewish Family & Children's Svc 04-2104356 501(c)3 942.966 SEE PART IV

Grtr Boston 1430 Main St Waltham, MA 02451

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Jewish Family & Children's Svc 23-1352026 501(c)3 2.053.931 SEE PART IV Grtr Phila 2100 Arch St

243.615

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Philadelphia, PA 19103 Jewish Family & Children's Svc Minneapolis

13100 Wavzata Blvd Minnetonka, MN 55305

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Jewish Family Service	91-0565537	501(c)3	380,159		SEE PART IV
Jewish Family & Children's Svcs of San Francisco 2150 Post St San Francisco, CA 94115	94-1156528	501(c)3	3,598,435		SEE PART IV

1601 16th Ave Seattle, WA 98122

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Jewish Family Svc & Children's 20-5928151 501(c)3 157.082 SEE PART IV

Ctr Clifton Passaic 925 Allwood Rd Clifton, NJ 07012					
Jewish Family Service Agency of Las Vegas	88-0142948	501(c)3	223,172		SEE PART IV

2309 Renaissance Drive Suite

Las Vegas, NV 89119

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Jewish Family Service Assn of 34-0714441 501(c)3 3.087.216 SEE PART IV Cleveland

3659 S Green Rd Beachwood, OH 44122 Jewish Family Service of 22-2119902 501(c)3 128.958 SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Atlantic County 607 N Jerome Ave

Margate City, NJ 08402

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Jewish Family Service of 22-2223109 501(c)3 1,597,415 SEE PART IV Bergen & N Hudson 1485 Teaneck Rd Teaneck, NJ 07666 Jewish Family Service of 22-1487364 501(c)3 715.347 SEE PART IV Central New Jersey

655 Westfield Ave Elizabeth, NJ 07208

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Jewish Family Service of 84-0402701 501(c)3 553.398 SEE PART IV Colorado 3201 S Tamarac Dr. Denver, CO 80231 Jewish Family Service of 31-0744786 501(c)3 2.439.652 SEE PART IV

Greater Cincinnati

8487 Ridae Rd Cincinnati, OH 45236

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Jewish Family Service of 75-1992728 501(c)3 148.585 SEE PART IV Greater Dallas 5402 Arapaho Rd Dallas, TX 75248 Jewish Family Service of 74-1152607 501(c)3 659.466 SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Houston 4131 S Braeswood Houston, TX 77025

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Jewish Family Service of Los 95-1691013 501(c)3 6.772.147 SEE PART IV Angeles 3580 Wilshire Blvd Los Angeles, CA 90010 Jewish Family Service 38-0691329 501(c)3 2.490.590 SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Metropolitan Detroit 6555 W Maple Rd West Bloomfield, MI 48322

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Jewish Family Service of San 95-1644024 501(c)3 1.007.168 SEE PART IV

Diego 8804 Balboa Ave San Diego, CA 92123 Jewish Family Svc Somerset 22-2306902 501(c)3 102.383

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Somerville, NJ 08876

SEE PART IV Hunterdon & Warren Ctv 150-A West High St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 31-4379497 501(c)3 1,284,933 SEE PART IV Jewish Family Services 1070 College Ave

Columbus, OH 43209 Jewish Family Services of 06-0653062 501(c)3 674.869 Greater Hartford

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SEE PART IV 333 Bloomfield Ave West Hartford, CT 06117

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 22-1687995 501(c)3 1.180.042 SEE PART IV Jewish Family Services Metrowest New Jersey 256 Columbia Toke Florham Park, NJ 07932 Jewish Family Services of 94-2536452 501(c)3 282,394 SEE PART IV Silicon Valley

14855 Oka Rd Ste 202 Los Gatos, CA 95032

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 23-7106134 501(c)3 859.820 SEE PART IV Jewish Federation & Family Svcs Orange Cty 1 Federation Way Ste 210 Irvine, CA 92603 Jewish Federation of 36-2167761 501(c)3 3.028.066 SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Metropolitan Chicago 30 S Wells St Chicago, IL 60606

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance lowich Foundation for the 13-3807016 501(c)3 281 677 SEE PART IV

SEE PART IV

SCWISH Foundation for the	13 300/010	301(0)3	201,0//		JEE I AKI
Righteous					
305 7th Ave 19th Flr					
New York, NY 10001					

2.166.793

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

53-0196598

Jewish Social Service Agency

6123 Montrose Rd Rockville, MD 20852

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance KATAHDIN Foundation 90-0089252 501(c)3 25,000 SEE PART IV PO Box 2218

SEE PART IV

55,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Berkeley, CA 94702 K'hal Adath Jeshurun

85-93 Bennett Ave New York, NY 10033 13-1628201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Ladies Bikur Cholim D'Satmar 11-6081323 501(c)3 150.000 SEE PART IV 545 Bedford Ave Brooklyn, NY 11211

Legal Services for New York 13-2605605 501(c)3 25,000 City

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SEE PART IV 105 Court St 4th Flr Brooklyn, NY 11201

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 28-1870256 501(c)3 160.900 SEE PART IV Limmud FSU International Foundation 80 Central Park West New York, NY 10023

SEE PART IV

180.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

13-1677841

Looted Cultural Property

1359 Broadway Rm 2000 New York, NY 10018

Project

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 99-9999999 501(c)3 20.000 SEE PART IV Manhattan Chapter Women Holocaust Survivors

Holocaust Survivors
3333 Henry Hudson Pkwy
Bronx, NY 10463

Metropolitan Council on Jewish 13-2738818 N/A 23,919
Poverty

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

120 Broadway 7th Flr New York, NY 10271

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 11-3538697 501(c)4 9.000 SEE PART IV Metro Jewish Health Svs Hospice Palliative Care 6323 Seventh Ave

SEE PART IV

6323 Seventh Ave
Brooklyn, NY 11220

Musm of Jewish HeritageLiving Mem to Holocaust

13-3376265 501(c)3 125,362

36 Battery Pl New York, NY 10280

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 11-3067201 501(c)3 160.000 SEE PART IV Nachas Health & Family Network Inc 1310 48th St Brooklyn, NY 11219

SEE PART IV

40.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

National Center for Jewish Film

Brandeis University Lown Bldg

Waltham, MA 02454

102

04-2764044

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance New Cracow Friendship Society 11-6044339 501(c)3 9 975 SEE PART IV

Inc				
3905 Arthur Ave North				
Seaford, NY 11783				

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6225 Lance Pl San Diego, CA 92120

New Life Club 33-0269567 501(c)3 10.000 SEE PART IV

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance New York Association of 13-4300949 501(c)4 15.900 SEE PART IV

Holocaust Survivors 2900 W 8th St Ste 1F Brooklyn, NY 11224 New York Legal Assistance 13-3505428 501(c)3 30.000 SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Group 7 Hanover Sa 18th Flr New York, NY 10004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 11-2642641 501(c)3 77.476 SEE PART IV Pesach TikvahDoor of Hope

18 Middleton St
Brooklyn, NY 11206

Phoenix Holocaust Survivors' 86-0517079 501(c)3 22,500

Association 12701 N Scottsdale Rd Ste 122

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Scottsdale, AZ 85254

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Piotrkow Trybunalski 45-1632466 501(c)3 5.500 SEE PART IV Association Inc 151 Brite Ave

SEE PART IV

19.850

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Scottsdale, NY 10583
Primeridian Entertainment

301 N Canon Dr Ste 223 Beverly Hills, CA 90210 99-9999999

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Queens Chapter of Holocaust 11-3319279 N/A 17.290 SEE PART IV Survivors

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1359 Broadway STE 2000 New York, NY 10018

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Riverdale Chapter Jewish 99-999999 501(c)4 6.500 SEE PART IV Holocaust Survivor

3333 Henry Hudson Pkwy Bronx, NY 10463

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

West Nyack, NY 10994

Rockland Jewish Family Service 13-3776995 N/A 1.223.865 SEE PART IV 450 W Nyack Rd

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Ruth & Norman Rales Jewish 65-1115689 501(c)3 4,226,933 SEE PART IV Family Services SEE PART IV

21300 Coleman Blvd Boca Raton, FL 33428 Samost Jewish Family & 21-0634489 501(c)3 1.076.072 Children's Svc S NJ

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1301 Springdale Rd Cherry Hill, NJ 08003

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Selfhelp Community Services 13-1624178 501(c)3 16.059.371 SEE PART IV 520 Eighth Ave 5th Flr New York NY 10018

SEE PART IV

430.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

520 Eighth Ave 5th Flr New York, NY 10018 The Saul Kagan Fellowship in Advanced Shoah Studie

1359 Broadway ste 2000 New York, NY 10018 13-1677841

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Tomche Shabbos of Boro Park 11-3518348 501(c)3 110.000 SEE PART IV and Flatbush

4712 Fort Hamilton Pkwv Brooklyn, NY 11219

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Kew Gardens, NY 11415

Tomchei Shabbos of Queens 11-2693305 501(c)3 60.000 SEE PART IV 129-01 Metropolitan

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance United Jewish Organizations of 11-2728233 501(c)3 4.082.674 SEE PART IV

Williamsburg Inc 32 Penn St Brooklyn, NY 11211 Westchester Jewish 13-1740071 501(c)3 248.915

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

White Plains, NY 10603

SEE PART IV Community Services 845 N Broadway

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 22-3160096 501(c)3 15.000 SEE PART IV World Fed Jewish Child

Survivors Holocaust 67 S Bedford St Burlington, MA 01803

11-3015052 501(c)3 12.500 SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Yad Y1Sroel 1070 38th St

Brooklyn, NY 11218

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9331	12007	358
Sch	edule J	Co	mpensati	ion Information	OM	IB No	1545-0	0047
(For	n 990)	For certain Office	rs, Directors, T	rustees, Key Employees, and Hig	hest			
		Complete if the organic		ited Employees ered "Yes" on Form 990, Part IV,	, line 23.	20	17	7
_			▶ Attach	to Form 990.			to Pul	
•	tment of the Treasury al Revenue Service	▶ Information ab		(Form 990) and its instructions gov/form990.	is at		ectio	
	ne of the organiza				Employer identificat	ion nu	ımber	
	INST GERMANY INC	SH MATERIAL CLAIMS			13-1677841			
Pa	rt I Questi	ons Regarding Compensat	ion					
							Yes	No
1a				the following to or for a person liste y relevant information regarding the				
		s or charter travel		Housing allowance or residence for	•			
		companions	님	Payments for business use of perso				
		nification and gross-up payments	H	Health or social club dues or initiation				
	□ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	reur, cher)			
b		xes in line 1a are checked, did th all of the expenses described abo		ollow a written policy regarding paym plete Part III to explain	nent or reimbursement	1 b		
2				or allowing expenses incurred by all	. 1-2	2		
	directors, truste	es, officers, including the CEO/E	Recutive Director	r, regarding the items checked in line	e la?			
3				d to establish the compensation of the	ne			
	_	•	117	not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
	✓ Compensa							
		ation committee ent compensation consultant	H	Written employment contract Compensation survey or study				
		of other organizations	☑	Approval by the board or compensa	tion committee			
4		-	90 Part VII Se	ction A, line 1a, with respect to the f				
•	related organiza		50, 1 die VII, 50	ction //, interface to the f	ining organization of a			
а	Receive a sever	ance payment or change-of-cont	rol payment?			4a	Yes	
b	Participate in, o	r receive payment from, a supple	mental nonqual	ified retirement plan?		4b	Yes	
c		r receive payment from, an equit				4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	provide the app	licable amounts for each item in Pari	: III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5			_	the organization pay or accrue any				
	compensation c	ontingent on the revenues of						
а	The organization	٦٦				5a		No
b	Any related orga					5b		No
_	•	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Sectior ontingent on the net earnings of	i A, line 1a, did i	the organization pay or accrue any				
a	The organization					6a		No
b	Any related orga					6b		No
,	•	6a or 6b, describe in Part III	A line to district	the eventual and the second	al .			
7		ed on Form 990, Part VII, Section escribed in lines 5 and 67 If "Yes,		the organization provide any nonfixe rt III	u	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		No
9	If "Yes" on line 3	8, dıd the organızatıon also follov	v the rebuttable	presumption procedure described in	Regulations section	9		No
For D		iction Act Notice, see the Inst	ructions for Ec	cat No. 9	50053T Schedule 1		. 000)	2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MISO	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
GREGORY SCHNEIDER XECUTIVE VICE PRESIDENT	(i)	538,666	0	33,036	0	38,318	610,020	0
	(ii)	0	0	0	0	0	0	0
JOSEPH BERGER HIEF FINANCIAL & INVEST	(i)	413,550	0	118,692	0	29,728	561,970	0
NEECD .	(ii)	0	0	0	0	0	0	0
ERMAN OFFICE EMPLOYEES	(i)	424,096	0	60,417	33,722	9,799	528,034	0
EE SCHEDULE J & O	(ii)	0	0	0	0	0	0	0
MICHAEL ELKIN	(i)	236,479	0	966	0	32,090	269,535	0
HIEF OPERATING OFFICER	(ii)	0	0	0	0	0	0	0
KAREN HEILIG SSISTANT EXECUTIVE VP	(i)	262,226	0	36,319	0	41,674	340,219	0
	(ii)	0	0	0	0	0	0	0
RAEL RUBINSTEIN DIRECTOR, COMPENSATION	(i)	138,543	0	124,085	8,127	14,635	285,390	0
RCMS	(ii)	0	0	0	0	0	0	0
ARIE BUCHEISTER	(i)	245,319	0	5,334	54,978	35,448	341,079	0
HIEF OF STAFF	(ii)	0	0	0	0	0	0	0
MIRIAM WEINER	(i)	195,720	0	31,694	0	35,634	263,048	0
SST EXEC VP OF NORTH MERICA	(ii)	0	0	0	0	0	0	0
AMY MOYER	(i)	200,330	0	608	0	3,650	204,588	0
ONTROLLER	(ii)	0	0	0	0	0	0	0
	(,							

Return Reference

SEVERANCE PAY

SCHEDULE J, PART I, LINE 4A AND PART II, COLUMN (B)(III) RAEL RUBINSTEIN RECEIVED A SERVERANCE PAYMENT OF \$124,085, AFTER 15 YEARS OF EMPLOYMENT, OF WHICH \$0 WAS EXPENSED IN PRIOR YEARS, UPON SEPARATION FROM THE CLAIM CONFERENCE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN SCHEDULE J, PART I, LINE 4B AND PART II, COLUMN (B)(III) DURING 2017, THE FOLLOWING INDIVIDUALS PARTICIPATED IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN AND RECEIVED TAXABLE DEFERRALS AS FOLLOWS GREGORY SCHNEIDER - \$32,070 JOSEPH BERGER - \$110,039 KAREN HEILIG - \$35,352 MIRIAM WEINER - \$31,066 AMY MOYER - \$0 (NO TAXABLE DEFERRAL FOR 2017)

Page 3

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

Supplemental Information

Part III

COMPENSATION

SCHEDULE J, PART II, COLUMN A AND FORM 990, PART VII SEE EXPLANATION FOR GERMAN OFFICE EMPLOYEES DESIGNATION ON SCHEDULE O

SCHEDULE J, PART II, COLUMN B(I) IN ACCORDANCE WITH IRS FORM 990 INSTRUCTIONS AND BASED UPON AN EMPLOYEE'S VOLUNTARY ELECTIONS, THE BASE COMPENSATION MAY BE DECREASED BY THE PRE-TAX BENEFITS OF FLEXIBLE SPENDING PLAN, DEPENDENT CARE ASSISTANCE PLAN, TRANSITCHECKS OR A COMBINATION THEREOF

OTHER REPORTABLE AND DEFERRED

SCHEDULE J. PART II, COLUMNS B(III) AND C THE CLAIMS CONFERENCE DOES NOT HAVE A PENSION PLAN IN LIEU OF A PENSION PLAN THERE IS A DEFERRED

COMBINATION THEREOF

OTHER REPORTABLE AND DEFERRED
COMPENSATION

SCHEDULE J, PART II, COLUMNS B(III) AND C THE CLAIMS CONFERENCE DOES NOT HAVE A PENSION PLAN IN LIEU OF A PENSION PLAN THERE IS A DEFERRED
COMPENSATION OTHER DEFERRED COMPENSATION COLUMN OR THE RETIREMENT AND
OTHER DEFERRED COMPENSATION COLUMN DEPENDING ON WHETHER OR NOT THIS BENEFIT IS GUARANTEED THE CALCULATION IS BASED UPON AN
EMPLOYEES YEARS OF SERVICE AND THE DIFFERENTIAL IN HIS/HER PRIOR AND CURRENT YEAR SALARY IN THE YEAR WHEN THERE IS RECOGNITION OF

EMPLOYEES YEARS OF SERVICE AND THE DIFFERENTIAL IN HIS/HER PRIOR AND CURRENT YEAR SALARY IN THE YEAR WHEN THERE IS RECOGNITION OF INCREASED RESPONSIBILITIES, THE CALCULATION, BASED ON THE RELATED SALARY ADJUSTMENT, MAY RESULT IN A LARGE ONE-TIME CURRENT YEAR BENEFIT EXPENSE

413,550

424,096

236,479

262,226

138,543

245,319

195,720

200,330

Additional Data Software ID: Software Version: EIN: 13-1677841 Name: CONFERENCE ON JEWISH MATERIAL CLAIMS AGAINST GERMANY INC Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (E) Total of columns (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (F) Compensation in other deferred benefits (B)(i)-(D)column (B) (i) Base Compensation (iii) reported as deferred on compensation Other reportable Bonus & incentive prior Form 990 compensation compensation 1GREGORY SCHNEIDER (1) 538,666 33,036 38,318 610,020 EXECUTIVE VICE

33,722

8,127

54,978

29,728

9,799

32,090

41,674

14,635

35,448

35,634

3,650

561,970

528,034

269,535

340,219

285,390

341,079

263,048

204,588

118,692

60,417

966

36,319

124,085

5,334

31,694

608

(A) Name and Title

CHIEF FINANCIAL & INVEST

CHIEF OPERATING OFFICER

ASSISTANT EXECUTIVE VP

DIRECTOR, COMPENSATION

(1)

(II)

(1)

(II)

PRESIDENT 1JOSEPH BERGER

GERMAN OFFICE **EMPLOYEES** SEE SCHEDULE J & O 3MICHAEL ELKIN

4KAREN HEILIG

PRGMS

AMERICA 8AMY MOYER

CONTROLLER

5RAEL RUBINSTEIN

6ARIE BUCHEISTER

CHIEF OF STAFF

7MIRIAM WEINER

ASST EXEC VP OF NORTH

OFFCR

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493312007358 OMB No 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Department of the Treasury Inspection www.irs.gov/form990. Name of the organization **Employer identification number** CONFERENCE ON JEWISH MATERIAL CLAIMS AGAINST GERMANY INC. 13-1677841 990 Schedule O, Supplemental Information Return Explanation Reference OTHER FORM 990, PART III. LINE 4D OTHER PROGAMS AUSTRIAN HOLOCAUST SURVIVOR EMERGENCY ASSISTANCE **PROGRAM** PROGRAM TO PROVIDE GRANTS TO INSTITUTIONS THAT SHELTER OR EXTEND SERVICES TO AGED JEWISH **SERVICES** VICTIMS FROM AUSTRIA PURSUANT TO AN AGREEMENT WITH THE AUSTRIAN GOVERNMENT. PROGRAM SERVI CE EXPENSES - 3.458,200 GRANTS - 3.458,200 OTHER PROGRAMS ROMANIAN EMERGENCY ASSISTANCE PR OGRAM TO PROVIDE SUPPORT TO INSTITUTIONS WHICH PROVIDE SOCIAL WELFARE PROGRAMS TO VICTIMS OF NAZI PERSECUTION OF ROMANIAN ORIGIN WHO ARE FINANCIALLY VULNERABLE AND LIVING IN ISRAE L PROGRAM SERVICE EXPENSES - 3,246,290 GRANTS - 3,246,290 OTHER PROGRAMS - INTERNATIONAL COMMISSION ON HOLOCAUST ERA INSURANCE CLAIMS TO PROVIDE SUPPORT TO INSTITUTIONS WHICH PRO VIDE SOCIAL WELFARE PROGRAMS TO VICTIMS OF NAZI PERSECUTION PROGRAM SERVICE EXPENSES 1.39 2.600 GRANTS - 1.392.600 OTHER PROGRAMS - WEINBERG FUND TO PROVIDE GRANTS TO INSTITUTIONS FOR EMERGENCY ASSISTANCE TO JEWISH VICTIMS OF NAZISM IN NORTH AMERICA. PROGRAM SERVICE EX PENSES - 1,293,368 GRANTS - 1,293,368 OTHER PROGRAMS URO EMERGENCY ASSISTANCE PROGRAM TO PROVIDE SUPPORT TO INSTITUTIONS WHICH PROVIDE ON-GOING SOCIAL WELFARE ASSISTANCE OR EMERGE

NCY ONE-TIME GRANTS TO VICTIMS OF NAZI PERSECUTION PROGRAM SERVICE EXPENSES 1.000.000 GRA

NTS - 1,000,000 TOTAL PROGRAM SERVICE EXPENSES 10,390,458 TOTAL GRANTS - 10,390,458

Return Explanation
Reference

CHARITABLE	FORM 990, PART V, LINE 6A THE CLAIMS CONFERENCE DOES NOT SOLICIT CONTRIBUTIONS FROM ANY SO
CONTRIBUTIONS	URCE THE CLAIMS CONFERENCE OBTAINS FUNDS AS A RESULT OF BI-LATERAL OR MULTI-LATERAL AGREE
	MENTS WITH GOVERNMENTS OR INDUSTRY RELATING TO COMPENSATION OR RESTITUTION OF HOLOCAUST ER
	l a wrongs

Return Explanation

INDEPENDENT	FORM 990, PART VI, SECTION A, LINE 1B A DIRECTOR, AND FORMER TREASURER, SPENDS A SIGNIFICA
MEMBERS	NT PORTION OF EACH WEEK ON CLAIMS CONFERENCE RELATED BUSINESS THEREFORE, THE CLAIMS CONFE
	RENCE PAYS A PORTION OF HIS OFFICE RENT IN 2017, THE AMOUNT PAID WAS \$36,840

Return Explanation
Reference

FORM 990 REVIEW	FORM 990, PART VI, SECTION B, LINE 11B THE AUDIT COMMITTEE AND THE PERSONNEL AND MANAGEMEN T COMMITTEE, WHICH ARE ESTABLISHED BY THE BYLAWS OF THE CORPORATION, HAVE EACH REVIEWED TH
	E RELEVANT SECTIONS OF THE FORM 990, AS THEY PERTAIN TO THE MANDATES OF THE PARTICULAR COM MITTEE, AND HAVE AUTHORIZED ITS SUBMISSION TO THE INTERNAL REVENUE SERVICE IN ITS CURRENT FORM

Return Explanation

CONFLICT
OF
INTEREST
POLICY
OTENTIAL PROBLEMS ARISE, THEY ARE DISCUSSED WITH THAT INDIVIDUAL BOARD MEMBERS AND AD PER SONA ARISE, THEY ARE DISCUSSED WITH THAT INDIVIDUAL BOARD MEMBERS AND AD PER SONA ARE INELIGIBLE TO VOTE DURING THE ANNUAL BOARD MEETING UNTIL HIS/HER FORM HAS BEEN RE

CEIVED OR ANY POTENTIAL PROBLEMS RESOLVED

Return Reference	Explanation
COMPENSATION	FORM 990, PART VI, SECTION B, LINES 15A AND 15B THE PERSONNEL AND MANAGEMENT (P&M) COMMITT EE, WHICH IS COMPRISED OF INDEPENDENT LAY LEADERS, MEETS AT THE END OF EACH YEAR TO REVIEW EXECUTIVE COMPENSATION FOR THE EXECUTIVE VICE PRESIDENT, CHIEF FINANCIAL & INVESTMENT OFF ICER, CHIEF OPERATING OFFICER AND OTHER EXECUTIVE STAFF COMPARABLE SALARIES IN OTHER ORGA NIZATIONS, RELEVANT BENEFITS AND THE NATURE AND SIZE OF COMPARABLE ORGANIZATIONS ARE DISCU SSED THE REVIEW OF 2017 COMPENSATION OCCURRED IN APRIL 2017 THE P&M COMMITTEE REVIEWS THE COMPENSATION AND BENEFITS FOR ALL EMPLOYEES WHO EARN MORE THAN \$100,000 ON A YEARLY BASI S THEY MUST APPROVE ANY INCREASES FOR EMPLOYEES IN THIS CATEGORY RECOMMENDED COMPENSATION AMOUNTS ARE APPROVED BY THE P&M COMMITTEE, THE APPROVAL OF WHICH IS DOCUMENTED IN THE MI NUTES OF THE COMMITTEE MEETING, WHICH ARE MAINTAINED BY HUMAN RESOURCES THE CLAIMS CONFER ENCE HAS PROCEDURES IN PLACE WHICH ARE INTENDED TO ENABLE IT TO QUALIFY FOR THE REBUTTABLE PRESUMPTION THAT COMPENSATION IS REASONABLE IN ACCORDANCE WITH TREAS REG SECTION 53 495 8-6

Return Explanation
Reference

DISCLOSURE	FORM 990, PART VI, SECTION C, LINE 18 FORM 990 IS AVAILABLE AT WWW GUIDESTAR ORG THE ORGA
	NIZATIONS APPLICATION FOR EXEMPT STATUS IS NOT AVAILABLE TO THE PUBLIC, AS THE ORGANIZATIO
	N WAS INITALLY RECOGNIZED AS TAX EXEMPT IN 1955 AND PUBLIC AVAILABILITY IS NOT REQUIRED WH
	ERE THE ORGANIZATION DID NOT HAVE A COPY OF ITS EXEMPTION APPLICATION ON THE EFFECTIVE DAT
	E OF THE REQUIREMENT IN JULY 1987

Return Explanation

Reference	
DOCUMENTS L	FORM 990, PART VI, SECTION C, LINE 19 THE FINANCIAL STATEMENTS AND CONFLICT OF INTEREST PO LICY ARE AVAILABLE AT WWW CLAIMSCON ORG GOVERNING DOCUMENTS ARE NOT AVAILABLE TO THE PUBL IC

Return Reference	Explanation
GERMAN EMPLOYEES AND INDEPENDENT CONTRACTORS	FORM 990, PART VII, SECTIONS A AND B THE GERMAN FEDERAL DATA PROTECTION ACT (BUNDESDATENSC HUTZGESETZ) DATED NOVEMBER 15, 2006 SERVES TO IMPLEMENT DIRECTIVE 95/46/EC OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL OF 24 OCTOBER 1995 ON THE PROTECTION OF INDIVIDUALS WITH RE GARD TO THE PROCESSING OF PERSONAL DATA AND ON THE MOVEMENT OF SUCH DATA ACCORDING TO THE ACT, THE COLLECTION, PROCESSING AND USE OF PERSONAL DATA SHALL BE ADMISSIBLE ONLY IF PERM ITTED OR PRESCRIBED BY THE ACT OR ANY OTHER LEGAL PROVISION OR IF THE DATA SUBJECT HAS CON SENTED SINCE THE GERMAN EMPLOYEES AND CONTRACTORS HAVE NOT GIVEN THEIR CONSENT TO RELEASE ANY PERSONAL INFORMATION AND ITS RELEASE IS NOT EXPLICITLY PERMITTED BY THE ACT, THE CLAI MS CONFERENCE DOES NOT HAVE THE RIGHT TO MAKE THIS INFORMATION PUBLIC

Return Reference	Explanation
INDEPENDENT CONTRACTORS	FORM 990, PART VII, SECTION B A SIGNIFICANT PORTION OF THE EXPENSES DETAILED IN FORM 990, PART VI, SECTION B ARE REIMBURSED BY THE GERMAN GOVERNMENT OR INSURANCE COVERAGE OTHER CH ANGES IN NET ASSETS FORM 990, PART XI, LINE 9 NET CHANGE IN FOREIGN CURRENCY FLUCTUATIONS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493312007358 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2017 (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** CONFERENCE ON JEWISH MATERIAL CLAIMS AGAINST GERMANY INC 13-1677841 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(b)** Primary activity (c) Legal domicile (state **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity (d) (e) Total income End-of-year assets or foreign country) entity

Part II Identification of Related Tax-Exempt Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt Organizations during the tax year. (b) Lagal domicile (state or foreign country) Pinmary activity Pi			ļ										
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization Primary activity Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Primary activity Primary activi													
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization Primary activity Public charity status, (if section 501(c)(3)) Public charity status, (if section 501(c)(3)) Primary activity Primary acti													
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization Primary activity Public charity status, (if section 501(c)(3)) Public charity status, (if section 501(c)(3)) Primary activity Primary acti													
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization Primary activity Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Primary activity Primary activi													
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization Primary activity Problet (a) Public charity status (if section 501(c)(3)) Publi													
(a) Name, address, and EIN of related organization Primary activity Primar		1s Comple	te if the orgai	nization	answered "	Yes" on F	orm 990,	Part IV	, line 34 be	cause if	t had one or	more	
(1)EZRA LEGACY INC 1359 BROADWAY ROOM 2000 NEW YORK, NY 10018 HOLOCAUST DE 501(C)(3) 7 CLAIMS CONF Yes	(a)	(b)		Legal do	(c) Legal domicile (state or foreign country)		(d) Exempt Code section		harity status	Direct controlling		(13) co	ntrolled
	(1)EZRA LEGACY INC 1359 BROADWAY ROOM 2000	HOLOCAUST		DE		501(C)(3)		7		CLAIMS	CONF		No

(a) Name, address, and EIN of related organization			ry Legal domicile (state or foreign country)	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		Disprop alloca	tions?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partn	alor Pe ging ov er?	(k) ercenta wners
								Yes	No		Yes	No		
Identification of Related Organizated because it had one or more related o						ation answ	ered "Yes	" on Fo	orm 99	90, Part IV,	line 3	34		
(a) Name, address, and EIN of related organization	(b) Primary activity	L do	(c) egal micile or foreign	Direct	(d) controlling Type entity (C co	(e) e of entity rp, S corp, r trust)	(f) Share of total Income		(g) of end-o year assets	of- Percei owne	ntage	Secti (13)	(ı) ion 5 cont entity	
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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1 j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	. 11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	ı e	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1 p		No
q Reimbursement paid by related organization(s) for expenses	1 q		No

K	Lease of facilities, equipment, or other assets from related organization(s)	114	1	140
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	1	No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
0	Sharing of paid employees with related organization(s)	10	Yes	
р	Reimbursement paid to related organization(s) for expenses	1р		No
q	Reimbursement paid by related organization(s) for expenses	1q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			

(a) Name of related organization (b) Transaction type (a-s) (c) Amount involved (d) Method of determining amount involved

Page **3**

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

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

- See man actions regarding exclusion													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(g) (h) Share of id-of-year allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2017

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