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| J website: ► WTW A-JWS_ORG H(4) Group exemption number ► K Form of upganzation: X Gorpanition Trust Association Other ► L Yeart of tormation: 1985 M State of legal domate.NY Part.II Summary 1 Bridly describe the organization's mission or most significant activities: AJWS WORKS TO REALIZE HUMAN RIGHTS AND DO POVERTY IN THE DEVELOPING WORLD. 2 Check this box ► If the organization discontinue d to operations or disposed of more than 25% of its net assets. 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 26 4 State of nedpendent voting members of the governing body (Part VI, line 2a) 6 166 6 Total number of independent voting members of the governing body (Part VI, line 1b) 4 26 7 Total number of independent voting members of the governing body (Part VI, line 2a) 6 166 6 Total number of indevendent voting members of the governing body (Part VI, line 2a) 7 7 0 7 Total number of indevende voting members of the governing body (Part VI, line 2a) 7 7 0 0 0 0 0 0 0 0 0 0 0 0 0 <td< td=""><td></td><td>pendli</td><td></td><td></td><td></td><td></td><td></td><td></td></td<> | | pendli | | | | | | |
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| 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,181,499.13,669,972. 16a Professional fundraising ees (Part IX, column (A), line 25) 4,272,025. 17 Other expenses (Part IX, column (A), line 11e) 40,535.132,170. 18 Total fundraising expenses (Part IX, column (A), line 25) 4,272,025. 17 Other expenses (Part IX, column (A), line 25) 9,677,732.61,487,233. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,677,732.61,487,233. 19 Revenue less expenses. Subtract line 18 from line 12 6,206,4213,328,417. 20 Total assets (Part X, line 16) 2 17,738,370.34,435,487. 21 Total liabilities (Part X, line 26) 37,738,370.34,435,487. 22 Net assets or fund balances. Subtract line 21 from line 20 37,738,370.34,435,487. Part II Signature Block 11/-09-15 Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and compile the officer Date 18 Signature of officer Date | | 12 | Total revenue | - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | | | |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,181,499.13,669,972. 16a Professional fundraising expenses (Part IX, column (A), line 11e) 40,535.132,170. b Total fundraising expenses (Part IX, column (A), line 25) 4,272,025. 17 Other expenses (Part IX, column (A), line 25) 4,272,025. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,677,732.61,487,233. 19 Revenue less expenses. Subtract line 18 from line 12 6,206,4213,328,417. 19 Revenue less expenses. Subtract line 21 from line 20 6,710,803.7,913,731. 20 Total assets (Part X, line 16) 2 8eginning of Current Year 21 Total assets (Part X, line 26) 37,738,370.34,435,487. 22 Net assets or fund balances. Subtract line 21 from line 20 37,738,370.34,435,487. 21 Total liabilities (Part X, line 26) 37,738,370.34,435,487. 22 Net assets or fund balances. Subtract line 21 from line 20 37,738,370.34,435,487. 23 Robert Bank K, EXECUTIVE VP Date /// - 09 - /.5 Sign Signature of officer Date // - 09 - /.5 Nignature of officer Date | | 13 | Grants and si | milar amounts paid (Part IX, column (A), lines 1·3) | | | | |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) 40,535. 132,170. b Total fundraising expenses (Part IX, column (D), line 25) 4,272,025. 2,286,080. 8,279,525. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,286,080. 8,279,525. 2,286,080. 8,279,525. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,677,732. 61,487,233. 6,206,421. -3,328,417. 19 Revenue less expenses. Subtract line 18 from line 12 6,206,421. -3,328,417. Beglinning of Current Year End of Year 20 Total assets (Part X, line 26) 2,710,803. 7,913,731. 37,738,370. 34,435,487. 21 Total liabilities (Part X, line 26) 37,738,370. 34,435,487. Part II Signature Block Under penalties of perijury, 1 declarg that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 11 - 09 - 15 Sign Signature of officer Date 11 - 09 - 15 Date Print/Type preparer's name Preparer's signature Date 11 - 09 - 15 MARTIN GREIF Prim's ad | | | - | • • • • • • • • • • • • • • • | | | | |
| 17 Other expenses (Part IX, column (A), lines 11a, 117, 117, 24e) 2, 286, 0800. 6, 279, 323. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9, 677, 732. 61, 487, 233. 19 Revenue less expenses. Subtract line 18 from line 12 6, 206, 421. -3, 328, 417. 20 Total assets (Part X, line 16) Beginning of Current Year End of Year 21 Total liabilities (Part X, line 26) 6, 710, 803. 7, 913, 731. 22 Net assets or fund balances. Subtract line 21 from line 20 37, 738, 370. 34, 435, 487. Part II Signature Block 37, 738, 370. 34, 435, 487. Under penalties of perjury, 1 declare that 1 have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaratien of preparer (other than officer) is based on all information of which preparer has any knowledge. 11 - 09 - 15 Sign Signature ot officer Date Print/Type oreparer's name Preparer's signature Part II ROBERT BANK, EXECUTIVE VP Date PTIN Type or print name and title Po00029738 Firm's EIN 42-0714325 Preparer Firm's address 1185 AVENUE OF THE AMERICAS Phone no 212-372-1000 | ses | | | | raan a taalaa ah | | | |
| 17 Other expenses (Part IX, column (A), lines 11a, 117, 117, 24e) 2, 286, 080. 6, 279, 323. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9, 677, 732. 61, 487, 233. 19 Revenue less expenses. Subtract line 18 from line 12 6, 206, 421. -3, 328, 417. 20 Total assets (Part X, line 16) Beginning of Current Year End of Year 21 Total liabilities (Part X, line 26) 6, 710, 803. 7, 913, 731. 22 Net assets or fund balances. Subtract line 21 from line 20 37, 738, 370. 34, 435, 487. Part II Signature Block 37, 738, 370. 34, 435, 487. Under penalties of perjury, 1 declare that 1 have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaratien of preparer (other than officer) is based on all information of which preparer has any knowledge. 11 - 09 - 15 Sign Signature ot officer Date Print/Type oreganer's name Preparer's signature Part II Signature ot officer Primarer's signature Primarer's signature Primarer's signature Primarer's signature View or print name and tille Primarer's signature Printr's EIN A 2 - 0714 325 Phone no 212 - | Sen | | | | | 40,531 | } • | 132,170. |
| 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,677,732. 61,487,233. 19 Revenue less expenses. Subtract line 18 from line 12 6,206,421. -3,328,417. 19 Revenue less expenses. Subtract line 18 from line 12 6,206,421. -3,328,417. 10 Beginning of Current Year End of Year 11 Standard Statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) 37,738,370. 34,435,487. 11 Signature Block Information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. If - O9 - 1/5. 12 Signature of officer Date Print/Type or print name and litle Part II Signature of Signature of Declaration of The AMERICAS Firm's address 1185 AVENUE OF THE AMERICAS 12 NeW YORK, NY 10036-2602 Phone no 212-372-1000 | Ă | ł | | | <u> </u> | 2.286.080 |) _ | 8.279.525. |
| 19 Revenue less expenses. Subtract line 18 from line 12 6,206,421. -3,328,417. 20 Total assets (Part X, line 16) End of Year End of Year 20 Total assets (Part X, line 26) 6,710,803. 7,913,731. 21 Total liabilities (Part X, line 26) 6,710,803. 7,913,731. 22 Net assets or fund balances. Subtract line 21 from line 20 37,738,370. 34,435,487. Part II Signature Block 37,738,370. 34,435,487. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. // - 09 - 15 Sign Signature of officer Date // - 09 - 15 Paid Print/Type preparer's name Prefarer's signature Date PTIN Preparer Use Only Firm's name ▶ RSM US LLP Firm's signature Firm's EIN ▶ 42-0714325 Firm's address ▶ 1185 AVENUE OF THE AMERICAS Phone no 212-372-1000 Phone no 212-372-1000 | | 3 | | | | | | |
| Sign Here Print/Type preparer's name Prefarer's signature Prefarer's signature Date Print/Signature Print/Signature Paid Print/Type preparer's name Prefarer's signature Prefarer's signature Prefarer's signature Print/Signature Print/Signature Print/Signature Paid Print/Type preparer's name Prefarer's signature Prefarer's signature Print/Signature Print/Signature Print/Signature Preparer Use Only Firm's address 1185 AVENUE OF THE AMERICAS Print/CAS Print/Signature Print/Signature Preparer Use Only Firm's address 1185 AVENUE OF THE AMERICAS Print/CAS Print/Signature Print/Signature Preparer Variation of Variation of AVENUE OF THE AMERICAS Print/Signature Print/Signature Print/Signature Print/Signature Phone no 212-372-1000 Print AVENUE OF Print Print/Signature Print/Signature | | 19 | | | · · · · · · · · · · · · · · · · · · · | | | |
| Part II Signature Block Under penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign If - 09 - 15 Sign Signature of officer Here BOBERT BANK, EXECUTIVE VP Type or print name and title Date Pald Print/Type preparer's name MARTIN GREIF Preparer's signature Firm's name RSM US LLP Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | or CeS | | | | Be | ginning of Current Ye | ar | End of Year |
| Part II Signature Block Under penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign If - 09 - 15 Sign Signature of officer Here BOBERT BANK, EXECUTIVE VP Type or print name and title Date Pald Print/Type preparer's name MARTIN GREIF Preparer's signature Firm's name RSM US LLP Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | alan | 20 | Total assets (| Part X, line 16) | | | | (117-1177)PW144444141141 |
| Part II Signature Block Under penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign If - 09 - 15 Sign Signature of officer Here BOBERT BANK, EXECUTIVE VP Type or print name and title Date Pald Print/Type preparer's name MARTIN GREIF Preparer's signature Firm's name RSM US LLP Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | nd Ho | 21 | | | | | | |
| Under penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign II - O9 - 15 Sign Signature of officer Here Date Print/Type or print name and title Date Pald Print/Type preparer's name Preparer Preparer's signature Firm's name RSM US LLP Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | | | | | <u> </u> | 37,738,370 |). | 34,435,487. |
| true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 11 - 09 - 15 Sign Signature of officer Date Here ROBERT BANK, EXECUTIVE VP Date Print/Type or print name and title Preparer's signature Date Paid Print/Type preparer's name Preparer's signature Date Preparer Firm's name RSM US LLP Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 Phone no 212-372-1000 | فستصغره ويشردوا | | and and a second the second se | | | | 4 | |
| Sign II - 09 - 15 Sign ture of officer Date ROBERT BANK, EXECUTIVE VP Date Type or print name and title Preparer's name Paid Print/Type preparer's name Preparer Executive of the preparer's name Firm's name RSM US LLP Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | | - | | | | | а ту ко | owieage and belief, it is |
| Sign Here Signature of officer Date ROBERT BANK, EXECUTIVE VP Type or print name and title Date Pald PrintType preparer's name Preparer's signature Date Preparer Firm's name RSM US LLP Print's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Firm's EIN 42-0714325 | titto | .00110 | | | non proparoi | าสว อกรุ หางุพธอบุษ. | 11 | 09-15 |
| Type or print name and title Print/Type preparer's name Prefarer's signature Date Check PTIN Pald MARTIN GREIF Prefarer's signature Date Proparer Provide the strengtweet P00029738 Preparer Firm's name RSM US LLP Firm's EIN 42-0714325 Use Only Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | Sig | n | Signatur | e of officer | | Date | | |
| Paid Print/Type preparer's name Prefarer's signature Date Check PTIN Paid MARTIN GREIF Prefarer's signature Date P00029738 Preparer Firm's name RSM US LLP Firm's EIN 42-0714325 Use Only Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | Her | e | | | | | | |
| Paid MARTIN GREIF P00029738 Preparer Firm's name RSM US LLP Firm's EIN 42-0714325 Use Only Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | | | Type or | print name and title | | | | |
| Preparer Firm's name RSM US LLP Firm's EIN 42-0714325 Use Only Firm's address 1185 AVENUE OF THE AMERICAS Firm's EIN 42-0714325 NEW YORK, NY 10036-2602 Phone no 212-372-1000 | . . | | 1 | | | 11 Ich A | · | |
| Use Only Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602 Phone no 212-372-1000 | | | | the second se | f- | and an a state of the | | |
| NEW YORK, NY 10036-2602 Phone no 212-372-1000 | | | | | | Firm's EIN | > 4 | 2-0/14325 |
| | 058 | omy | FILM'S addres | NEW YORK, NY 10036-2602 | | Dhana na | 212- | 372-1000 |
| | Mav | v the I | I RS discuss th | | | I FROME NO.4 | | Construction of the second secon |

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

X Yes No Form **990** (2014)

| | 990 (2014) AMERICAN JEWISH WORLD SERVICE, INC. 22-2584370 Paget t III Statement of Program Service Accomplishments |
|----------|---|
| | |
| | |
| | Briefly describe the organization's mission: |
| | INSPIRED BY THE JEWISH COMMITMENT TO JUSTICE, AMERICAN JEWISH WORLD |
| | SERVICE (AJWS) WORKS TO REALIZE HUMAN RIGHTS AND END POVERTY IN THE |
| | DEVELOPING WORLD. |
| | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on |
| | the prior Form 990 or 990-EZ? |
| | If "Yes," describe these new services on Schedule O. |
| | Did the organization cease conducting, or make significant changes in how it conducts, any program services? |
| | If "Yes," describe these changes on Schedule O. |
| | |
| | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and |
| | revenue, if any, for each program service reported. |
| | (Code:) (Expenses \$ 43,667,309. including grants of \$ 38,854,566.) (Revenue \$ |
| | INTERNATIONAL PROGRAM: THE INTERNATIONAL PROGRAMS DIVISION (IPD) AWARD |
| | GRANTS TO MORE THAN 500 NON-GOVERNMENTAL ORGANIZATIONS ANNUALLY THAT |
| | ADVANCE THE HEALTH AND RIGHTS OF WOMEN, GIRLS AND LGBT PEOPLE; PROMOTI |
| | RECOVERY FROM CONFLICT, DISASTERS AND OPPRESSION; AND DEFEND ACCESS TO |
| | FOOD, LAND AND LIVELIHOODS. THESE CORE GRANTS SUPPORT GRASSROOTS AND |
| | GLOBAL HUMAN RIGHTS ORGANIZATIONS WORKING IN 19 COUNTRIES THROUGHOUT |
| | AFRICA, ASIA, LATIN AMERICA AND THE CARIBBEAN. IPD COLLABORATES CLOSE |
| | |
| | WITH THE STRATEGIC LEARNING, RESEARCH AND EVALUATION DIVISION (SLRE) |
| | ARTICULATE MEANINGFUL BENCHMARKS AND OUTCOMES, AS WELL AS TO |
| | CONTINUALLY ENGAGE IN STRATEGY MANAGEMENT. IN ADDITION, SLRE AND IPD |
| | HAVE JOINTLY INVESTED IN CASE STUDIES AND COLLABORATIVE BASELINES OF |
| | OUR WORK IN SELECT ISSUE AREAS AND COUNTRIES IN ORDER TO UNDERSTAND A |
| 4b | (Code:) (Expenses \$ 5,476,783. including grants of \$) (Revenue \$ |
| | NATIONAL PROGRAM: THE NATIONAL PROGRAMS DIVISION (NPD) MOBILIZES THE |
| | JEWISH COMMUNITY AND OTHER HUMAN RIGHTS ACTIVISTS IN THE U.S. TO |
| | ADVOCATE FOR U.S. AND INTERNATIONAL LAWS AND POLICIES THAT PROMOTE |
| | |
| | HUMAN RIGHTS IN THE DEVELOPING WORLD. TOWARD THIS END, THE NPD |
| | ORGANIZES NATIONAL CAMPAIGNS, SUCH AS THE CURRENT 'WE BELIEVE' |
| | CAMPAIGN, WHICH SEEKS TO END VIOLENCE AGAINST WOMEN AND GIRLS, STOP |
| | HATE CRIMES AGAINST LGBT PEOPLE, AND EMPOWER GIRLS TO END CHILD |
| | MARRIAGE WORLDWIDE. THE NPD ALSO RUNS THE GLOBAL JUSTICE FELLOWSHIP, |
| | WHICH INSPIRES, EDUCATES AND TRAINS KEY OPINION LEADERS IN THE AMERICA |
| | JEWISH COMMUNITY TO BECOME ACTIVIST LEADERS IN SUPPORT OF THESE |
| | CAMPAIGNS AND OTHER GLOBAL JUSTICE ISSUES. ACROSS THE U.S., THE NPD |
| | MOBILIZES AJWS'S ACTION TEAMS, GROUPS OF HIGHLY ENGAGED SUPPORTERS WHO |
| | |
| | (Code:) (Expenses \$ 2,144,594. including grants of \$) (Revenue \$ |
| | COMMUNICATIONS: THE COMMUNICATIONS DIVISION IS RESPONSIBLE FOR |
| | COMMUNICATING ABOUT AJWS TO DIVERSE AUDIENCES IN ORDER TO RAISE AJWS |
| | PROFILE ON THE NATIONAL AND GLOBAL STAGE. THROUGH DIGITAL ENGAGEMENT, |
| | PUBLICATIONS AND MEDIA, THE COMMUNICATIONS DIVISION MOTIVATES |
| | SUPPORTERS TO DONATE AND TAKE ACTION TO PROMOTE HUMAN RIGHTS IN THE |
| | DEVELOPING WORLD. COMMUNICATIONS STAFF MEMBERS MAINTAIN THE AJWS |
| | WEBSITE, CONDUCT ONLINE FUNDRAISING AND ADVOCACY INITIATIVES, PROMOTE |
| | AJWS THROUGH TRADITIONAL MEDIA RELATIONS AND THROUGH SOCIAL MEDIA, AN |
| | PRODUCE AN ARRAY OF CONTENT AND PUBLICATIONS THAT HIGHLIGHT THE WORK |
| | |
| | AND IMPACT OF OUR GRANTEES AND ACTIVISTS. WE USE THESE STRATEGIES TO |
| | INCREASE AWARENESS OF HUMAN RIGHTS ISSUES, INSPIRE SUPPORTERS TO TAKE |
| | ACTION THROUGH OUR CAMPAIGNS, DRIVE FUNDRAISING, AND POSITION AJWS AS |
| | |
| | Other program services (Describe in Schedule O.) |
| 4d | Other program services (Describe in Schedule O.) (Expenses \$ 1,807,659. including grants of \$ 551,000.) (Revenue \$ 347,512.) |
| 4d | (Expenses \$ 1,807,659. including grants of \$ 551,000.) (Revenue \$ 347,512.) |
| 4d | (Expenses \$ 1,807,659. including grants of \$ 551,000.) 347,512.) Total program service expenses ► 53,096,345. 547,512.) |
| 4d 4e | (Expenses \$ 1,807,659. including grants of \$ 551,000.) (Revenue \$ 347,512.) Total program service expenses ► 53,096,345. Form 990 (|
| 4d 4e | (Expenses \$ 1,807,659. including grants of \$ 551,000.) (Revenue \$ 347,512.) Total program service expenses ► 53,096,345. Form 990 (2) |

| Form | aan | (2014) |
|-------|-----|--------|
| FUIII | 990 | (2014) |

Part IV Checklist of Required Schedules

AMERICAN JEWISH WORLD SERVICE, INC.

| | | | Yes | No |
|-----|---|-------------|-----|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | 1 | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| | during the tax year? If "Yes," complete Schedule C, Part II | 4 | Х | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | _ | | v |
| - | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | _X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | х | |
| - | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | Δ | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | - | | х |
| 0 | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | 8 | | х |
| 9 | Schedule D, Part III | 0 | | - 23 |
| 9 | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | |
| | | 9 | | х |
| 10 | If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | х | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X | | | |
| | as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | Х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | Х |
| с | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | 37 | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> | 11f | X | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | v | |
| ۴. | Schedule D, Parts XI and XII | 12a | Х | |
| a | Was the organization included in consolidated, independent audited financial statements for the tax year? | 104 | | v |
| 13 | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b 13 | | X |
| | Is the organization a school described in section 170(b)(1)(A)(ii)? <i>It "Yes," complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States? | 13 14a | х | |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | <u>і</u> та | | <u> </u> |
| | 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 | 14b | х | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | <u> </u> |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | Х | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | Х | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | Х | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes, " | | | |
| | complete Schedule G, Part III | 19 | | X |
| | Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | 20a | | Х |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |

Form **990** (2014)

432003 11-07-14

| - | ~~~ | (0011) |
|------|-----|--------|
| ⊦orm | 990 | (2014) |

AMERICAN JEWISH WORLD SERVICE, INC.

| Pa | rt IV Checklist of Required Schedules (continued) | | | |
|-----|---|------|-----|-----|
| | | | Yes | No |
| 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 | Х | |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | Х | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No", go to line 25a | 24a | | Х |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| с | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| | any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | Х |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | Х |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | | | |
| | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | | | |
| | complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | X |
| с | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | |
| | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | X | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | 37 |
| | If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | - v |
| | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | v |
| ~ ~ | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | x |
| 05- | Part V, line 1 | 34 | | X |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | |
| a | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)2 If "Yes," complete Schedule R. Part V. line 2 | 256 | | |
| 26 | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | 26 | | x |
| 37 | 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 | 36 | | |
| 31 | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | x |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | - 57 | | |
| 00 | Note. All Form 990 filers are required to complete Schedule O | 38 | х | |
| | | 1 00 | | |

Form **990** (2014)

432004 11-07-14

| <u>Form</u> | 990 (2014) AMERICAN JEWISH WORLD SERVICE, INC. 22-2584 | <u>370</u> | P | age 5 |
|-------------|---|------------|-----|--------------|
| Pa | t V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 84 | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 | | | |
| с | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | Х | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | |
| | filed for the calendar year ending with or within the year covered by this return 2a 166 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Х | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | X |
| | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O | 3b | | |
| | 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 | | x |
| b | If "Yes," enter the name of the foreign country: | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Х |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | | | |
| | any contributions that were not tax deductible as charitable contributions? | 6a | | x |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| | were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | Х | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Х | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | |
| - | to file Form 8282? | 7c | | x |
| d | If "Yes," indicate the number of Forms 8282 filed during the year 7d | | | |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | Х |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X |
| a | 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 | | X |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | Х |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | X |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders 11a | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | |
| | amounts due or received from them.) 11b | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| | 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? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | |
| | organization is licensed to issue qualified health plans 13b | | | |
| с | Enter the amount of reserves on hand 13c | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Х |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | |
| | | - | 000 | |

Form **990** (2014)

Page 5

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5

| Form 990 | (2014) |
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AMERICAN JEWISH WORLD SERVICE, INC.

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

| sec | Check if Schedule O contains a response or note to any line in this Part VI | | | | | |
|--------------|---|--|--------------------------------------|-----------------------|--------|---|
| | | | | | Yes | T |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 27 | | 100 | |
| | 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 | 16 | 26 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationsh | | | | | |
| - | officer, director, trustee, or key employee? | | | 2 | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the | | | | | |
| 0 | of officers, directors, or trustees, or key employees to a management company or other person? | | | 3 | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form | | | 4 | | |
| 5 | Did the organization make any significant changes to its governing documents since the prior rom. Did the organization become aware during the year of a significant diversion of the organization's as | | | 5 | | |
| 6 | | | | 6 | | |
| | Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or a | | ····· - | 0 | | |
| <i>i</i> a | | | | 7- | | |
| b | more members of the governing body? | | ····· | 7a | | |
| D | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | | | |
| _ | persons other than the governing body? | | | 7b | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year | | | - | v | |
| a | The governing body? | | | <u>8a</u> | X X | |
| | Each committee with authority to act on behalf of the governing body? | | | 8b | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re | | | | | |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | | 9 | | |
| ec | tion B. Policies (This Section B requests information about policies not required by the Internal F | Revenue Code.) | | | | |
| | | | г | | Yes | |
| | Did the organization have local chapters, branches, or affiliates? | | | 10a | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such of | chapters, affiliates, | | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? $\ _{.}$ | | | 10b | | |
| 1a | Has the organization provided a complete copy of this Form 990 to all members of its governing bo | dy before filing the | form? | 11a | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | | | |
| 2a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris | se to conflicts? | | 12b | X | |
| 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 | X | |
| 3 | Did the organization have a written whistleblower policy? | | [| 13 | X | |
| 4 | Did the organization have a written document retention and destruction policy? | | | 14 | X | |
| 5 | Did the process for determining compensation of the following persons include a review and approv | | | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | ? | | | | |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | X | |
| | Other officers or key employees of the organization | | | 15b | X | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | | | |
| 6a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange | ement with a | | | | |
| | taxable entity during the year? | | | 16a | | |
| | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate | | | | | |
| b | If "Yes," did the ordanization follow a written policy or procedure reduiring the ordanization to evaluate | | | | | |
| b | | anization's | | 16b | | |
| b | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga | | | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga exempt status with respect to such arrangements? | | | 100 | | |
| ec | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga exempt status with respect to such arrangements? tion C. Disclosure | | | | . H] | |
| ec 7 | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► <u>AK</u> , AL, AR, AZ, C | CA, CO, CT, I | DC,FL | ,GA | | |
| ec 7 | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► <u>AK</u> , AL, AR, AZ, C Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- | CA, CO, CT, I | DC,FL | ,GA | | |
| ec 7 | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► <u>AK</u> , <u>AL</u> , <u>AR</u> , <u>AZ</u> , <u>C</u> Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- for public inspection. Indicate how you made these available. Check all that apply | CA , CO , CT , I -T (Section 501(c)(3 | DC,FL | ,GA | | |
| ec 7 8 | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, C Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain | CA , CO , CT , I -T (Section 501(c)(3 in in Schedule O) | DC , FL 3)s only) a | , GA vailab | ble | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, Construction 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website Y Describe in Schedule O whether (and if so, how) the organization made its governing documents, construction is predicted by the organization made its governing documents, construction is predicted by the organization made its governing documents, construction is predicted by the organization made its governing documents, construction is predicted by the organization made its governing documents, construction is predicted by the organization made its governing documents, construction is predicted by the organization made its governing documents. | CA , CO , CT , I -T (Section 501(c)(3 in in Schedule O) | DC , FL 3)s only) a | , GA vailab | ble | |
| ec 7 8 | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, Construction 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain Describe in Schedule O whether (and if so, how) the organization made its governing documents, constatements available to the public during the tax year. | CA , CO , CT , I -T (Section 501(c)(3 in in Schedule O) onflict of interest p | DC , FL 3)s only) a olicy, and | , GA vailab | ble | |
| ec 7 8 | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, Construction 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain) Describe in Schedule O whether (and if so, how) the organization made its governing documents, constatements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's boots. | CA, CO, CT, I T (Section 501(c)(3 in in Schedule O) onflict of interest p ooks and records: | DC , FL 3)s only) a olicy, and | , GA vailab | ble | |
| ec 7 8 | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, Construction 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain Describe in Schedule O whether (and if so, how) the organization made its governing documents, constatements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's book KRISTINE STALLONE & DANIELLE EDWARDS - 212-792-283 | CA, CO, CT, I -T (Section 501(c)(3 <i>in in Schedule O</i>) onflict of interest p ooks and records: 38 | DC , FL 3)s only) a olicy, and | , GA vailab | ble | |
| 9 | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► <u>AK</u> , AL, AR, AZ, Construction 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990- for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain Describe in Schedule O whether (and if so, how) the organization made its governing documents, constatements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's boost KRISTINE STALLONE & DANIELLE EDWARDS - 212-792-283. | CA, CO, CT, I T (Section 501(c)(3 in in Schedule O) onflict of interest p ooks and records: | DC , FL 3)s only) a olicy, and | , GA vailat | ble | |

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

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

X

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

| | 1 | T | | | | npo | nout | 1 | | |
|-------------------------------------|------------------------|--------------------------------|-----------------------|---------|--------------|---------------------------------|--------|-----------------|-------------------------------|--------------------------|
| (A) | (B) | | | | C) | _ | | (D) | (E) | (F) |
| Name and Title | Average | | not c | | more | than | | Reportable | Reportable | Estimated |
| | hours per | | | | | is bot pr/trus | | compensation | compensation | amount of |
| | week | | | | | | Ĺ, | from the | from related organizations | other |
| | (list any hours for | direct | | | | _ | | organization | (W-2/1099-MISC) | compensation from the |
| | related | e or | stee | | | Isate | | (W-2/1099-MISC) | | organization |
| | organizations | trust | al tru | | yee | ompe | | | | and related |
| | below | Individual trustee or director | Institutional trustee | 5 | Key employee | Highest compensated employee | er | | | organizations |
| | line) | Indiv | Instit | Officer | Keye | High | Former | | | |
| (1) MARION BERGMAN | 1.00 | | | | | | | | | |
| TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (2) RABBI MENACHEM CREDITOR | 1.00 | | | | | | | | | |
| TRUSTEE | | x | | | | | | 0. | 0. | Ο. |
| (3) BARBARA DOBKIN | 1.00 | | | | | | | | | |
| PAST CHAIR & TRUSTEE | | x | | | | | | 0. | 0. | 0. |
| (4) JAMES DUBEY | 1.00 | | | | | | | | | |
| VICE CHAIR | | x | | x | | | | 0. | 0. | 0. |
| (5) MONTE DUBE | 1.00 | | | | | | | | | |
| SECRETARY | | x | | x | | | | 0. | 0. | 0. |
| (6) THOMAS DUBIN (FROM JUNE 2014) | 1.00 | | | | | | | | | |
| TRUSTEE | | x | | | | | | 0. | 0. | 0. |
| (7) EILEEN EPSTEIN | 1.00 | | | | | | | | | |
| TRUSTEE | | x | | | | | | 0. | 0. | 0. |
| (8) MARTY FRIEDMAN (FROM MARCH 2015 | 1.00 | | | | | | | | | |
| PAST CHAIR & TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (9) RABBI ELYSE FRISHMAN | 1.00 | | | | | | | | | |
| TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (10) MARC GREENWALD | 1.00 | | | | | | | | | |
| TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (11) MICHAEL HIRSCHHORN | 1.00 | | | | | | | | | |
| TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (12) CAROL JOSEPH | 1.00 | | | | | | | | | |
| TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (13) HOWARD KLECKNER | 1.00 | | | | | | | | | |
| TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (14) JAMES KOSHLAND | 1.00 | | | | | | | | | |
| TREASURER | | X | | X | | | | 0. | 0. | 0. |
| (15) BETH KRAFT | 1.00 | | | | | | | | | |
| TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (16) SUSAN LOWENBERG | 1.00 | | | | | | | | | |
| TRUSTEE | | X | | | | | | 0. | 0. | 0. |
| (17) KATHLEEN LEVIN | 1.00 | | | | | | | | | |
| CHAIR | | Х | | Х | | | | 0. | 0. | 0. |
| 432007 11-07-14 | | | | | | | | | | Form 990 (2014) |

432007 11-07-14

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Form 990 (2014)

| | | | | | | | | CE, INC. | 22-2 | 584 | 370 | Pa | ge 8 |
|---|------------------------|--------------------------------|-----------------------|-------------|--------------|---------------------------------|--------|---------------------------------|--------------------|-------|----------|--------------------|-------------|
| Part VII Section A. Officers, Directors, Tru | | ploy | ees, | | | ighe | st (| | es (continued) | | | | |
| (A) | (B) | | | | C) | _ | | (D) | (E) | | | (F) | |
| Name and title | Average | (do | | Pos heck | | than | one | Reportable | Reportable | | | timateo | |
| | hours per | | | | | is bot pr/trus | | · · | compensatio | | | iount c | of |
| | week | | | | | | | trom | from related | | | other . | |
| | (list any hours for | irecto | | | | | | the | organization | | | oensat | |
| | related | er d | ee | | | sated | | organization (W-2/1099-MISC) | (W-2/1099-MIS | 50) | | om the anizatio | |
| | organizations | rustee | trus | | ee | npen | | (00-2/1099-00130) | | | - | relate | |
| | below | lual ti | tiona | | ploy | st cor yee | _ | | | | | nizatio | |
| | line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | | orgu | Incatio | |
| (18) RUTH MESSINGER | 45.00 | = | = | 0 | \leq | тə | ш | | | | | | |
| PRESIDENT | | x | | х | | | | 330,849. | | Ο. | 20 | 9,96 | 51. |
| (19) JOANNE MOORE | 1.00 | | | | | | | | | ••• | | ,,,,,, | |
| TRUSTEE | | x | | | | | | 0. | | Ο. | | | 0. |
| (20) LAWRENCE S. PHILLIPS | 1.00 | | | | | | | | | • • | | | |
| PAST CHAIR & FOUNDER | | x | | | | | | 0. | | Ο. | | | 0. |
| (21) RUSS PRATT | 1.00 | | | | | | | | | ••• | | | ••• |
| TRUSTEE | 1000 | x | | | | | | 0. | | Ο. | | | 0. |
| (22) WILLIAM RESNICK | 1.00 | | | | | | | | | | | | |
| TRUSTEE | 1.00 | x | | | | | | 0. | | Ο. | | | 0. |
| (23) MARCELLA KANFER ROLNICK | 1.00 | | | | | | | | | •• | | | •• |
| TRUSTEE | 1.00 | x | | | | | | 0. | | Ο. | | | 0. |
| (24) ERIC SAHN | 1.00 | | | | | | | | | •• | | | •• |
| TRUSTEE | 1.00 | x | | | | | | 0. | | Ο. | | | Ο. |
| (25) JOLIE SCHWAB | 1.00 | | | | | | | 0. | | 0. | | | 0. |
| VICE CHAIR | 1.00 | x | | х | | | | 0. | | Ο. | | | 0. |
| (26) JUDITH STERN | 1.00 | ^ | | Δ | | | | 0. | | 0. | | | 0. |
| | 1.00 | x | | | | | | 0. | | 0. | | | 0. |
| TRUSTEE | | | | | | | | 330,849. | | 0. | 20 | 9,96 | |
| 1b Sub-total | | | | | | | | | | 0. | | | |
| c Total from continuation sheets to Part | | | | | | | | 2,394,056. | | 0. | | 5,88 | |
| d Total (add lines 1b and 1c) | | | | | | | | 2,724,905. | | - | 320 | 5,85 | 50. |
| 2 Total number of individuals (including but | not limited to th | iose | liste | ed al | bov | e) wł | no r | received more than \$100 | ,000 of reportab | le | | | 27 |
| compensation from the organization | | | | | | | | | | | | Vaal | 27 |
| | | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former office | | | | | | | | | | | | | 37 |
| line 1a? If "Yes," complete Schedule J for | | | | | | | | | | | 3 | _ | X |
| 4 For any individual listed on line 1a, is the | | | - | | | | | - | the organization | | | | |
| and related organizations greater than \$1 | | | | | | | | | | | 4 | х | |
| 5 Did any person listed on line 1a receive of | - | | | | - | | ela | ted organization or indiv | idual for services | ; | | | |
| rendered to the organization? If "Yes," co | mplete Schedul | e J f | or su | ıch | pers | son . | | | | | 5 | | Х |
| Section B. Independent Contractors | | | | | | | | | | | | | |
| 1 Complete this table for your five highest of | - | | | | | | | | | npens | ation fi | rom | |
| the organization. Report compensation for | r the calendar y | ear | endi | ng v | vith | or w | ithi | n the organization's tax | year. | | | | |
| (A) | | | | | | | | (B) | | ~ | (C | | |
| Name and busines | | | | | | | | Description of s | ervices | C | omper | isation | 1 |
| QUADRIGA ART, PO BOX 479 |), 19 ST(| ONE | ΞY | BI | ROO | ЭK | | | | | ~ - | | |
| DR., WILTON, NH 03086 | | | | | | | | MAILING SERV | ICES | | 37 | 9,83 | 32. |
| BLACKBAUD | | _ | | | | | | WEBSITE: | | | | | |
| PO BOX 930256, ATLANTA, | GA 3119: | 3 | | | | | | INFORMATIONA | | | 202 | 2,92 | 29. |
| MCGLADREY LLP | | | | | | | | AUDIT AND RI | SK | | | | |
| 5155 PAYSPHERE CIRCLE, C | | | | | | | | MANAGEMENT | | | 17: | 1,90 |)8. |
| SAFEGUARD WORLD INT'L/GI | | | | | | | | | | | | | |
| 24-25 EDWIN FODEN BUSINE | | | <u>, N</u> | 105 | SS | LZ | | SERVICE OUTS | OURCING | | 154 | 4, 75 | 56. |
| TRIPI CONSULTING ASSOCIA | TES, INC | 2 | | | | | | FUNDRAISING | | | | | |
| 255 PLUTARCH ROAD, HIGHI | AND, NY | 12 | 252 | 28 | | | | CONSULTANT | | | 12' | 7,05 | 55. |
| 2 Total number of independent contractors | (including but n | ot li | mite | d to | tho | se lis | stee | d above) who received n | nore than | | | | |
| \$100,000 of compensation from the orga | | | | | | 8 | | | | | | | |

\$100,000 of compensation from the organization ► 8 SEE PART VII, SECTION A CONTINUATION SHEETS

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2014.04030 AMERICAN JEWISH WORLD SERVI 68200182

Form **990** (2014)

| Form 990 AMERICAN | JEWISH | WC | ORI | D | SI | ER۱ | 710 | CE, INC. | 22-258 | 4370 |
|---|------------------------|--------------------------------|-----------------------|---------|--------------|--------------------------------|--------|---------------------------------|-----------------|--------------------------|
| Part VII Section A. Officers, Directors, Trustees, Key En | | | | es, a | nd H | ligh | est | Compensated Employ | ees (continued) | |
| (A) (B) | | | | (0 | C) | | | (D) | (E) | (F) |
| Name and title | Average | | | Pos | ition | | | Reportable | Reportable | Estimated |
| | hours | (cł | neck | k all i | that | app | ly) | compensation | compensation | amount of |
| | per | | | | | | | from | from related | other |
| | week | 5 | | | | loyee | | the | organizations | compensation from the |
| | (list any hours for | direct | | | | d em p | | organization (W-2/1099-MISC) | (W-2/1099-MISC) | organization |
| | related | ee or | stee | | | n sate | | (11 2/1000 11100) | | and related |
| | organizations | trust | lal tru | | o yee | ompe | | | | organizations |
| | below | Individual trustee or director | Institutional trustee | Ser | Key employee | Highest com pensated em ployee | Former | | | |
| | line) | Indi | Inst | Officer | Key | Hig | Бол | | | |
| (27) BEATRICE WILDERMAN TRUSTEE | 1.00 | x | | | | | | 0. | 0. | 0. |
| (28) ROBERT BANK | 45.00 | ^ | | | | | | 0. | 0. | 0. |
| EXCEUTIVE VICE PRESIDENT | 43.00 | | | x | | | | 311,932. | 0. | 23,088. |
| (29) KRISTINE STALLONE | 45.00 | | | | | | | 511,952. | 0. | 23,000. |
| VP FOR FINANCE & ADMIN | 43.00 | | | x | | | | 249,071. | 0. | 31,441. |
| (30) MANIA BOYDER | 45.00 | | | | | | | 249,071. | 0. | JI,44I. |
| VP FOR DEVELOPMENT | 43.00 | | | | x | | | 279,795. | 0. | 25,384. |
| (31) AARON DORFMAN | 45.00 | | | | ~ | | | 215,155. | 0. | 23,304. |
| VP FOR NATIONAL PROGRAM | 40.00 | | | | x | | | 204,490. | 0. | 30,767. |
| (32) JACQUELINE HART | 45.00 | | | | | | | 201,190. | 0. | 50,707. |
| VP FOR STRATEGIC LEARNING RESEARCH & | 10000 | | | | x | | | 203,614. | 0. | 17,466. |
| (33) STUART SCHEAR | 45.00 | | | | | | | | | |
| VP FOR COMM. MARKETING & COMMUNITY R | | | | | х | | | 243,992. | 0. | 21,462. |
| (34) SHARI TURITZ | 45.00 | | | | | | | | | |
| VP FOR INTERNATIONAL PROGRAM | | | | | Х | | | 196,607. | 0. | 38,946. |
| (35) BROOKE HIRSCHFELDER | 45.00 | | | | | | | | | |
| DIRECTOR OF HUMAN RESOURCES | | | | | | Х | | 162,374. | 0. | 16,376. |
| (36) COREY LUTSKY | 45.00 | | | | | | | | | |
| DIRECTOR OF INFORMATION TECHNOLOGY | | | | | | Х | | 143,948. | 0. | 32,074. |
| (37) ALLISON LEE | 45.00 | | | | | | | 122.002 | 0 | 06 100 |
| EXECUTIVE DIRECTOR, LOS ANGELES | 45 00 | | | | | X | | 133,863. | 0. | 26,127. |
| (38) SAMANTHA WOLTHUIS | 45.00 | | | | | | | 122 660 | 0 | 10 000 |
| DIRECTOR OF INTERNATIONAL OPERATIONS | 15 00 | | | | | Х | | 132,660. | 0. | 19,920. |
| (39) DANIELLE EDWARDS | 45.00 | | | | | v | | 121 710 | 0 | 12 020 |
| DIRECTOR OF FINANCE | | | | | | Х | | 131,710. | 0. | 13,838. |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| Total to Dart VIII Socian A line to | | | | | | | | 2,394,056. | | 296,889. |
| Total to Part VII, Section A, line 1c | | | | | | | | 4,554,050. | | 4,009. |

05-01-14

| | | III Statement of Reven | | | | | | |
|--|-------------------|---|-----------------|--------------------|---|--|--|--|
| | | Check if Schedule O conta | ains a response | or note to any lin | <u>e in this Part VIII …</u> (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| ts ts | 1 2 | a Federated campaigns | 1a | | | | | 012 014 |
| Contributions, Gifts, Grants and Other Similar Amounts | | b Membership dues | | | | | | |
| ۲ و و | | c Fundraising events | | 11,940. | | | | |
| ar / | | d Related organizations | | , - | | | | |
| , and a second s | | e Government grants (contributi | | | | | | |
| Sijo | | f All other contributions, gifts, grant | · · | | | | | |
| her | | similar amounts not included abov | | 57,396,314. | | | | |
| Ξđ | | g Noncash contributions included in lines | | 1,853,165. | | | | |
| | | h Total. Add lines 1a-1f | | | 57,408,254. | | | |
| <u> </u> | <u> </u> | | | Business Code | | | | |
| ø | 2 8 | a STUDY TOUR TRIP FEES | | 900099 | 347,512. | 347,512. | | |
| , vic | _ | | | 500055 | 517,512. | | | |
| Ser | | - | | | | | | |
| E | | | | | | | | |
| Program Service Revenue | | a | | | | | | |
| Pro | 4 | f All other program service reve | | | | | | |
| | | f All other program service reve g Total. Add lines 2a-2f | | | 347,512. | | | |
| - | 3 | Investment income (including | | | 517,512. | | | |
| | 5 | other similar amounts) | , | · · | 205,408. | | | 205,408 |
| | 4 | Income from investment of tax | | r | | | | |
| | - 5 | Royalties | | | | | | |
| | 5 | noyanes | (i) Real | (ii) Personal | | | | |
| | 6 - | a Gross rents | 115,891 | | | | | |
| | | | 7,938 | | | | | |
| | | b Less: rental expensesc Rental income or (loss) | 107,953 | | | | | |
| | | d Net rental income or (loss) | , | | 107,953. | | | 107,953 |
| | | a Gross amount from sales of | (i) Securities | | 107,555. | | | 107,555 |
| | 1 0 | a ssets other than inventory | 4,477,187 | (ii) Other | | | | |
| | | b Less: cost or other basis | 4,477,107 | • | | | | |
| | ĸ | and sales expenses | 4,422,778 | | | | | |
| | | c Gain or (loss) | | | | | | |
| | | d Net gain or (loss) | , | | 54,409. | | | 54,409 |
| | | a Gross income from fundraising | | | 51,105. | | | 51,105 |
| Other Revenue | 0 0 | including \$ 11 | | | | | | |
| Ne l | | contributions reported on line | | | | | | |
| ۳, | | Part IV, line 18 | , | 21,907. | | | | |
| her | ŀ | b Less: direct expenses | | | | | | |
| δļ | | c Net income or (loss) from fund | | ····· ► | -7,271. | | | -7,271 |
| | | a Gross income from gaming ac | - | | ., | | | ., |
| | | Part IV, line 19 | | | | | | |
| | ł | b Less: direct expenses | | | | | | |
| | | c Net income or (loss) from gam | | | | | | |
| . | | a Gross sales of inventory, less | | | | | | |
| | | and allowances | | | | | | |
| | ł | b Less: cost of goods sold | | | | | | |
| | | c Net income or (loss) from sales | | | | | | |
| | | Miscellaneous Revenue | | Business Code | | | | |
| - | 11 = | a MISCELLANEOUS INCOME | ~ | 900099 | 42,551. | | | 42,551 |
| | | | | | , | | | |
| | | с | <u> </u> | | | | | |
| | | d All other revenue | <u> </u> | | | | | |
| | | e Total. Add lines 11a-11d | | | 42,551. | | | |
| . | 12 | Total revenue. See instructions. | | | 58,158,816. | 347,512. | 0. | 403,050. |
| 432009 11-07-1 | | | | | , , • • | • - • , • | ••• | Form 990 (2014) |

AMERICAN JEWISH WORLD SERVICE, INC.

432009 11-07-14

Form 990 (2014)

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2014.04030 AMERICAN JEWISH WORLD SERVI 68200182

22 - 2584370

Page **9**

AMERICAN JEWISH WORLD SERVICE, INC.

4,272,025.

17,727. Form 990 (2014)

0.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) (D) (C) (A) Do not include amounts reported on lines 6b, Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 1,689,877. 1,689,877. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign 37,715,689. 37,715,689. individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 Compensation of current officers, directors, 1,497,404. 280,976. 2,108,841. 330,461. trustees, and key employees 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 9,100,920. 5,680,704. 1,855,966. 1,564,250. 7 Other salaries and wages Pension plan accruals and contributions (include 8 314,323. 194,552. 66,018. 53,753. section 401(k) and 403(b) employer contributions) 263,638. 1,190,974. 740,808. 186,528. Other employee benefits g 954,914. 598,261. 185,792. 170,861. Payroll taxes 10 Fees for services (non-employees): 11 a Management 76,242. 15,910. 60,093. 239. Legal b 147,780. 147,780. Accounting С 40,706. 40,706. Lobbying d 132,170. 132,170. Professional fundraising services. See Part IV, line 17 е 22,443. 22,443. Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, q 1,980,227. 1,372,422. 340,833. 266,972. column (A) amount, list line 11g expenses on Sch O.) 22,767. 11,569. 43,496. 9,160. Advertising and promotion 12 42,157. 263,224. 1,051,556. 746,175. 13 Office expenses 342,931. 246,802. 32,223. 63,906. Information technology 14 15 Royalties 1,591,631. 1,002,857. 309,948. 278,826. 16 Occupancy 1,459,940. 1,242,317. 60,519. 157,104. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 223,680. 153,134. 21,111. 49,435. Conferences, conventions, and meetings 19 Interest 20 21 Payments to affiliates 376,202. 79,621. 231,467. 65,114. Depreciation, depletion, and amortization 22 137,937. 85,461. 27,643. 24,833. 23 Insurance Other expenses. Itemize expenses not covered 24 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.) (..... 566,505. 243,359. 160,871. 162,275. MISCELLANEOUS а BAD DEBT EXPENSE 125,132. 125,132. h 80,753. 26,494. MEMBERSHIP DUES 48,554. 5,705. С 12,364. d PARTNER SUPPORT 10,070. 445. 1,849.

e All other expenses 61,487,233. 53,096,345. 4,118,863. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here **K** if following SOP 98-2 (ASC 958-720) 117,568. 99,841.

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2014.04030 AMERICAN JEWISH WORLD SERVI 68200182

462,403.

9,300.

6,710,803.

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Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔟 and complete lines 27 through 29, and lines 33 and 34. 14,117,805. Unrestricted net assets 23,611,265. Temporarily restricted net assets Permanently restricted net assets 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 37,738,370. Total net assets or fund balances 44,449,173. Total liabilities and net assets/fund balances

Notes and loans receivable, net 7 8 Inventories for sale or use 477,660. Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 4,698,342. 10a basis. Complete Part VI of Schedule D 3,681,563. 1,103,145. 1,016,779. b Less: accumulated depreciation _____10b 10c 7,594,405. 8,454,420. Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 Intangible assets 14 70,208. Other assets. See Part IV, line 11 15 44,449,173. 42,349,218. **Total assets.** Add lines 1 through 15 (must equal line 34) 16 707,469. 17 1,630,981. Accounts payable and accrued expenses 5,434,422. 5,774,615. 18 Grants payable 106,509. 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 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24

| (2014) AMERICAN JEWISH WORLD SERVICE | , INC. | 22- | 2584370 Page 11 |
|--|---------------------------------|-----|---------------------------|
| Balance Sheet | | | |
| Check if Schedule O contains a response or note to any line in this Part X | | | |
| | (A) Beginning of year | | (B) End of year |
| Cash - non-interest-bearing | 1,050. | 1 | 698. |
| Savings and temporary cash investments | 13,074,079. | 2 | 17,956,744. |
| Pledges and grants receivable, net | 22,128,626. | 3 | 14,187,362. |
| Accounts receivable, net | | 4 | |
| Loans and other receivables from current and former officers, directors, | | | |

trustees, key employees, and highest compensated employees. Complete

employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of

Total liabilities. Add lines 17 through 25

Part II of Schedule L

Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing 5

6

645,997.

87,218.

99,309.

408,826.

7,913,731.

14,981,090.

19,445,097.

9,300.

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Schedule D

_iabilities

Net Assets or Fund Balances

Assets

Part X

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42,349,218. Form **990** (2014)

34,435,487.

| Form | 990 (2014) AMERICAN JEWISH WORLD SERVICE, INC. | 22- | 258437 | 0 | Page 12 |
|------|---|----------|--------|------------|----------------|
| Pa | t XI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | X |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | | 816. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 233. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | 417. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 37,7 | | 370. |
| 5 | Net unrealized gains (losses) on investments | 5 | | <u>62,</u> | 699. |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | _ | <u>37,</u> | 165. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | 34,4 | 35, | 487. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | _ | _ |
| | | | _ | Ye | s No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | _ | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2 | a | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | l on a | | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2 | b X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | e basis, | | | |
| | consolidated basis, or both: | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | | c X | |
| _ | If the organization changed either its oversight process or selection process during the tax year, explain in Sche | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir | ngle Auc | | | 17 |
| | Act and OMB Circular A-133? | | 3 | a | <u> </u> |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi | | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3 | | |

Form **990** (2014)

432012 11-07-14

| SC | HE | DUL | ΕA |
|----|----|-----|----|
| | | | |

| (Form | 990 | or | 990- | ·EZ) |
|-------|-----|----|------|------|
|-------|-----|----|------|------|

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

| OMB No. 1545-0047 |
|------------------------------|
| 2014 |
| Open to Public Inspection |

Department of the Treasury Internal Revenue Service Information a

| about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/fc | orm990. | Inspection |
|---|----------|-----------------------|
| | Employer | identification number |

| Name of | the organization | | | | | | Employer | identification number |
|--------------|----------------------------------|-----------------------------|---|---------------------------|-------------------------|---------------------|----------------------|--------------------------------------|
| | AMER | ICAN JEWIS | H WORLD SERV | ICE, | INC. | | 2 | 2-2584370 |
| Part I | Reason for Public | Charity Status (| All organizations must co | omplete th | is part.) Se | ee instruction | s. | |
| The orga | nization is not a private found | lation because it is: (| (For lines 1 through 11, o | check only | one box.) | | | |
| 1 | A church, convention of ch | urches, or associatio | on of churches describe | d in sectio | on 170(b)([.] | 1)(A)(i). | | |
| 2 | A school described in sect | ion 170(b)(1)(A)(ii). | Attach Schedule E.) | | | | | |
| 3 | A hospital or a cooperative | hospital service org | anization described in s | ection 170 |)(b)(1)(A)(i | ii). | | |
| 4 | A medical research organiz | ation operated in co | njunction with a hospita | l described | d in sectio | on 170(b)(1)(A | .)(iii). Enter | the hospital's name, |
| | city, and state: | | | | | | | |
| 5 | An organization operated for | or the benefit of a co | llege or university owne | d or opera | ted by a g | overnmental | unit describ | oed in |
| | section 170(b)(1)(A)(iv). (C | Complete Part II.) | | | | | | |
| 6 | A federal, state, or local go | vernment or governr | nental unit described in | section 17 | 70(b)(1)(A) | (v). | | |
| 7 X | An organization that norma | ally receives a substa | intial part of its support | from a gov | ernmental | l unit or from t | he general | public described in |
| | section 170(b)(1)(A)(vi). (C | omplete Part II.) | | | | | | |
| 8 | A community trust describe | ed in section 170(b) | (1)(A)(vi). (Complete Par | t II.) | | | | |
| 9 | An organization that norma | ally receives: (1) more | e than 33 1/3% of its sup | port from | contributi | ons, member | ship fees, a | and gross receipts from |
| | activities related to its exen | npt functions - subje | ct to certain exceptions, | and (2) no | o more tha | n 33 1/3% of | its support | t from gross investment |
| | income and unrelated busir | ness taxable income | (less section 511 tax) fr | om busine | esses acqu | uired by the o | ganization | after June 30, 1975. |
| | See section 509(a)(2). (Cor | mplete Part III.) | | | | | | |
| 10 | An organization organized a | and operated exclus | ively to test for public sa | afety. See | section 50 | 09(a)(4). | | |
| 11 | An organization organized a | and operated exclus | ively for the benefit of, to | o perform t | the function | ons of, or to c | arry out the | purposes of one or |
| | more publicly supported or | ganizations describe | ed in section 509(a)(1) o | r section | 509(a)(2). | See section | 5 09(a)(3). C | Check the box in |
| | _lines 11a through 11d that | describes the type of | of supporting organizatio | n and com | nplete line | s 11e, 11f, an | d 11g. | |
| a | Type I. A supporting orga | anization operated, s | supervised, or controlled | by its sup | ported or | ganization(s), | typically by | ' giving |
| | the supported organization | on(s) the power to re | gularly appoint or elect | a majority (| of the dire | ctors or truste | es of the s | upporting |
| | organization. You must o | complete Part IV, Se | ections A and B. | | | | | |
| b | Type II. A supporting org | anization supervised | d or controlled in connec | tion with it | ts support | ed organizatio | on(s), by ha | ving |
| | control or management o | of the supporting org | anization vested in the s | ame perso | ons that co | ontrol or mana | age the sup | ported |
| _ | organization(s). You mus | t complete Part IV, | Sections A and C. | | | | | |
| c | Type III functionally interest | egrated. A supportin | g organization operated | in connec | tion with, | and functiona | Ily integrate | ed with, |
| | its supported organizatio | n(s) (see instructions | s). You must complete | Part IV, Se | ections A, | D, and E. | | |
| d | Type III non-functionally | y integrated. A supp | orting organization oper | ated in co | nnection v | with its suppo | rted organi: | zation(s) |
| | that is not functionally int | tegrated. The organiz | zation generally must sa | tisfy a dist | ribution re | quirement an | d an attenti | iveness |
| _ | requirement (see instruct | tions). You must cor | nplete Part IV, Section | s A and D, | , and Part | V . | | |
| e | Check this box if the orga | anization received a | written determination fro | om the IRS | that it is a | а Туре I, Туре | II, Type III | |
| | functionally integrated, or | r Type III non-functio | nally integrated support | ing organi: | zation. | | | |
| f Ent | ter the number of supported of | organizations | | | | | | |
| g Pro | ovide the following information | | | 14: X 1 11 | | | | |
| | (i) Name of supported | (ii) EIN | (iii) Type of organization (described on lines 1-9 | (iv) Is the o listed i | | (v) Amount or | - | (vi) Amount of other support (see |
| | organization | | above or IRC section | governing o | document? | support Instruct | | Instructions) |
| | | | (see instructions)) | Yes | No | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | 1 | 1 | | | | | 1 |

LHA For Paperwork Reduction Act Notice, see the Instructions for

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Schedule A (Form 990 or 990-EZ) 2014

Form 990 or 990-EZ. 432021 09-17-14

Total

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Schedule A (Form 990 or 990-EZ) 2014 AMERICAN JEWISH WORLD SERVICE, INC. 22-2584370 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

| Sec | ction A. Public Support | | | | | | |
|------|---|--------------------------|---|------------------------|---------------------|-------------------|-----------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 48758530. | 50583433. | 72780195. | 15717478. | 57408254. | 245247890 |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 48758530. | 50583433. | 72780195. | 15717478. | 57408254. | 245247890 |
| 5 | The portion of total contributions | | | | | | |
| | by each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, | | | | | | |
| | column (f) | | | | | | 10368181. |
| | Public support. Subtract line 5 from line 4. | | | | | | 234879709 |
| Sec | ction B. Total Support | i | i | i | i | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | Amounts from line 4 | 48758530. | 50583433. | 72780195. | 15717478. | 57408254. | 245247890 |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | 1000506 |
| | and income from similar sources \dots | 248,852. | 220,140. | 210,579. | 79,656. | 321,299. | 1080526. |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | | | | | | |
| | business is regularly carried on \dots | | | | | | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | F O 000 | | 1 - 000 | 25 222 | 64.450 | |
| | assets (Explain in Part VI.) | 70,309. | 77,197. | 15,290. | 35,302. | 64,458. | 262,556. |
| | Total support. Add lines 7 through 10 | | | | | | 246590972 |
| | Gross receipts from related activities | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | ,405,965. |
| 13 | First five years. If the Form 990 is fo | | s first, second, thi | rd, fourth, or fifth t | ax year as a sectio | on 501(c)(3) | . — |
| Sec | organization, check this box and sto ction C. Computation of Pub | p here lic Support Pe | | | | | |
| - | Public support percentage for 2014 (| | | column (f)) | | 14 | 95.25 % |
| | Public support percentage from 2013 | | - | | | | 95.04 % |
| | 33 1/3% support test - 2014. If the | | | | | | |
| | stop here. The organization qualifies | | | | | | |
| b | 33 1/3% support test - 2013. If the | | | | | | |
| | and stop here. The organization qua | | | | | | |
| 17a | 10% -facts-and-circumstances tes | | | | | | |
| | and if the organization meets the "fac | | | | | | |
| | meets the "facts-and-circumstances" | | | | | | |
| h | 10% -facts-and-circumstances tes | | | | | | |
| ~ | more, and if the organization meets t | | | | | | |
| | organization meets the "facts-and-cir | | | | • • | | |
| 18 | Private foundation. If the organization | | | | | | |
| | | | ···- ·, ·• | , , , | | edule A (Form 990 | |

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

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

| Sec | tion A. Public Support | | | | | | |
|------|--|--------------------------|--------------------|-----------------------|----------------------|--------------------|-----------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that | | | | | | |
| | are not an unrelated trade or bus- iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- | | | | | | |
| • | ization's benefit and either paid to or expended on its behalf | | | | | | |
| F | | l | | | | | |
| | The value of services or facilities furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7a | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | + | | |
| D | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| с | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from line 6.) | | | | | | |
| | tion B. Total Support | | | | | _ | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b | Unrelated business taxable income | | | | | | |
| | (less section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| | Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| | Total support. (Add lines 9, 10c, 11, and 12.) | | | L COL | <u> </u> | | |
| 14 | First five years. If the Form 990 is for | - | | | - | | |
| 800 | check this box and stop here ction C. Computation of Publ | | | | <u></u> | | P |
| | - | | | | | 45 | |
| | Public support percentage for 2014 (I | | | | | 15 | % |
| | Public support percentage from 2013 | | | | | 16 | % |
| | tion D. Computation of Inves | | | | | 1 1 | |
| | Investment income percentage for 20 | | | ine 13, column (f)) | | 17 | 9 |
| | Investment income percentage from 2 | | | | | 18 | % |
| 19a | 33 1/3% support tests - 2014. If the | organization did r | not check the box | on line 14, and lin | ie 15 is more than : | 33 1/3% , and line | 17 is not |
| | more than 33 1/3%, check this box a | nd stop here. The | e organization qua | alifies as a publicly | supported organiz | ation | ▶∟ |
| b | 33 1/3% support tests - 2013. If the | organization did r | not check a box o | n line 14 or line 19 | a, and line 16 is m | ore than 33 1/3%, | and |
| | line 18 is not more than 33 1/3%, che | ck this box and s | top here. The org | anization qualifies | as a publicly supp | orted organization | • ► |
| 20 | Private foundation. If the organizatio | n did not check a | box on line 14, 1 | 9a, or 19b, check t | this box and see in | structions | <u></u> |
| | 3 09-17-14 | | | | | nedule A (Form 99 | |
| | | | | 16 | | | |
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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in *Part VI* how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in *Part VI* how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in *Part VI* when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in *Part VI* what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" and *if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **P***art* **VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If* "Yes," *provide detail in Part VI.*
- 7 Did the organization provide a grant, Ioan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI*.
- **c** Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer (b) below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2014 AMERICAN JEWISH WORLD SERVICE, INC. Part IV Supporting Organizations (continued)

| | | | Yes | No |
|-------|---|-----------|-------|----------|
| | Lie the eventienties accepted a sift or contribution from any of the following reveaus? | | res | NO |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | |
| | A family member of a person described in (a) above? | 11b | | <u> </u> |
| | A 35% controlled entity of a person described in (a) or (b) above?If "Yes" to a, b, or c, provide detail in Part VI. | 11c | | L |
| Sec | tion B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | | |
| | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the | | | |
| | tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or | | | |
| | controlled the organization's activities. If the organization had more than one supported organization, | | | |
| | describe how the powers to appoint and/or remove directors or trustees were allocated among the supported | | | |
| | organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | |
| | supervised, or controlled the supporting organization. | 2 | | |
| Sec | tion C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| | the supported organization(s). | 1 | | |
| Sec | tion D. Type III Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | | |
| | organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax | | | |
| | year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the | | | |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| Sec | tion E. Type III Functionally-Integrated Supporting Organizations | | | L |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions) | | | |
| а | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| с | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins | tructions | ;). | |
| 2 | Activities Test. Answer (a) and (b) below. | Î | Yes | No |
| а | | | | |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | those supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | | | |
| | that these activities constituted substantially all of its activities. | 2a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | | | |
| | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | |
| | activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | |
| | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| | trustees of each of the supported organizations? Provide details in <i>Part VI</i> . | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | | | |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | Зb | | |
| 43202 | 5 09-17-14 Schedule A (Form S | | 0-EZ) | 2014 |
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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| A) Prior Year | (B) Current Year (optional) |
|---------------|--------------------------------|
| | |
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| | |
| A) Prior Year | (B) Current Year (optional) |
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| | Current Year |
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| | |
| | e III supporting or |

instructions).

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| Fai | v Type III Non-Functionally Integrated 509 | (a)(3) Supporting Org | anizations (continued) | |
|------------|--|-------------------------------|----------------------------|------------------------|
| Secti | on D - Distributions | | | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exe | empt purposes | | |
| 2 | Amounts paid to perform activity that directly furthers exemption | ot purposes of supported | | |
| | organizations, in excess of income from activity | | | |
| 3 | Administrative expenses paid to accomplish exempt purpose | es of supported organizatior | IS | |
| 4 | Amounts paid to acquire exempt-use assets | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | |
| 8 | Distributions to attentive supported organizations to which the | he organization is responsive | e | |
| | (provide details in Part VI). See instructions. | | | ļ |
| 9 | Distributable amount for 2014 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by Line 9 amount | | | |
| Secti | on E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions | (iii) Distributable |
| | | | Pre-2014 | Amount for 2014 |
| 1 | Distributable amount for 2014 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2014 | | | |
| | (reasonable cause required-see instructions) | | | |
| 3 | Excess distributions carryover, if any, to 2014: | | | |
| а | | | | |
| b | | | | |
| C | | | | |
| d | | | | |
| | From 2013 | | | |
| | Total of lines 3a through e | | | |
| | Applied to underdistributions of prior years | | | |
| | Applied to 2014 distributable amount | | | |
| _ <u>i</u> | | | | |
| _j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 | Distributions for 2014 from Section D, | | | |
| | line 7: \$ | | | |
| | Applied to underdistributions of prior years | | | |
| - | Applied to 2014 distributable amount | | | |
| - | Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 | Remaining underdistributions for years prior to 2014, if | | | |
| | any. Subtract lines 3g and 4a from line 2 (if amount | | | |
| | greater than zero, see instructions). | | | |
| 6 | Remaining underdistributions for 2014. Subtract lines 3h | | | |
| | and 4b from line 1 (if amount greater than zero, see | | | |
| 7 | instructions). | | | |
| 7 | Excess distributions carryover to 2015. Add lines 3j | | | |
| 8 | and 4c. Breakdown of line 7: | | | |
| <u> </u> | | | | |
| b | | | | |
| <u> </u> | | | | |
| | Excess from 2013 | | | |
| | Excess from 2014 | | | |
| • | | | | |

Schedule A (Form 990 or 990-EZ) 2014

432027 09-17-14

| Part VI Supplemental Information. Provide the explana Also complete this part for any additional information. (\$ | ations required by Part I See instructions). | II, line 10; Part II, line 17a or 17b; and Part III, line 12. |
|--|---|---|
| SCHEDULE A, PART II, LINE 10, EXPL | ANATION FOR | OTHER INCOME: |
| AISC. REVENUE | | |
| BAD DEBT RECOVERY | | |
| SPECIAL EVENT INCOME | | |
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| 32028 09-17-14 | 21 | Schedule A (Form 990 or 990-EZ) |

Schedule A (Form 990 or 990-EZ) 2014 AMERICAN JEWISH WORLD SERVICE, INC.

09511109 759915 6820018

22-2584370 Page 8

| (Form 990 | ILE C | P | olitical Campaig | in and Lobbyii | ng Activities | | OMB No. 1545-0047 |
|--------------------------------------|---|---|--|--|---|---|--|
| • | or 990-EZ) | | anizations Exempt From Inc | - | - | | 2014 |
| | | | e if the organization is desci | | | | |
| Department of th Internal Revenue | | | about Schedule C (Form 990 or 9 | | | | Open to Public Inspection |
| - | | | o Form 990, Part IV, line 3, or | | ne 46 (Political Camp | aign Activ | ities), then |
| | | | mplete Parts I-A and B. Do not | • | | | |
| | .,. | | 01(c)(3)) organizations: Comp | lete Parts I-A and C below | v. Do not complete Pa | t I-B. | |
| | • | ations: Complete | • | | | 、 | |
| - | | | Form 990, Part IV, line 4, or | | | | |
| | | | have filed Form 5768 (election have NOT filed Form 5768 (election | | | - | |
| | | | Form 990, Part IV, line 5 (Pr | | | | - |
| - | | uctions), then | | | | 550 LZ, I | |
| Section | 501(c)(4), (5) | , or (6) organiza | tions: Complete Part III. | | | | |
| Name of org | | | | | | Employer | identification number |
| | | | N JEWISH WORLD | | | | 2-2584370 |
| Part I-A | Comple | ete if the org | ganization is exempt u | nder section 501(c) | or is a section 5 | 27 orga | nization. |
| | | | | | | | |
| | • | • | zation's direct and indirect po | | | | |
| | | | | | | ▶\$ | |
| 3 Volunte | er hours | | | | | | |
| Part I-B | Comple | to if the or | ganization is exempt u | ndor soction 501(a) | (2) | | |
| | | | incurred by the organization | | | ▶\$ | |
| | | | incurred by organization man | | | · · · | |
| | | | on 4955 tax, did it file Form 47 | | | | Yes No |
| | | | | | | | |
| | " describe ir | | | | | | |
| Part I-C | Comple | ete if the org | ganization is exempt u | nder section 501(c) | , except section | 501(c)(3 | |
| 1 Enter th | ne amount d | rectly expended | d by the filing organization for | section 527 exempt func | tion activities | ►\$ | |
| 2 Enter th | ne amount o | the filing organ | nization's funds contributed to | o other organizations for s | ection 527 | | |
| | function ac | | | | | ▶ \$ | |
| | | on expenditures | | | | · • — | |
| | | | | re and on Form 1120-POL | | | |
| 4 Did the | | | | | | ► \$ | |
| | 0 0 | zation file Form | 1120-POL for this year? | | | ►\$ | Yes No |
| 5 Enter th | ne names, a | zation file Form Idresses and er | 1120-POL for this year? mployer identification number | (EIN) of all section 527 pc | olitical organizations to | ► \$ | e filing organization |
| 5 Enter th made p | ne names, ao ayments. Fo | zation file Form Idresses and er r each organiza | 1120-POL for this year? mployer identification number ation listed, enter the amount | (EIN) of all section 527 po paid from the filing organia | olitical organizations to zation's funds. Also er | ► \$ which the | e filing organization nount of political |
| 5 Enter th made p contribu | ne names, ac ayments. Fo utions receiv | zation file Form Idresses and er r each organiza ed that were pr | 1120-POL for this year? mployer identification number ation listed, enter the amount promptly and directly delivered | (EIN) of all section 527 po paid from the filing organi to a separate political org | olitical organizations to zation's funds. Also er ganization, such as a s | ► \$ which the | e filing organization nount of political |
| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. | ▶ \$ o which the oter the am eparate se | e filing organization nount of political ngregated fund or a |
| 5 Enter th made p contribu | ne names, ac ayments. Fo utions receiv | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount promptly and directly delivered | (EIN) of all section 527 po paid from the filing organi to a separate political org | olitical organizations to zation's funds. Also er ganization, such as a s | ▶ \$ o which the nter the am eparate se | e filing organization nount of political gregated fund or a Amount of political tributions received and |
| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. (d) Amount paid f | ▶ \$ which the oter the am- eparate se rom ((n's con er -0 F | e filing organization nount of political gregated fund or a e) Amount of political tributions received and promptly and directly |
| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. (d) Amount paid f filing organization | ▶ \$ b which the other the am- eparate second room (0 n's con pr -0 pr d | e filing organization nount of political gregated fund or a e) Amount of political tributions received and promptly and directly elivered to a separate |
| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. (d) Amount paid f filing organization | ▶ \$ b which the other the am- eparate second room (0 n's con pr -0 pr d | e filing organization nount of political gregated fund or a e) Amount of political tributions received and promptly and directly |
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| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. (d) Amount paid f filing organization | ▶ \$ b which the other the am- eparate second room (0 n's con pr -0 pr d | e filing organization nount of political gregated fund or a e) Amount of political tributions received and promptly and directly elivered to a separate political organization. |
| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. (d) Amount paid f filing organization | ▶ \$ b which the other the am- eparate second room (0 n's con pr -0 pr d | e filing organization nount of political gregated fund or a e) Amount of political tributions received and promptly and directly elivered to a separate political organization. |
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| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. (d) Amount paid f filing organization | ▶ \$ b which the other the am- eparate second room (0 n's con pr -0 pr d | e filing organization nount of political gregated fund or a e) Amount of political tributions received and promptly and directly elivered to a separate political organization. |
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| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. (d) Amount paid f filing organization | ▶ \$ b which the other the am- eparate second room (0 n's con pr -0 pr d | e filing organization nount of political gregated fund or a e) Amount of political tributions received and promptly and directly elivered to a separate political organization. |
| 5 Enter th made p contribu | ne names, ac payments. Fo utions receiv l action com | zation file Form Idresses and er rr each organiza ed that were pr mittee (PAC). If | 1120-POL for this year? mployer identification number ation listed, enter the amount romptly and directly delivered additional space is needed, p | (EIN) of all section 527 po paid from the filing organi to a separate political org provide information in Part | olitical organizations to ization's funds. Also er ganization, such as a s t IV. (d) Amount paid f filing organization | ▶ \$ b which the other the am- eparate second room (0 n's con pr -0 pr d | e filing organization nount of political gregated fund or a e) Amount of political tributions received and promptly and directly elivered to a separate political organization. |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA 432041 10-21-14

Schedule C (Form 990 or 990-EZ) 2014

| Sche | edule C (Form 990 or 990-EZ) 2014 AMERI | CAN JEWISH WORLD SERVICE, IN | IC. 22-2 | 584370 Page 2 |
|------|---|--|---|------------------------------------|
| Pa | | on is exempt under section 501(c)(3) and fi | led Form 5768 (e | lection under |
| | section 501(h)). | | | |
| A C | heck 🕨 🛄 if the filing organization belong | gs to an affiliated group (and list in Part IV each affiliated | d group member's nam | e, address, EIN, |
| | expenses, and share of exces | s lobbying expenditures). | | |
| BC | heck 🕨 🛄 if the filing organization check | ed box A and "limited control" provisions apply. | | |
| | | oying Expenditures eans amounts paid or incurred.) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a | Total lobbying expenditures to influence pub | lic opinion (grass roots lobbying) | 28,309. | |
| b | Total lobbying expenditures to influence a leg | gislative body (direct lobbying) | 159,663. | |
| с | Total lobbying expenditures (add lines 1a and | d 1b) | 187,972. | |
| d | Other exempt purpose expenditures | | 61,216,996. | |
| е | Total exempt purpose expenditures (add line | s 1c and 1d) | 61,404,968. | |
| f | Lobbying nontaxable amount. Enter the amo | unt from the following table in both columns. | 1,000,000. | |
| | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | |
| | Not over \$500,000 | 20% of the amount on line 1e. | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | |
| | Over \$17,000,000 | \$1,000,000. | | |
| | | | | |
| g | Grassroots nontaxable amount (enter 25% o | f line 1f) | 250,000. | |
| h | Subtract line 1g from line 1a. If zero or less, e | enter -0- | 0. | |
| i | Subtract line 1f from line 1c. If zero or less, e | nter -0- | 0. | |
| j | If there is an amount other than zero on eithe | er line 1h or line 1i, did the organization file Form 4720 | F | |
| | | | L | Yes No |
| | (Some organizations that made | 4-Year Averaging Period Under section 501(h) a section 501(h) election do not have to complete all the separate instructions for lines 2a through 2f.) | of the five columns b | elow. |

Lobbying Expenditures During 4-Year Averaging Period

| | Ecosying Experi | iaitales During +- i ea | Averaging Ferred | | |
|--|-----------------|-------------------------|------------------|-----------------|------------------|
| Calendar year (or fiscal year beginning in) | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) Total |
| 2a Lobbying nontaxable amount | 1,000,000. | 1,000,000. | 633,887. | 1,000,000. | 3,633,887. |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 5,450,831. |
| c Total lobbying expenditures | 373,100. | 106,314. | 17,937. | 187,972. | 685,323. |
| d Grassroots nontaxable amount | 250,000. | 250,000. | 158,472. | 250,000. | 908,472. |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,362,708. |
| f Grassroots lobbying expenditures | 32,662. | 31,301. | 6,851. | 28,309. | 99,123. |

Schedule C (Form 990 or 990-EZ) 2014

432042 10-21-14

Schedule C (Form 990 or 990-EZ) 2014 AMERICAN JEWISH WORLD SERVICE, INC. 22-2584370 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| For e | ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description | (a | a) | (t |) |
|---------------|---|------------------|-------------|------------|------------|
| | e lobbying activity. | Yes | No | Amo | |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | | |
| a h | Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | |
| | Media advertisements? | | | | |
| | Mailings to members, legislators, or the public? | | | | |
| | Publications, or published or broadcast statements? | | | | |
| | Grants to other organizations for lobbying purposes? | | | | |
| | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | |
| | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | |
| | Other activities? | | | | |
| | Total. Add lines 1c through 1i | | | | |
| | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | |
| | If "Yes," enter the amount of any tax incurred under section 4912 | | | | |
| | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | |
| | t III-A Complete if the organization is exempt under section 501(c)(4), section | on 501(c) | (5). or se | ection | |
| | 501(c)(6). | | (-), | | |
| | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | | |
| 3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? | | | | |
| - | t III-B Complete if the organization is exempt under section 501(c)(4), section | | | ection | |
| | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered | • • | | | 1e 3. is |
| | answered "Yes." | , | () | , | , |
| 1 | Dues, assessments and similar amounts from members | | 1 | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic | | | | |
| 2 | expenses for which the section 527(f) tax was paid). | cai | | | |
| а | Current year | | 2a | | |
| | Carryover from last year | | | | |
| | | | | | |
| ູ້ | Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc | | 5 | | |
| - | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p | | | | |
| | | | | | |
| 5 | Expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) | | 4 | | |
| | t IV Supplemental Information | | 5 | | |
| | de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group | lict): Dort II | I A linco 1 | and 2 (aca | |
| | actions); and Part II-B, line 1. Also, complete this part for any additional information. |) 1151), Fait 11 | | anu 2 (566 | |
| | RM 990, SCHEDULE C, PART II-A | | | | |
| - 01 | | | | | |
| τ.ΟΙ | BEYING EXPENDITURES DURING 4-YEAR AVERAGING PERIOD: | тне С | RGANT | 7.2770 | ı's |
| <u> </u> | DEFINE EMERIPHICAED DONING & TEMM MULLIOUNG TEMIOD. | 11111 (| /1(0/1111 | 2111 1 01 | |
| DB. | IOR TAX FILING WAS FOR THE SHORT PERIOD, FROM $1/1/2$ | 014 - | 4/30/ | 14 r | THE |
| <u></u> | TOK TAK TIDING WAD TOK THE DHORT TERIOD, TROM 1/1/2 | 014 | Ŧ/ 30/ | <u> </u> | |
| τ.ΟΙ | BYING EXPENDITURES AMOUNTS SHOWN IN THE 2014 COLUM | | гнт 4- | VEAR | |
| | SBIING EXPENDITORES AMOUNTS SHOWN IN THE 2014 COLOM | | 11115 4 | TEAN | |
| <u>م</u> ۲71 | ERAGING TABLE ARE FOR THE CURRENT FISCAL YEAR. THE | 2013 | COLIM | א דפי | 7OP |
| <u> A A I</u> | NAGING INDE ANE FOR THE CORRENT FISCAL IEAK. THE | | COTOR | ти то т | ON |
| ጥሀገ | E SHORT PERIOD. THE COLUMNS FOR 2011 AND 2012 REPR | ESENT | י ידעי | OBBYT | JC |
| 111 | SHORT LERIOD. THE COLORING FOR 2011 AND 2012 REPR | | | | |
| 43204 | | Schedu | ie C (Form | 990 or 990 | J-EZ) 2014 |
| 10-21- | | | | | |

| Schedule C | (Form 990 or 990-EZ) 2014 | AMERICAN | JEWISH | WORLD | SERVICE, | INC. | 22-2584370 _F | Page 4 |
|------------|---------------------------|------------------|--------|-------|----------|------|-------------------------|--------|
| Part IV | Supplemental Inforr | nation (continue | ed) | | | | | |

EXPENDITURES AMOUNTS FOR THE PRIOR TWO CALENDAR YEARS' TAX FILINGS.

Schedule C (Form 990 or 990-EZ) 2014

432044 10-21-14

| D |
|---|
| C |

(Form 990)

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



Department of the Treasury Internal Revenue Service Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number 22 - 2584370

| | AMERICAN JEWISH WORLD | | 22-2584370 |
|-----------------|--|--|--|
| Pa | rt I Organizations Maintaining Donor Advised Fu | unds or Other Similar Funds or A | Accounts.Complete if the |
| | organization answered "Yes" to Form 990, Part IV, line 6. | | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | 1 | |
| 2 | Aggregate value of contributions to (during year) | 25,500,000. | |
| 3 | Aggregate value of grants from (during year) | 25,034,748. | |
| 4 | Aggregate value at end of year | 6,790,395. | |
| 5 | Did the organization inform all donors and donor advisors in writing | g that the assets held in donor advised fur | nds |
| | are the organization's property, subject to the organization's exclu | sive legal control? | X Yes No |
| 6 | Did the organization inform all grantees, donors, and donor adviso | rs in writing that grant funds can be used | only |
| | for charitable purposes and not for the benefit of the donor or don | or advisor, or for any other purpose confe | |
| | impermissible private benefit? | - | X Yes No |
| Pa | rt II Conservation Easements. Complete if the organiza | | |
| 1 | Purpose(s) of conservation easements held by the organization (cl | heck all that apply). | |
| | Preservation of land for public use (e.g., recreation or educa | tion) Preservation of a historically | y important land area |
| | Protection of natural habitat | Preservation of a certified h | istoric structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified co | onservation contribution in the form of a c | onservation easement on the last |
| | day of the tax year. | | |
| | | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a |
| b | | | 2b |
| с | Number of conservation easements on a certified historic structure | e included in (a) | 2c |
| d | Number of conservation easements included in (c) acquired after 8 | | |
| | listed in the National Register | | 2d |
| 3 | Number of conservation easements modified, transferred, release | | nization during the tax |
| | year 🕨 | | |
| 4 | Number of states where property subject to conservation easeme | nt is located ► | |
| 5 | Does the organization have a written policy regarding the periodic | monitoring, inspection, handling of | |
| | violations, and enforcement of the conservation easements it hold | s? | Yes 🗌 No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, and e | enforcing conservation easements during t | the year 🕨 |
| 7 | Amount of expenses incurred in monitoring, inspecting, and enfor | cing conservation easements during the ye | ear 🕨 \$ |
| 8 | Does each conservation easement reported on line 2(d) above sat | isfy the requirements of section 170(h)(4)(I | B)(i) |
| | and section 170(h)(4)(B)(ii)? | | |
| 9 | In Part XIII, describe how the organization reports conservation ea | | |
| | include, if applicable, the text of the footnote to the organization's | financial statements that describes the or | ganization's accounting for |
| _ | conservation easements. | | |
| Pa | rt III Organizations Maintaining Collections of Art | , Historical Treasures, or Other | Similar Assets. |
| | Complete if the organization answered "Yes" to Form 990, | Part IV, line 8. | |
| 1a | If the organization elected, as permitted under SFAS 116 (ASC 95 | 8), not to report in its revenue statement a | nd balance sheet works of art, |
| | historical treasures, or other similar assets held for public exhibition | n, education, or research in furtherance of | f public service, provide, in Part XIII, |
| | the text of the footnote to its financial statements that describes t | hese items. | |
| b | If the organization elected, as permitted under SFAS 116 (ASC 95 | 8), to report in its revenue statement and t | palance sheet works of art, historical |
| | treasures, or other similar assets held for public exhibition, educat | ion, or research in furtherance of public se | ervice, provide the following amounts |
| | relating to these items: | | |
| | (i) Revenue included in Form 990, Part VIII, line 1 | | |
| | (ii) Assets included in Form 990, Part X | | . • \$ |
| 2 | If the organization received or held works of art, historical treasure | s, or other similar assets for financial gain, | provide |
| | the following amounts required to be reported under SFAS 116 (A | SC 958) relating to these items: | |
| а | Revenue included in Form 990, Part VIII, line 1 | | . • \$ |
| | Assets included in Form 990, Part X | | |
| | | | |
| | For Paperwork Reduction Act Notice, see the Instructions for | Form 990. | Schedule D (Form 990) 2014 |
| 43205 10-01- | 1 14 | | |

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| Sche | | N JEWISH W | | | - | | | 22-25 | | | ige 2 |
|---------|--|-------------------------------|-----------|-------------------------|----------------|------------|------------|--------------|-------------------|----------|--------------|
| Par | t III Organizations Maintaining C | collections of Ar | t, His | torical Tr | easures, | or Oth | er Simi | ilar Asse | ts (contin | ued) | |
| 3 | Using the organization's acquisition, accessi (check all that apply): | on, and other record | s, chec | k any of the | following that | at are a s | significan | t use of its | collectior | item: | S |
| а | Public exhibition | d | | Loan or excl | hange progr | ams | | | | | |
| b | Scholarly research | e | | | nange progr | | | | | | |
| c | Preservation for future generations | Ũ | | | | | | | | | |
| 4 | Provide a description of the organization's co | alloctions and ovalai | a how th | hov furthor t | ho organizat | ion's ove | mot our | noco in Dar | | | |
| 5 | During the year, did the organization solicit of | | | | | | | | | | |
| 5 | to be sold to raise funds rather than to be ma | | | | | | | | Yes | | No |
| Par | t IV Escrow and Custodial Arran | | | | | | | | | | |
| | reported an amount on Form 990, Pa | | | organizatio | ii answered | 163 10 | 1 0111 33 | , i aitiv, i | 116 3, 01 | | |
| 12 | Is the organization an agent, trustee, custod | | liany for | contribution | s or other as | seate no | tincluder | 4 | | | |
| Id | | | | | | | | | Yes | | No |
| h | on Form 990, Part X? If "Yes," explain the arrangement in Part XIII | | | | | | | ····· ــــ | 162 | | |
| D | | and complete the lo | lowing | LaDIE. | | | | | Amount | | |
| | Designing belonce | | | | | | 10 | | Amount | | |
| | Beginning balance | | | | | | | | | | |
| | Additions during the year | | | | | | | | | | |
| | Distributions during the year | | | | | | | | | | |
| f 2e | Ending balance Did the organization include an amount on F | orm 000 Dart V lina | 01 for | | uctodial aco | tlich | 1f | | Yes | | No |
| | | | | | | | | ····· └── | 162 | |] |
| Par | If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i | | | | | | | | | |] |
| i ui | | (a) Current year | | | (c) Two yea | | | years back | (e) Four | voare | hack |
| 10 | Paginning of year balance | 2,177,713. | | Prior year ,133,899. | () , | 0,137. | | 103,010. | | 135, | |
| | Beginning of year balance | 2,177,713. | 2 | ,133,055. | 2,05 | 0,137. | <u> </u> | 105,010. | <u> </u> | 155, | . , , , |
| | Contributions | 150,411. | | 43,814. | 1.8 | 3,762. | | 137,438. | | 67 | 013. |
| | Net investment earnings, gains, and losses | 130,411. | | 45,014. | 10 | 5,702. | | 137,430. | | 07, | 013. |
| | Grants or scholarships | | | | | | | | | | |
| е | Other expenditures for facilities | 100 000 | | | 1.0 | 0 000 | | 100 211 | | 100 | 000 |
| | and programs | 100,000. | | | 10 | 0,000. | | 190,311. | | 100, | 000. |
| | Administrative expenses | 2 2 2 8 1 2 4 | 2 | 177 713 | 2 1 2 | 2 000 | 2 | 050 127 | 2 | 102 | 010 |
| - | End of year balance | 2,228,124. | | ,177,713. | | 3,899. | 2, , | 050,137. | 2, , | 103, | 010. |
| 2 | Provide the estimated percentage of the cur | rent year end balanc 99.43 | • | g, column (a | a)) held as: | | | | | | |
| | Board designated or quasi-endowment | | _% | | | | | | | | |
| | Permanent endowment .57 | % | | | | | | | | | |
| С | Temporarily restricted endowment | % | | | | | | | | | |
| | The percentages in lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should | | | | | | | | | | |
| 3a | Are there endowment funds not in the posse | ession of the organiza | ation the | at are held a | nd administe | ered for | the orgar | nization | г | | |
| | by: | | | | | | | | | Yes | No |
| | (i) unrelated organizations | | | | | | | | 3a(i) | | X X |
| | (ii) related organizations | | | | | | | | 3a(ii) | | Δ |
| | If "Yes" to 3a(ii), are the related organizations | | | | | | | | 3b | | |
| | Describe in Part XIII the intended uses of the | | wment | funds. | | | | | | | |
| Par | t VI Land, Buildings, and Equipm | | | | | | | | | | |
| | Complete if the organization answere | | | í | | · · · | | 1 | | | |
| | Description of property | (a) Cost or of | | (b) Cost | | | | | (d) Book | value | 9 |
| | | basis (investn | nent) | basis | (otner) | de | preciatio | n | | | |
| | Land | | | | | | | | | | |
| | Buildings | | | | 1 070 | - | 202 (| | 4.07 | <u> </u> | <u> </u> |
| | Leasehold improvements | | | | 1,279. | | 382,9 | | | 3,33 | |
| d | Equipment | | | | 8,809. | | 790,4 | | | 3,30 | |
| - | Other | | | | 8,254. | 1, | 508,1 | L/6. | |),0 | |
| Total | . Add lines 1a through 1e. (Column (d) must e | qual Form 990, Part | X, colur | mn (B), line 1 | 0c.) | | | 🕨 📃 | 1,010 | - | |
| | | | | | | | | Schedule | D (Form | 990) | 2014 |

432052 10-01-14

| Schedule D | (Form 990) 2014 | AMERICAN JE | WISH | WORLD | SEF | RVICE, | INC. | | 22-2584370 | Page 3 |
|--------------|---------------------------|----------------------------------|----------|-----------------------------|--------|---------------------|------------|------------------|-------------------------|---------------|
| Part VII | | Other Securities. | | | | | | | | |
| | Complete if the org | anization answered "Yes' | to Form | 990, Part IV, | line 1 | 1b. See For | m 990, Pa | art X, line 12. | | |
| (a) Descrip | tion of security or categ | OTY (including name of security) | (b) | Book value | | (c) Meth | nod of val | uation: Cost o | or end-of-year market v | alue |
| (1) Financia | al derivatives | | | | | | | | | |
| (2) Closely- | held equity interests | | | | | | | | | |
| (3) Other | | | | | | | | | | |
| (A) | | | | | | | | | | |
| (B) | | | | | | | | | | |
| (C) | | | | | | | | | | |
| (D) | | | | | | | | | | |
| (E) | | | | | | | | | | |
| (F) | | | | | | | | | | |
| (G) | | | | | | | | | | |
| (H) | | | | | - | | | | | |
| | |), Part X, col. (B) line 12.) | | | | | | | | |
| Part VIII | 1 | Program Related. | | | | | | | | |
| | (a) Description of | anization answered "Yes' | | 990, Part IV, Book value | line 1 | 1c. See Forr | n 990, Pa | art X, line 13. | or end-of-year market v | |
| (4) | (a) Description of | Investment | (0) | DOOK VAIUE | | (C) Meti | IOU OI VAI | uation. Cost (| or end-or-year market v | alue |
| (1) | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| (5) | | | | | | | | | | |
| (6) (7) | | | | | | | | | | |
| (8) | | | | | | | | | | |
| (9) | | | | | | | | | | |
| | o) must equal Form 990 |), Part X, col. (B) line 13.) 🕨 | | | | | | | | |
| Part IX | Other Assets. | , ·, · | | | | | | | | |
| | Complete if the org | anization answered "Yes' | to Form | 990, Part IV, | line 1 | 1d. See Fori | m 990, Pa | art X, line 15. | | |
| | - | (a) | Descript | ion | | | | | (b) Book va | lue |
| (1) | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| (5) | | | | | | | | | | |
| (6) | | | | | | | | | | |
| (7) | | | | | | | | | | |
| (8) | | | | | | | | | | |
| (9) | | | | | | | | | | |
| | | orm 990, Part X, col. (B) lir | ie 15.) | | | | | | 🕨 | |
| Part X | Other Liabilitie | | _ | | | | | | _ | |
| | | anization answered "Yes' | to Form | 990, Part IV, | | | | 990, Part X, lir | ne 25. | |
| 1. | | escription of liability | | | (1 | b) Book valu | | | | |
| | eral income taxes | m | | | | 10/ | 257 | | | |
| | | IFT ANNUITY C | DT | | | 184,2 | | | | |
| | ARTIADLE G | IFI ANNUIII C | лоц. | | | 44, | 505. | | | |
| (4) | | | | | | | | | | |
| (5) | | | | | | | | | | |
| (6) | | | | | | | | | | |
| (7) (8) | | | | | | | | | | |
| (9) | | | | | | | | | | |
| | mn (h) must equal Er | orm 990, Part X, col. (B) lin | e 25) | | | 408,8 | 826 | | | |
| | | sitions. In Part XIII, provid | | | ote to | | | ancial statem | ents that reports the | |
| | | certain tax positions unde | | | | - | | | | XIII X |
| | | | | | | | | | Schedule D (Form 9 | |

22-2584370 Page 3

| Sche | edule D (Form 990) 2014 AMERICAN JEWISH WORLD SEF | | | 22- | 2584370 Page 4 |
|---|--|--|---|--------------------------------------|--|
| Pa | rt XI Reconciliation of Revenue per Audited Financial State | ments Wit | th Revenue per R | etur | n. |
| | Complete if the organization answered "Yes" to Form 990, Part IV, line 12 | 2a. | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 58,281,250. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | |
| а | Net unrealized gains (losses) on investments | 2a | 62,699. | | |
| b | Donated services and use of facilities | 2b | 119,343. | | |
| с | Recoveries of prior year grants | 2c | | | |
| d | | | -37,165. | | |
| е | | | | 2e | 144,877. |
| 3 | Subtract line 2e from line 1 | | | 3 | 58,136,373. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 22,443. | | |
| b | Other (Describe in Part XIII.) | 4b | | | |
| с | Add lines 4a and 4b | | | 4c | 22,443. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | | 5 | 58,158,816. |
| <u> </u> | | | | | |
| Pa | rt XII Reconciliation of Expenses per Audited Financial State | ements W | | | |
| Pa | Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 | ements W 2a. | ith Expenses per | | ırn. |
| Pa | rt XII Reconciliation of Expenses per Audited Financial State | ements W 2a. | ith Expenses per | | |
| | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: | 2a. | ith Expenses per | Retu | ırn. |
| 1 | Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements | 2a. | ith Expenses per | Retu | ırn. |
| 1 2 | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: | 2a. 2 a | ith Expenses per | Retu | ırn. |
| 1 2 a | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities | 2a. 2a 2b 2c | ith Expenses per | Retu | ırn. |
| 1 2 b c d | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) | 2a. 2a 2a 2b 2c 2d | ith Expenses per | Retu | irn. 61,584,133. |
| 1 2 b c d | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d | 2a. 2a 2a 2a 2b 2c 2d | ith Expenses per | 1 2e | irn. 61,584,133. 119,343. |
| 1 2 b c d | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) | 2a. 2a 2a 2a 2b 2c 2d | ith Expenses per | Retu | irn. 61,584,133. |
| 1 2 b c d e | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: | 2a. 2a 2a 2b 2c 2d | ith Expenses per | 1 2e | irn. 61,584,133. 119,343. |
| 1 2 b c d 3 | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 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. 2a. 2b 2b 2c 2d | ith Expenses per | 1 2e | irn. 61,584,133. 119,343. |
| 1 2 a b c d e 3 4 a b | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 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 Other (Describe in Part XIII.) | 2a. 2a. 2b 2b 2c 2d | ith Expenses per | 1 2e | ırn. 61,584,133. 119,343. 61,464,790. |
| 1 2 a b c d e 3 4 a b | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 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 Other (Describe in Part XIII.) | 2a. 2a. 2b 2c 2d 2d 4a 4b | ith Expenses per 119,343. 22,443. | 2e 3 4c 4c | rn. 61,584,133. 119,343. 61,464,790. 22,443. |
| 1 2 d e 3 4 b c 5 | rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 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 Other (Describe in Part XIII.) | 2a. 2a. 2b 2c 2d 2d 4a 4b | ith Expenses per 119,343. 22,443. | 1 2e 3 | ırn. 61,584,133. 119,343. 61,464,790. |

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

PART V, LINE 4:

| AJWS'S ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS |
|---|
| DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS. AJWS HAS |
| ESTABLISHED A FUND DESIGNATED FOR LONG-TERM INVESTMENTS. AJWS HAS ADOPTED |
| INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO |
| PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS |
| ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT |
| ASSETS. |
| |
| PART X, LINE 2: |

AJWS IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE

INTERNAL REVENUE CODE (THE "CODE") AND FROM STATE INCOME TAXES. IN 432054 10-01-14 Schedule D (Form 990) 2014 33 2014.04030 AMERICAN JEWISH WORLD SERVI 68200182

22-2584370 Page 5 AMERICAN JEWISH WORLD SERVICE, INC. Schedule D (Form 990) 2014 Part XIII | Supplemental Information (continued) ADDITION, AJWS IS NOT CLASSIFIED AS A PRIVATE FOUNDATION. AJWS HAS ADOPTED THE STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, AJWS MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT EVALUATED AJWS'S TAX POSITIONS AND CONCLUDED THAT AJWS HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. GENERALLY, AJWS IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2011, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ACTUARIAL LOSS ON CHARITABLE GIFT ANNUITY OBLIGATION

-37,165.

Schedule D (Form 990) 2014

432055 10-01-14

| (Form 990) | Complete if | the organizatio | n answered "Yes" on Form 990, Part | IV, line 14b, 1 | 15, or 16. | ZU 14 |
|-----------------------------|-------------------------|----------------------------|--|-----------------|----------------------------------|-------------------------|
| Department of the Treasury | | | Attach to Form 990. | | | Open to Public |
| Internal Revenue Service | Information about | out Schedule F | (Form 990) and its instructions is at | vww.irs.gov/f | orm990. | Inspection |
| Name of the organization | ו | | | | Employer ic | lentification number |
| AMERICAN JEW | TSH WORLD S | ERVICE. | INC. | | 22-258 | 4370 |
| | | | tside the United States. Comple | te if the organ | | |
| | Part IV, line 14b. | | | to in the organ | | |
| | | n maintain recor | ds to substantiate the amount of its gra | nts and other | assistance, | |
| | | | the selection criteria used to award the | | | X Yes No |
| | | | | | | |
| 2 For grantmakers. | Describe in Part V the | e organization's | procedures for monitoring the use of its | grants and o | ther assistanc | e outside the |
| United States. | | | | | | |
| 3 Activities per Regi | on. (The following Parl | I, line 3 table ca | an be duplicated if additional space is n | eeded.) | | I |
| (a) Region | (b) Number of | (c) Number of employees, | (d) Activities conducted in region | | vity listed in (d | |
| | offices | agents, and | (by type) (e.g., fundraising, program | • | gram service, e specific type | expenditures for and |
| | in the region | independent contractors | services, investments, grants to recipients located in the region) | | ce(s) in region | investments |
| | | in region | | | | in region |
| | | | | | | |
| CENTRAL AMERICA AN | | | GRANTS TO RECIPIENTS | | | |
| THE CARIBBEAN | 0 | 0 | LOCATED IN REGION | | | 2,630,264. |
| THE CARIDDEAN | • | 0 | LICCATED IN REGION | | | 2,030,204. |
| | | | | | | |
| EAST ASIA AND THE | | | GRANTS TO RECIPIENTS | | | |
| PACIFIC | 0 | 0 | LOCATED IN REGION | | | 2,410,749. |
| | | | | | | |
| | | | | | | |
| | | | GRANTS TO RECIPIENTS | | | |
| EUROPE | 0 | 0 | LOCATED IN REGION | | | 10,587,336. |
| | | | | | | |
| | | | | | | |
| RUSSIA AND THE NEW | | | GRANTS TO RECIPIENTS | | | |
| INDEPENDENT STATES | 0 | 0 | LOCATED IN REGION | | | 3,000. |
| | | | | | | |
| | | | | | | |
| COURT ANEDTON | 0 | 0 | GRANTS TO RECIPIENTS | | | 1 605 000 |
| SOUTH AMERICA | 0 | 0 | LOCATED IN REGION | | | 1,695,000. |
| | | | | | | |
| | | | GRANTS TO RECIPIENTS | | | |
| SOUTH ASIA | 0 | 0 | LOCATED IN REGION | | | 3,035,732. |
| | | | | | | |
| | | | | | | |
| | | | GRANTS TO RECIPIENTS | | | |
| SUB-SAHARAN AFRICA | 0 | 0 | LOCATED IN REGION | | | 14,510,308. |
| | | | | | | |
| | | | | | | |
| | | | GRANTS TO RECIPIENTS | | | |
| NORTH AMERICA | 0 | 0 | LOCATED IN REGION | | | 2,843,300. |
| 3 a Sub-total | 0 | 0 | | | | 37,715,689. |
| b Total from continu | | | | | | |
| sheets to Part I | | 50 | | | | 1,186,883. |
| c Totals (add lines 3) | a l | 1 | | | | |

Statement of Activities Outside the United States

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

1

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Schedule F (Form 990) 2014

38,902,572.

OMB No. 1545-0047

0041

432071 09-24-14

and 3b)

SCHEDULE F

| Schedule F (Form 990) | AMERICAN | $\frac{22-25}{3}$ | 22-2584370 Page 1 | | |
|--------------------------------------|---|--|---|---|---|
| (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 |
| | | | | | |
| CENTRAL AMERICA AND THE CARIBBEAN | 1 | 11 | PROGRAM SERVICES | SUPPORT GRANTMAKING | 248,358 |
| EAST ASIA AND THE | | | | | |
| PACIFIC | 0 | 4 | PROGRAM SERVICES | SUPPORT GRANTMAKING | 142,661. |
| EUROPE | 0 | 3 | PROGRAM SERVICES | SUPPORT GRANTMAKING | 39,199. |
| SOUTH ASIA | 0 | 20 | PROGRAM SERVICES | SUPPORT GRANTMAKING | 463,120, |
| | | | | | |
| SUB-SAHARAN AFRICA | 0 | 8 | PROGRAM SERVICES | SUPPORT GRANTMAKING | 265,825. |
| NORTH AMERICA | 0 | 4 | PROGRAM SERVICES | SUPPORT GRANTMAKING | 27,720 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Totals | 1 | 50 | | | 1,186,883. |

432181 05-01-14

22-2584370

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

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|-------------------------------|---|--------------------------------------|---|---------------------------------|---------------------------------|--|--|---|
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | , | | | | |
| | | | | | | | | |
| | | CENTRAL AMERICA AND THE CARIBBEAN | PROGRAM SUPPORT | 13 500. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | CENTRAL AMERICA AND THE CARIBBEAN | PROGRAM SUPPORT | 20 000 | WIRE TRANSFERS | 0. | | |
| | | | | 20,000 | | | | |
| | | | | | | | | |
| | | CENTRAL AMERICA AND THE CARIBBEAN | PROGRAM SUPPOPT | 400 | WIRE TRANSFERS | 0. | | |
| | | THE CARIBBEAN | INGINE DUFUEI | 400. | MINE INAMOPERS | · · · | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | 20.000 | | | | |
| 2 Enter total number of | | AND THE CARIBBEAN | PROGRAM SUPPORT recognized as charities by the | | WIRE TRANSFERS | 0. | | |
| | | | n 501(c)(3) equivalency letter | | - | | | 436 |
| | | | | | | ► | | 111 |

Schedule F (Form 990) 2014

Part II 1

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

Page **2** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (g) Amount of (h) Description (i) Method of

| 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) |
|-------------------------------|---|-------------------|--------------------------------|---------------------------------|------------------------------------|--|---|---|
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 6,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | _ | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 45,700. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 33,261. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 9,000. | WIRE TRANSFERS | ٥. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 45,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | Ο. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

Page 2

| Part II Continuation of | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 990), Part II, line 1 |) | |
|-------------------------------|---|------------------------|--------------------------------|---------------------------------|------------------------------------|--|--|---|
| 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) |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 35,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 11,144. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 63,500. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 45,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 80,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 55,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |

(a) Name of organization

(b) IRS code section

Part II

1

AMERICAN JEWISH WORLD SERVICE, INC.

(c) Region

(d) Purpose of

22-2584370

(f) Manner of

Page 2 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (g) Amount of (i) Method of (h) Description non-cash of non-cash valuation (book, FMV, assistance appraisal, other) assistance

| (a) Name of organization | and EIN (if applicable) | (c) Region | grant | of cash grant | cash disbursement | non-cash assistance | of non-cash assistance | valuation (book, FMV, appraisal, other) |
|--------------------------|-------------------------|--------------------------------------|-----------------|---------------|-------------------|------------------------|---------------------------|--|
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 6,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 33,561. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | _ | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 24,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | 22.000 | | 0 | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 23,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA AND THE CARIBBEAN | PROGRAM SUPPORT | 25 000 | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 6,000. | WIRE TRANSFERS | Ο. | | |

(e) Amount

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Schedule F (Fo | orm 990) | AMERI | CAN DEWISH W | ORLD SERVICE, I | | 22-23 | 04370 | | Page 2 |
|---------------------------|---------------|--|--------------------------------------|--------------------------------|---------------------------------|---------------------------------|--|---|---|
| Part II Co | ontinuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form § | 990), Part II, line 1 |) | |
| 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) |
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| | | | CENTRAL AMERICA AND THE CARIBBEAN | PROGRAM SUPPORT | 5 000 | WIRE TRANSFERS | 0. | | |
| | | | | | 5,000. | | | | |
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| | | | CENTRAL AMERICA | | | | | | |
| | | | AND THE CARIBBEAN | PROGRAM SUPPORT | 60,000. | WIRE TRANSFERS | 0. | | |
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| | | | CENTRAL AMERICA | | | | | | |
| | | | AND THE CARIBBEAN | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
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| | | | CENTRAL AMERICA | | | | | | |
| | | | AND THE CARIBBEAN | PROGRAM SUPPORT | 51,000. | WIRE TRANSFERS | Ο. | | |
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| | | | CENTRAL AMERICA AND THE CARIBBEAN | | 50 000 | WIRE TRANSFERS | 0. | | |
| | | | AND THE CARIBBEAN | INGRAM BUITORI | 50,000. | WIRE IRANSPERS | 0. | | |
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| | | | CENTRAL AMERICA | | | | | | |
| | | | AND THE CARIBBEAN | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
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| | | | CENTRAL AMERICA | | | | | | |
| | | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | ٥. | | |
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| | | | CENTRAL AMERICA | | | | | | |
| | | | AND THE CARIBBEAN | PROGRAM SUPPORT | 38,000. | WIRE TRANSFERS | 0. | | |
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| | | | CENTRAL AMERICA | | 20.000 | | | | |
| | | | AND THE CARIBBEAN | FRUGRAM SUPPORT | 28,000. | WIRE TRANSFERS | 0. | | |

(a) Name of organization

(b) IRS code section

and EIN (if applicable)

Part II

1

AMERICAN JEWISH WORLD SERVICE, INC.

AND THE CARIBBEAN PROGRAM SUPPORT

(c) Region

CENTRAL AMERICA

(d) Purpose of

grant

22-2584370

Page 2 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (g) Amount of (h) Description (i) Method of (e) Amount (f) Manner of non-cash of non-cash valuation (book, FMV, of cash grant cash disbursement assistance assistance appraisal, other) 20,000.WIRE TRANSFERS Ο.

| CENTRAL AMERICA | | | |
|-----------------------------------|---------------------------------------|-------|---|
| AND THE CARIBBEAN PROGRAM SUPPORT | 6,300.WIRE TRANSFERS | 0. | |
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| CENTRAL AMERICA | | | |
| AND THE CARIBBEAN PROGRAM SUPPORT | 50,000.WIRE TRANSFERS | 0. | |
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| CENTRAL AMERICA | | | |
| AND THE CARIBBEAN PROGRAM SUPPORT | 20,000.WIRE TRANSFERS | 0. | |
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| CENTRAL AMERICA | | | |
| AND THE CARIBBEAN PROGRAM SUPPORT | 20,000.WIRE TRANSFERS | 0. | |
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| CENTRAL AMERICA | | | |
| AND THE CARIBBEAN PROGRAM SUPPORT | 45,000.WIRE TRANSFERS | 0. | |
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| CENTRAL AMERICA | | | |
| AND THE CARIBBEAN PROGRAM SUPPORT | 61,269.WIRE TRANSFERS | 0. | |
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| CENTRAL AMERICA | | | |
| AND THE CARIBBEAN PROGRAM SUPPORT | 24,000.WIRE TRANSFERS | 0. | |
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| | | | |
| CENTRAL AMERICA | | | |
| AND THE CARIBBEAN PROGRAM SUPPORT | 20,000.WIRE TRANSFERS | 0. | |
| | | I I | I |

(a) Name of organization

(b) IRS code section

and EIN (if applicable)

Part II 1

AMERICAN JEWISH WORLD SERVICE, INC.

(c) Region

CENTRAL AMERICA

22-2584370

Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (g) Amount of (h) Description (i) Method of (d) Purpose of (e) Amount (f) Manner of non-cash of non-cash valuation (book, FMV, grant of cash grant cash disbursement assistance assistance appraisal, other)

| AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | Ο. | | |
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| CENTRAL AMERICA | | | | | | |
| AND THE CARIBBEAN | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
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| CENTRAL AMERICA | | 42 000 | | 0 | | |
| AND THE CARIBBEAN | PROGRAM SUPPORT | 43,800. | WIRE TRANSFERS | 0. | | |
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| CENTRAL AMERICA | | | | | | |
| AND THE CARIBBEAN | PROGRAM SUPPORT | 10 000. | WIRE TRANSFERS | 0. | | |
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| CENTRAL AMERICA | | | | | | |
| AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
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| CENTRAL AMERICA | | | | | | |
| AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
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| | | | | | | |
| CENTRAL AMERICA | | 40.000 | | | | |
| AND THE CARIBBEAN | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | |
| CENTRAL AMERICA | | | | | | |
| AND THE CARIBBEAN | PROGRAM SUPPORT | 20 000 | WIRE TRANSFERS | 0. | | |
| | | 20,000. | | | | |
| | | | | | | |
| CENTRAL AMERICA | | | | | | |
| AND THE CARIBBEAN | PROGRAM SUPPORT | 14,000. | WIRE TRANSFERS | ٥. | | |
| | • | | • | | • | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| abile m (n dipleader) gran broken support of cash gran cash dispusement assistance assistance appraisal, other assistance appraisal, other central, America NND THE CARIBBEAN FROGRAM SUPPORT 25,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 20,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 20,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 9,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 9,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 19,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 19,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA NND THE CARIBBEAN FROGRAM SUPPORT 30,000, FIRE TRANSFERS 0. CENTRAL AMERICA | Part II Continu | ation of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States | (Schedule F (Form § | 990), Part II, line 1 |) | |
|---|-----------------|---------------------------|------------------------|--------------------------------|---------------|---------------------|-----------------------|-------------|-----------------------|
| Image: State of the cariberal program support 70,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 25,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 45,500, KIRE TRANSPERS 0. Image: State of the cariberal program support 45,500, KIRE TRANSPERS 0. Image: State of the cariberal program support 45,500, KIRE TRANSPERS 0. Image: State of the cariberal program support 20,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 20,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 20,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 20,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 9,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 9,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 19,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 19,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 30,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 30,000, KIRE TRANSPERS 0. | | | (c) Region | | | | non-cash | of non-cash | valuation (book, FMV, |
| Image: State of the cariberal program support 70,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 25,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 45,500, KIRE TRANSPERS 0. Image: State of the cariberal program support 45,500, KIRE TRANSPERS 0. Image: State of the cariberal program support 45,500, KIRE TRANSPERS 0. Image: State of the cariberal program support 20,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 20,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 20,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 20,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 9,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 9,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 19,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 19,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 30,000, KIRE TRANSPERS 0. Image: State of the cariberal program support 30,000, KIRE TRANSPERS 0. | | | | | | | | | |
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| Image: Second State Second Support 25,000.WIRE TRANSFERS 0. Image: Second Second Second Support 45,500.WIRE TRANSFERS 0. Image: Second Second Second Second Second Support 20,000.WIRE TRANSFERS 0. Image: Second Sec | | | | PROGRAM SUPPORT | 70,000. | WIRE TRANSFERS | 0. | | |
| Image: Second State Second Support 25,000.WIRE TRANSFERS 0. Image: Second Second Second Support 45,500.WIRE TRANSFERS 0. Image: Second Second Second Second Second Support 20,000.WIRE TRANSFERS 0. Image: Second Sec | | | | | | | | | |
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| AND THE CARIBBEAN PROGRAM SUPPORT 103,000. WIRE TRANSFERS 0. | | | | PROGRAM SUPPORT | 103 000 | WIRE TRANSFERS | 0 | | |

| Schedule F (Form 990) | | | ORLD SERVICE, | | 22-25 | | | Page |
|-------------------------------|--|------------------------|------------------------------|-----------------------------|------------------------------------|---|--|---|
| | of Grants and Other | Assistance to Organiza | ations or Entities Outside t | he United States. | (Schedule F (Form 9 | | 1) | |
| 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, FM appraisal, other) |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 54,079. | WIRE TRANSFERS | ٥. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | ٥. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | _ |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 70,000. | WIRE TRANSFERS | 0. | | |
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| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | _ |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 31,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 85,000. | WIRE TRANSFERS | 0. | | |
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| | | CENTRAL AMERICA | | | GRANT | | | |
| | | AND THE CARIBBEAN | PROGRAM SUPPORT | -10,000. | WRITE-OFF | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Schedule F (Form 990) | | | OKID SERVICE, I | | 22-2J | | | Page 2 |
|--------------------------------------|---|------------------------------|--------------------------------|---------------------------------|------------------------------------|--|--|---|
| Part II Continuation of | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
| 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) |
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| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
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| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | ٥. | | |
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| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 12 000 | WIRE TRANSFERS | 0. | | |
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| | | AND THE CARIBBEAN | PROGRAM SUPPORT | 46,000. | WIRE TRANSFERS | 0. | | |
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| | | EAST ASIA AND THE PACIFIC | PROGRAM SUPPORT | 38 000 | WIRE TRANSFERS | 0. | | |
| | | PACIFIC | PROGRAM SUPPORT | 38,000. | WIRE IRANSFERS | 0. | | |
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| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 1,150. | WIRE TRANSFERS | Ο. | | |
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| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | + |
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| | | EAST ASIA AND THE | | | | | | |
| | | | PROGRAM SUPPORT | 33,000. | WIRE TRANSFERS | 0. | | |
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AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| | Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | - |
|----------------------|-----------------|--|------------------------|--------------------------------|-----------------------------|---------------------------------|--|---|---|
| 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, FM appraisal, other) |
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| | | | EAST ASIA AND THE | | | GRANT | | | |
| | | | PACIFIC | PROGRAM SUPPORT | -28,000. | WRITE-OFF | 0. | | |
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| | | | EAST ASIA AND THE | | | | | | |
| | | | PACIFIC | PROGRAM SUPPORT | 22,000. | WIRE TRANSFERS | ٥. | | |
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| | | | | PROGRAM SUPPORT | 36,000. | WIRE TRANSFERS | Ο. | | |
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| | | | | PROGRAM SUPPORT | 38,300. | WIRE TRANSFERS | Ο. | | |
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| | | | PACIFIC | PROGRAM SUPPORT | 17,000. | WIRE TRANSFERS | Ο. | | |
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| | | | PACIFIC | PROGRAM SUPPORT | 23,000. | WIRE TRANSFERS | Ο. | | |
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| | | | PACIFIC | PROGRAM SUPPORT | 35,000. | WIRE TRANSFERS | ٥. | | |
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| | | | PACIFIC | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | ٥. | | |
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| | | | EAST ASIA AND THE | | | | | | |
| | | | | PROGRAM SUPPORT | 10 000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| | n of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 990), Part II, line 1 | 1) | - |
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| 1 (a) Name of organizatio | (b) IRS code section and EIN (if applicable) | | (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, FM' appraisal, other) |
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| | | PACIFIC | PROGRAM SUPPORT | 40,000. | WIRE TRANSFERS | ٥. | | |
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| | | PACIFIC | PROGRAM SUPPORT | 70,000. | WIRE TRANSFERS | Ο. | | |
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| | | PACIFIC | PROGRAM SUPPORT | 35,351. | WIRE TRANSFERS | Ο. | | |
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| | | PACIFIC | PROGRAM SUPPORT | 22,000. | WIRE TRANSFERS | 0. | | |
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| | | PACIFIC | PROGRAM SUPPORT | 3,090. | WIRE TRANSFERS | 0. | | |
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| | | PACIFIC | PROGRAM SUPPORT | 300,000. | WIRE TRANSFERS | Ο. | | |
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| | | PACIFIC | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
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| | | PACIFIC | PROGRAM SUPPORT | 26,740. | WIRE TRANSFERS | 0. | | |
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| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Co | ntinuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
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| 1 (a) Name of o | 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) |
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| | | | PACIFIC | PROGRAM SUPPORT | 32,000. | WIRE TRANSFERS | 0. | | |
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| | | | PACIFIC | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

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| Part II | Continuation o | | | ations or Entities Outside the | | (Schedule F (Form 9 | 90), Part II, line 1 | l) | |
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| 1 (a) Nam | e of organization | (b) IRS code section and EIN (if applicable) | | (d) Purpose of grant | (e) Amount | (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) |
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AMERICAN JEWISH WORLD SERVICE, INC.

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| Part II | Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | . (Schedule F (Form 9 | 90), Part II, line ⁻ | 1) | 1 490 2 |
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| 1 (a) Name | e 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) |
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| | | | PACIFIC | PROGRAM SUPPORT | 41,300. | WIRE TRANSFERS | 0. | | |
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| | | | PACIFIC | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | Ο. | | |
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| | | | EAST ASIA AND THE | | | | | | |
| | | | PACIFIC | PROGRAM SUPPORT | 10,300. | WIRE TRANSFERS | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | e United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | - i |
|-------------------------------|--|------------------------|--------------------------------|-----------------------------|------------------------------------|---|--|--|
| 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, FM) appraisal, other) |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 47,600. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 18,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 14,559. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 40,000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| (a) Name of organization [| 30,000. | (f) Manner of cash disbursement WIRE TRANSFERS WIRE TRANSFERS | (g) Amount of non-cash assistance 0. | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV appraisal, other) |
|--|---------|--|---|--|--|
| PACIFIC PROGRAM SUPPORT | | | | | |
| PACIFIC PROGRAM SUPPORT | | | | | |
| EAST ASIA AND THE | | | | | |
| | 25,000. | WIRE TRANSFERS | 0. | | |
| | 25,000. | WIRE TRANSFERS | 0. | | |
| PACIFIC PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | Ο. | | |
| | | | | | |
| | | | | | |
| EAST ASIA AND THE | | | | | |
| PACIFIC PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | |
| EAST ASIA AND THE | | | | | |
| PACIFIC PROGRAM SUPPORT | 18,000. | WIRE TRANSFERS | 0. | | |
| | | | | | |
| EAST ASIA AND THE | | | | | |
| PACIFIC PROGRAM SUPPORT | 32,000. | WIRE TRANSFERS | 0. | | |
| | | | | | |
| EAST ASIA AND THE | c | | | | |
| PACIFIC PROGRAM SUPPORT | 6,000. | WIRE TRANSFERS | 0. | | + |
| | | | | | |
| EAST ASIA AND THE | 21 201 | | 0 | | |
| PACIFIC PROGRAM SUPPORT | 31,301. | WIRE TRANSFERS | 0. | | + |
| | | | | | |
| EAST ASIA AND THE PACIFIC PROGRAM SUPPORT | 20 500 | WIRE TRANSFERS | 0. | | |
| | 20,500. | TRAISFERS | | | + |
| | | | | | |
| EAST ASIA AND THE PACIFIC PROGRAM SUPPORT | 45 000 | WIRE TRANSFERS | ο. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|-------------------------------|--|------------------------|--------------------------------|---------------------------------|---------------------------------|---|--|--|
| 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) |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 1,750. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 32,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 38,500. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 20,778. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 35,000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | . (Schedule F (Form § | 990), Part II, line 1 |) | |
|-------------------------------|---|--------------------------------|--------------------------------|---------------------------------|------------------------------------|--|---|---|
| 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) |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 70,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 200. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 15,450. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE | | | | | | |
| | | PACIFIC | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND THE PACIFIC | PROGRAM SUPPORT | 19 000 | WIRE TRANSFERS | 0. | | |
| | | | | 19,000. | | | | |
| | | L | | | | | | |
| | | EAST ASIA AND THE PACIFIC | PROGRAM SUPPORT | 73,000. | WIRE TRANSFERS | 0. | | |
| | | | | , | | | | |
| | | EUROPE (INCLUDING ICELAND & | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | EUROPE (INCLUDING ICELAND & | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 60,000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| 1 (b) IRS code section (c) Region (d) Purpose of (e) Amount (f) Manner of (g) Amount of (h) Description (a) Name of organization and EIN (if applicable) (c) Region (d) Purpose of of cash grant (f) Manner of (g) Amount of (h) Description | ash valuation (book, FMV, |
|--|---------------------------|
| | |
| EUROPE (INCLUDING | |
| ICELAND & | |
| GREENLAND) PROGRAM SUPPORT 10,000.WIRE TRANSFERS 0. | |
| EUROPE (INCLUDING | |
| ICELAND & | |
| GREENLAND) PROGRAM SUPPORT 21,400.WIRE TRANSFERS 0. | |
| | |
| EUROPE (INCLUDING ICELAND & | |
| GREENLAND & GREENLAND & PROGRAM SUPPORT 74,245.WIRE TRANSFERS 0. | |
| | |
| EUROPE (INCLUDING | |
| ICELAND & GREENLAND) PROGRAM SUPPORT 100,000.WIRE TRANSFERS 0. | |
| GREENLAND/ FROGRAFISOFFORT 100,000.WIRE TRANSFERS 0. | |
| EUROPE (INCLUDING | |
| ICELAND & | |
| GREENLAND) PROGRAM SUPPORT 75,000.WIRE TRANSFERS 0. | |
| EUROPE (INCLUDING | |
| ICELAND & | |
| GREENLAND) PROGRAM SUPPORT 25,000.WIRE TRANSFERS 0. | |
| | |
| | |
| NORTH AMERICA PROGRAM SUPPORT 80,000.WIRE TRANSFERS 0. | |
| | |
| | |
| NORTH AMERICA PROGRAM SUPPORT 60,000.WIRE TRANSFERS 0. | |
| | |
| | |
| NORTH AMERICA PROGRAM SUPPORT 38,500.WIRE TRANSFERS 0. | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|-------------------------------|--|------------------------|--------------------------------|-----------------------------|------------------------------------|---|--|--|
| 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, FM\ appraisal, other) |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 58,300. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 161,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 45,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 36,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 36,500. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 50,500. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | Ŭ |
|----------------------------|---|------------------------|--------------------------------|------------------------------------|------------------------------------|--|--|---|
| 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) |
| | | RUSSIA AND | | | | | | |
| | | NEIGHBORING | | | | | | |
| | | STATES | PROGRAM SUPPORT | 3,000. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 35,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 60,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 60,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 24,500. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation o | f Grants and Other | Assistance to Organiza | tions or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|--------------------------------------|--|------------------------|-------------------------------|---------------------------------|------------------------------------|--|--|---|
| 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) |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 16,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 75,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 28,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 24.000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| | | | | <u> </u> | | <i>(</i> 0 , , , , , , , , , , , , , , , , , , , | | | Tage Z |
|----------------------|-------------------|--|------------------------|--------------------------------|-----------------------------|---|--|--|---|
| Part II | Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | . (Schedule F (Form § | | | |
| 1 (a) Name | e 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) |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 28,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 37,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 31,607. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | 10.000 | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 18,000. | WIRE TRANSFERS | 0. | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 10 000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 23,300. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| | | | | | | | | Faye |
|-------------------------------|--|----------------------------|--------------------------------|----------------|---------------------------------|--|---|--|
| Part II Continuation of | f Grants and Other | Assistance to Organization | ations or Entities Outside the | United States. | (Schedule F (Form § | 90), Part II, line 1 |) | |
| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | | (d) Purpose of grant | (e) Amount | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FM appraisal, other) |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 40,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 17,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 40,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 28,000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | . (Schedule F (Form 9 | | | |
|------------------------------|---|------------------------|--------------------------------|---------------------------------|------------------------------------|--|--|--|
| l 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) |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 28,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 32,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 75,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 45,400. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 51,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 39,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 25 000 | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation o | f Grants and Other | Assistance to Organiz | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | - |
|--------------------------------------|--|-----------------------|--------------------------------|---------------------------------|------------------------------------|--|--|--|
| 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, FM\ appraisal, other) |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 114,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 260,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 16,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 18,000. | WIRE TRANSFERS | 0. | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 30 500. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 139,198. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |

Part II

AMERICAN JEWISH WORLD SERVICE, INC.

SOUTH ASIA

Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

22-2584370

Page 2

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (a) Pagion | (d) Purpose of grant | (e) Amount | (f) Manner of cash disbursement | (g) Amount of | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|-------------------------------|---|------------|-------------------------|------------|---------------------------------|---------------|--|---|
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 40,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 75,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |

PROGRAM SUPPORT

23,000 WIRE TRANSFERS

Ο.

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | - |
|--|--|------------------------|--------------------------------|-----------------------------|---------------------------------|--|---|---|
| 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, FM appraisal, other) |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 70,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 33,000. | WIRE TRANSFERS | 0. | | |
| | | | | 42,000 | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 42,000. | WIRE TRANSFERS | 0. | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 60,000. | WIRE TRANSFERS | 0. | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II | Continuation of | | | ations or Entities Outside the | | (Schedule E (Form 9 | 90) Part II line 1 | 1) | |
|---------|-------------------|---|------------|--------------------------------|------------|---------------------------------|---|--|---|
| 1 | e of organization | (b) IRS code section and EIN (if applicable) | | (d) Purpose of grant | (e) Amount | (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) |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 172,228. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 41,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 32,000. | WIRE TRANSFERS | 0. | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 101 000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SOUTH ASIA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| | Grants and Other | Assistance to Organiza | ations or Entities Outside the | e United States. | Schedule F (Form S | | | 1 |
|--------------------------------------|--|------------------------|--------------------------------|-----------------------------|------------------------------------|--|---|---|
| 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, FM appraisal, other) |
| | | | | | | | | |
| | | SOUTH ASIA | PROGRAM SUPPORT | 40,000. | WIRE TRANSFERS | 0. | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | SUB-SAHARAN AFRICA | | 20.000 | | 0. | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 42,335. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | CUD CAUADAN | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 33,151. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | art II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) | | | | | | | | | |
|----------------------------|---|-------------|--------------------------------|------------------------------------|------------------------------------|--|--|---|--|--|
| 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) | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | ٥. | | | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | | PROGRAM SUPPORT | 44,855. | WIRE TRANSFERS | 0. | | | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | | | |
| | | | | | | | | | | |
| | | SUB-SAHARAN | | | | | | | | |
| | | | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | 0. | | | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 990), Part II, line 1 |) | |
|----------------------------|--|------------------------|--------------------------------|---------------------------------|------------------------------------|--|--|---|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 24,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 2,200. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | , - | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 40 000 | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 15 000 | WIRE TRANSFERS | Ο. | | |
| | | III NICH | INGINI DUFURI | 13,000. | MINE INAMOPERS | · · · | | + |
| | | | | | | | | |
| | | SUB-SAHARAN | | 10 000 | | | | |
| | | AFRICA | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II | Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States | (Schedule F (Form 9 | 90), Part II, line 1 | I) | 1 490 2 |
|----------------------|-------------------|---|------------------------|--------------------------------|---------------------------------|------------------------------------|--|---|---|
| 1 (a) Name | e 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) |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 44,440. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 13,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFERS | 0. | | |
| | | | | | , - | | | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 30 000 | WIRE TRANSFERS | 0. | | |
| | | | | FROMM BOITONI | 50,000. | | •• | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN AFRICA | | 8 E00 | WIRE TRANSFERS | Ο. | | |
| | | | AFRICA | PROGRAM SUPPORT | 8,500. | WIRE IRANSFERS | · · | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | Ο. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | of Grants and Other | Assistance to Organiz | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|-------------------------------|---|-----------------------|--------------------------------|---------------------------------|---------------------------------|--|--|---|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 42,125. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 31 500 | WIRE TRANSFERS | 0. | | |
| | | | | 51,500. | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 10 000 | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 60,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 60,000. | WIRE TRANSFERS | 0. | | |

(a) Name of organization

(b) IRS code section

and EIN (if applicable)

Part II

1

AMERICAN JEWISH WORLD SERVICE, INC.

(c) Region

(d) Purpose of

grant

(e) Amount

22-2584370

Page **2** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (i) Method of valuation (book, FMV, (g) Amount of (h) Description (f) Manner of non-cash of non-cash of cash grant cash disbursement appraisal, other) assistance assistance

| | JB-SAHARAN | | | | | |
|------|------------|-----------------|---------|----------------|-------|------|
| AF | FRICA | PROGRAM SUPPORT | 44,017. | WIRE TRANSFERS | 0. | |
| | | | | | | |
| | | | | | | |
| SU | JB-SAHARAN | | | | | |
| AF | FRICA | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | ٥. | |
| | | | | | | |
| | | | | | | |
| ST | JB-SAHARAN | | | | | |
| | | PROGRAM SUPPORT | 25 000 | WIRE TRANSFERS | ٥. | |
| | RICA | INOGRAM BUITORI | 23,000. | WIKE IKANSPERS | 0. | |
| | | | | | | |
| | | | | | | |
| | JB-SAHARAN | | | | | |
| AF | FRICA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | |
| | | | | | | |
| | | | | | | |
| SU | JB-SAHARAN | | | | | |
| AF | FRICA | PROGRAM SUPPORT | 30,023. | WIRE TRANSFERS | ٥. | |
| | | | | | | |
| | | | | | | |
| su | JB-SAHARAN | | | GRANT | | |
| | | PROGRAM SUPPORT | | WRITE-OFF | ٥. | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | JB-SAHARAN | | 00 005 | | | |
| AF | FRICA | PROGRAM SUPPORT | 29,925. | WIRE TRANSFERS | 0. | |
| | | | | | | |
| | | | | | | |
| SU | JB-SAHARAN | | | | | |
| AF | FRICA | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | |
| | | | | | | |
| | | | | | | |
| SU | JB-SAHARAN | | | | | |
| | | PROGRAM SUPPORT | 20 000 | WIRE TRANSFERS | ٥. | |
| | | | ,, | | · · · | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| | | | | | (Schedule F (Form 9 | ,,,, | / | |
|-------------------------------|--|-----------------------|-----------------------------|---------------------------------|---------------------------------|--|--|--|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 8,000. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | , | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | , . | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 15 000. | WIRE TRANSFERS | 0. | | |
| | | | | ,, | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 10 000 | WIRE TRANSFERS | 0. | | |

(a) Name of organization

(b) IRS code section

and EIN (if applicable)

Part II

1

AMERICAN JEWISH WORLD SERVICE, INC.

(c) Region

(d) Purpose of

grant

22-2584370

(f) Manner of

(e) Amount

Page 2 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (i) Method of (g) Amount of (h) Description non-cash of non-cash valuation (book, FMV, of cash grant cash disbursement appraisal, other) assistance assistance

| | SUB-SAHARAN | | | | | |
|--|-------------|-----------------|----------------|----------------|----|--|
| | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | |
| | | | | | | |
| | | | | | | |
| | SUB-SAHARAN | | | | | |
| | AFRICA | PROGRAM SUPPORT | 41,000. | WIRE TRANSFERS | 0. | |
| | | | | | | |
| | | | | | | |
| | SUB-SAHARAN | | | | | |
| | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | |
| | | | , | | | |
| | | | | | | |
| | SUB-SAHARAN | | | | | |
| | | PROGRAM SUPPORT | 30 000 | WIRE TRANSFERS | 0. | |
| | | | , | | | |
| | | | | | | |
| | SUB-SAHARAN | | | | | |
| | | PROGRAM SUPPORT | 12 000 | WIRE TRANSFERS | Ο. | |
| | | | 12,000. | | •• | |
| | | | | | | |
| | SUB-SAHARAN | | | | | |
| | | PROGRAM SUPPORT | 0 | WIRE TRANSFERS | Ο. | |
| | nr NICA | INGRAM SUFFORI | , ⁰ | MINE IVENSLEKS | 0. | |
| | | | | | | |
| | SUB-SAHARAN | | | | | |
| | | | 10.000 | NTDE MEANGERE | _ | |
| | AFRICA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | 0. | |
| | | | | | | |
| | | | | | | |
| | SUB-SAHARAN | | | | | |
| | AFRICA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | 0. | |
| | | | | | | |
| | | | | | | |
| | SUB-SAHARAN | | | | | |
| | AFRICA | PROGRAM SUPPORT | 27,550. | WIRE TRANSFERS | 0. | |

AMERICAN JEWISH WORLD SERVICE, INC.

AFRICA

SUB-SAHARAN AFRICA

22-2584370

Page 2

| Part II Continuation or | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | e United States | . (Schedule F (Form § | 990), Part II, line | 1) | r age z |
|--------------------------------|---|------------------------|--------------------------------|-----------------|---------------------------------------|---------------------|--|---|
| 1 (a) Name of averagination | (b) IRS code section and EIN (if applicable) | | (d) Purpose of grant | (e) Amount | (f) Manner of cash disbursement | (g) Amount of | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFERS | 0. | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 52,200 | WIRE TRANSFERS | 0. | | |
| | | | | <u> </u> | 1 | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 22,000 | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 25,000 | WIRE TRANSFERS | ٥. | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | 0. | | + |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 10 000 | WIRE TRANSFERS | 0. | | |
| | | AFRICA | | | | | | + |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 30,000 | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | · · · · · · · · · · · · · · · · · · · | , | 1 | |

25,000.WIRE TRANSFERS

14,900 WIRE TRANSFERS

Ο.

Ο.

PROGRAM SUPPORT

PROGRAM SUPPORT

Part II

AMERICAN JEWISH WORLD SERVICE, INC. 22-2584370

Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

Page 2

| | | Assistance to Organiza | | United States. | | 90), Fait II, III e | 1) | · · · · · · · · · · · · · · · · · · · |
|-------------------------------|--|------------------------|--------------------------------|------------------------------------|------------------------------------|--|---|---|
| 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) |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | 30 000 | | 0 | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | 15 000 | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 18,000. | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 40,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 45,000. | WIRE TRANSFERS | ٥. | | |
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| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 35,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15 000. | WIRE TRANSFERS | ٥. | | |
| | | | | , | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 40,676. | WIRE TRANSFERS | 0. | | |

(b) IRS code section

Part II 1

AMERICAN JEWISH WORLD SERVICE, INC.

(d) Purpose of

22-2584370

Page 2 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (g) Amount of (h) Description (i) Method of (e) Amount (f) Manner of

| (a) Name of organization | (b) IRS code section | | (d) Purpose of | (e) Amount | (f) Manner of | (g) Amount of non-cash | (h) Description of non-cash | (I) Method of valuation (book, FMV, |
|--------------------------|-------------------------|-------------|-----------------|---------------|-------------------|---------------------------|--------------------------------|-------------------------------------|
| () 5 | and EIN (if applicable) | | grant | of cash grant | cash disbursement | assistance | assistance | appraisal, other) |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 41,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | , | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 55,447. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 7,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 36,782. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 5,000. | WIRE TRANSFERS | 0. | | |

Part II

AMERICAN JEWISH WORLD SERVICE, INC.

Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

22-2584370

| 1 (a) Name of organization | (b) IRS code section | (a) Degion | (d) Purpose of | (e) Amount | (f) Manner of | (g) Amount of | (h) Description of non-cash | (i) Method of valuation (book, FMV, |
|-------------------------------|-------------------------|-------------|-----------------|---------------|-------------------|---------------|--------------------------------|-------------------------------------|
| | and EIN (if applicable) | | grant | of cash grant | cash disbursement | assistance | assistance | appraisal, other) |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 35,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | GRANT | | | |
| | | AFRICA | PROGRAM SUPPORT | -17,500. | WRITE-OFF | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | 25 000 | | | | |
| | | AFRICA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 12 000 | WIRE TRANSFERS | 0. | | |
| | | AFRICA | INGRAM SOTTORI | 12,000. | WIRE TRANSFERS | ۰. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 64 000. | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 42,000. | WIRE TRANSFERS | Ο. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | Ο. | | |

Part II

1

(a)

AMERICAN JEWISH WORLD SERVICE, INC.

Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

22-2584370

| | | Assistance to Organiza | | Officed States. | | 30), i art ii, iirie | 1) | |
|------------------------|---|------------------------|-----------------------------|------------------------------------|--|--|---|---|
|) 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 30,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 60 000. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 35,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 37,600. | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 48 415 | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 87,510. | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | Ο. | | |
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| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 12 000 | WIRE TRANSFERS | 0. | | |
| | | | INCOMIN DOLLOWI | | THE HUMOFERS | | | + |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 45,000. | WIRE TRANSFERS | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|-------------------------------|--|------------------------|--------------------------------|---------------------------------|---------------------------------|--|--|---|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 13,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 205,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 5,000. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 28,120. | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 5,880. | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 24,780. | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 10 000 | WIRE TRANSFERS | 0. | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 25 000 | WIRE TRANSFERS | 0. | | |
| | | | INCOMENT DOFFORT | 25,000. | MINE INANOTERO | · · · | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | 20.000 | | | | |
| | | AFRICA | PROGRAM SUPPORT | 30,266. | WIRE TRANSFERS | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Conti | nuation of Gra | ants and Other | Assistance to Organiza | tions or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|-----------------------|----------------|---|-------------------------|-------------------------------|------------------------------------|---------------------------------|--|--|---|
| 1 (a) Name of orga | | IRS code section 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) |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 15,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | | PROGRAM SUPPORT | 6,000. | WIRE TRANSFERS | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | | PROGRAM SUPPORT | 36,071. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | | PROGRAM SUPPORT | 59,999. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | | PROGRAM SUPPORT | 26,235. | WIRE TRANSFERS | Ο. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | | PROGRAM SUPPORT | 10,000. | WIRE TRANSFERS | ٥. | | |
| | | | | | | | | | |
| | | | CENTRAL AMERICA | | | | | | |
| | | | AND THE CARIBBEAN | PROGRAM SUPPORT | 58,250. | WIRE TRANSFER | Ο. | | |
| | | | | | | | | | |
| | | | EUROPE (INCLUDING | | | | | | |
| | | | ICELAND & GREENLAND) | PROGRAM SUPPORT | 306,320. | WIRE TRANSFER | 0. | | |
| | | | - | | , , | | | | |
| | | | EUROPE (INCLUDING | | | | | | |
| | | | ICELAND & GREENLAND) | PROGRAM SUPPORT | 150 000. | WIRE TRANSFER | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation o | f Grants and Other | Assistance to Organiza | tions or Entities Outside the | United States. | (Schedule F (Form § | 990), Part II, line 1 |) | |
|-------------------------------|--|--|-------------------------------|---------------------------------|------------------------------------|--|--|---|
| 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) |
| | | EUROPE (INCLUDING ICELAND & | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 80,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 53,084. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 475,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 525,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 175,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 155,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) | | | | | | | | | | |
|--|--|--------------------------------|-----------------------------|---------------------------------|------------------------------------|---|--|---|--|--|
| 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) | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & | | | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 225,000. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & GREENLAND) | PROGRAM SUPPORT | 523,000. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & | | | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 300,000. | WIRE TRANSFER | ٥. | | | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & | | 150 000 | | 0. | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & GREENLAND) | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & | | | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 400,000. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & | | 200 250 | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 390,250. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & GREENLAND) | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | 0. | | | | |
| | | | | · · · | | | | | | |
| | | EUROPE (INCLUDING ICELAND & | | | | | | | | |
| | | | PROGRAM SUPPORT | 78,000. | WIRE TRANSFER | 0. | | | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) | | | | | | | | | | |
|--|--|--|------------------------------------|---------------------------------|------------------------------------|---|--|---|--|--|
| 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) | | |
| | | EUROPE (INCLUDING | | | | | | | | |
| | | ICELAND & GREENLAND) | PROGRAM SUPPORT | 263,333. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 2302563 | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING ICELAND & | I NORMA BUILDRI | 2302303. | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 354,307. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING ICELAND & | | | | | | | | |
| | | EUROPE (INCLUDING ICELAND & | PROGRAM SUPPORT PROGRAM SUPPORT | | WIRE TRANSFER WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|----------------------------|--|--|--------------------------------|---------------------------------|------------------------------------|--|--|---|
| 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) |
| | | EUROPE (INCLUDING ICELAND & | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 83,334. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 300,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & | | | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 135,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 137 500 | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & | | 107,000. | | | | |
| | | GREENLAND) | PROGRAM SUPPORT | 350,000. | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 150,000 | WIRE TRANSFER | 0. | | |
| | | EUROPE (INCLUDING | FROGRAM SUFFORI | 130,000. | WIRE TRANSFER | | | |
| | | | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | Ο. | | |
| | | EUROPE (INCLUDING ICELAND & GREENLAND) | PROGRAM SUPPORT | 120 000 | WIRE TRANSFER | 0. | | |
| | | | INGRAM SUFFORT | 120,000. | NICE INANOFEK | 0. | | |
| | | NORTH AMERICA | PROGRAM SUPPORT | 237,500. | WIRE TRANSFER | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II | Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | . (Schedule F (Form 9 | 90), Part II, line ⁻ | 1) | |
|----------------------|-------------------|--|------------------------|--------------------------------|---------------------------------|------------------------------------|--|---|---|
| 1 (a) Name | e 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) |
| | | | | | | | | | |
| | | | NORTH AMERICA | PROGRAM SUPPORT | 450,000. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | | |
| | | | NORTH AMERICA | PROGRAM SUPPORT | 40,000. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | | |
| | | | NORTH AMERICA | PROGRAM SUPPORT | 250,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | | |
| | | | NORTH AMERICA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | | |
| | | | NORTH AMERICA | PROGRAM SUPPORT | 335,000. | WIRE TRANSFER | 0. | | |
| | | | | | 125 000 | | | | |
| | | | NORTH AMERICA | PROGRAM SUPPORT | 135,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | | |
| | | | NORTH AMERICA | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | 0. | | |
| | | | | | 500.000 | WIRE TRANSFER | | | |
| | | | NORTH AMERICA | PROGRAM SUPPORT | 500,000. | WIRE TRANSPER | 0. | | + |
| | | | | | | | | | |
| | | | SOUTH AMERICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | Schedule F (Form S | 90), Part II, line 1 | 1) | |
|-------------------------------|---|------------------------|--------------------------------|---------------------------------|------------------------------------|---|--|--|
| 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) |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 160,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 75,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 315,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 180,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 60,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form § | 90), Part II, line 1 |) | - |
|--------------------------------------|--|------------------------|--------------------------------|---------------------------------|------------------------------------|--|--|--|
| 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, FM appraisal, other) |
| | | | | | | | | |
| | | SOUTH AMERICA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 150 000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 75,000. | WIRE TRANSFER | 0. | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 500,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 180,429. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 100 000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 132,500. | WIRE TRANSFER | 0. | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 180,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|-------------------------------|---|------------------------|--------------------------------|---------------------------------|---------------------------------|--|--|---|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 125,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 116,500. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 250,000. | WIRE TRANSFER | Ο. | | |
| | | | | , | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 353 250 | WIRE TRANSFER | 0. | | |
| | | AFRICA | INGGRAM BUITORI | 555,250. | MIKE IKANSPER | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | == | | | | |
| | | AFRICA | PROGRAM SUPPORT | 75,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation | of Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | |
|-------------------------------|---|------------------------|--------------------------------|---------------------------------|---------------------------------|--|---|---|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | ο. | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 100 000 | WIRE TRANSFER | 0. | | |
| | | | INGGREE DOITONT | 100,000. | | •• | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 300,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 20,000. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 300,000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 50,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 75 000 | WIRE TRANSFER | 0. | | |
| | | | | | | | | + |
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| | | SUB-SAHARAN | | 175 000 | | | | |
| | | AFRICA | PROGRAM SUPPORT | 175,000. | WIRE TRANSFER | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation o | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | - |
|-------------------------------|--|------------------------|--------------------------------|-----------------------------|------------------------------------|---|--|---|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 280,000. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 225,000. | WIRE TRANSFER | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 65,000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 250,000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | ٥. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 110,000. | WIRE TRANSFER | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 200,000. | WIRE TRANSFER | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 65,000. | WIRE TRANSFER | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| | Grants and Other | Assistance to Organiz | ations or Entities Outside the | e United States. | Schedule F (Form S | | | |
|-------------------------|--|-----------------------|--------------------------------|-----------------------------|------------------------------------|---|---|---|
| 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, FM appraisal, other) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 130,000. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 340,000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 80 000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 115 000 | WIRE TRANSFER | 0. | | |
| | | | | 115,000. | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | 150.000 | | 0 | | |
| | | AFRICA | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 250,000. | WIRE TRANSFER | ٥. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation of | f Grants and Other | Assistance to Organiza | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | _ |
|-------------------------------|--|------------------------|--------------------------------|---------------------------------|---------------------------------|--|--|--|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 25,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 775,000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 12,000. | WIRE TRANSFER | ٥. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 30,000. | WIRE TRANSFER | Ο. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 50,000. | WIRE TRANSFER | Ο. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 42,000. | WIRE TRANSFER | ٥. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 220,000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 150 000 | WIRE TRANSFER | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II | Continuation o | | | ations or Entities Outside the | | (Schedule F (Form 9 | 90). Part II. line 1 | 1) | |
|---------|-------------------|---|-----------------------|--------------------------------|------------|---------------------------------|---|--|---|
| 1 | e of organization | (b) IRS code section and EIN (if applicable) | (a) Pagian | (d) Purpose of grant | (e) Amount | (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) |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 500,000. | WIRE TRANSFER | ٥. | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 165 000 | WIRE TRANSFER | 0. | | |
| | | | | | 100,000. | | •• | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 392,628. | WIRE TRANSFER | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 121,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 65,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 150 000. | WIRE TRANSFER | 0. | | |
| | | | | | | | - • | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | 100.000 | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 60,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | | |
| | | | SUB-SAHARAN | | | | | | |
| | | | AFRICA | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | 0. | | |

AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370

| Part II Continuation | of Grants and Other | Assistance to Organiz | ations or Entities Outside the | United States. | (Schedule F (Form 9 | 90), Part II, line 1 |) | - ago - |
|-------------------------------|---|-----------------------|--------------------------------|---------------------------------|------------------------------------|--|--|--|
| 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) |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 100,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | | PROGRAM SUPPORT | 192,000. | WIRE TRANSFER | 0. | | |
| | | | | | | | | |
| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 150,000. | WIRE TRANSFER | 0. | | |
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| | | SUB-SAHARAN | | | | | | |
| | | AFRICA | PROGRAM SUPPORT | 240,000. | WIRE TRANSFER | ٥. | | |
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| | | CUD CAUADAN | | | | | | |
| | | SUB-SAHARAN AFRICA | PROGRAM SUPPORT | 225,000. | WIRE TRANSFER | 0. | | |
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22-2584370

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

Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|-------------------|--------------------------|--------------------------|--|---|--|---|
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Schedule F (Form 990) 2014

| Part IV | Foreian Form | s | | | | | _ |
|------------|-----------------|----------|--------|-------|----------|------|---|
| Schedule F | (Form 990) 2014 | AMERICAN | JEWISH | WORLD | SERVICE, | INC. | |

| 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 | X No |
|---|---|-----|------|
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to 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 | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form</i> 5471, <i>Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form</i> 5471) | Yes | X 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? <i>If</i> "Yes," <i>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)</i> | Yes | X 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 | X 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 file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) | Yes | X No |

09511109 759915 6820018

| B • 177 | Form 990) 2014 AMERICAN JEWISH WORLD SERVICE, INC. 22-2584370 Pa |
|-----------------|---|
| F F | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. |
| PART I, | , LINE 2: |
| PRIOR T | TO SELECTING A PROSPECTIVE GRANTEE, AJWS STAFF AND CONSULTANTS DO 2 |
| CONTEXT | FUAL ANALYSIS OF THE COUNTRY AND DECIDE WHERE THE FUNDING GAP |
| EXISTS. | . STAFF MEMBERS AND CONSULTANTS CONDUCT SITE VISITS TO ASSESS THE |
| LANDSCA | APE AND TO BEGIN SELECTING POTENTIAL GRANTEES. DURING THESE SITE |
| VISITS, | , OTHER FUNDERS AS WELL AS PARTNERS ARE CONSULTED AND A SHORTLIST |
| OF GRAN | NTEES IS CREATED. |
| GRANTEE | ES ARE SELECTED BASED ON A NUMBER OF FACTORS, SUCH AS THE |
| ORGANIZ | ZATION'S ALIGNMENT WITH AJWS'S STRATEGIES; ITS EFFECTIVENESS AND |
| THE QUA | ALITY OF ITS PROGRAMS AND STRATEGY; THE ORGANIZATION'S FINANCIAL |
| MANAGEM | MENT; THE PRESENCE OF STRONG AND INCLUSIVE LEADERSHIP; WORK THAT IS |
| DRIVEN | BY THE PRIORITIES OF THE AFFECTED COMMUNITY; THE LOCAL REPUTATION |
| OF THE | ORGANIZATION (CREDIBILITY); ITS CONNECTIONS WITH OTHER CIVIL |
| SOCIETY | Y ORGANIZATIONS; THE DEPTH OF THE ORGANIZATION'S ANALYSIS; AND THE |
| ORGANIZ | ZATION'S USE OF CUTTING EDGE STRATEGIES AND APPROACHES. ALL |
| GRANTEE | ES ARE SCREENED BY AJWS STAFF TO ENSURE COMPLIANCE WITH U.S. |
| | RY GUIDELINES. IN COUNTRIES WHERE SITE VISITS ARE NOT POSSIBLE DUE |
| | JRITY ISSUES, AJWS STAFF CONTACTS OTHER FUNDERS THAT WORK WITH THE |
| | E ORGANIZATION AND CHECKS REFERENCES. |
| | GRANT HAS BEEN APPROVED BY AJWS'S BOARD COMMITTEE, AJWS STAFF |
| | A GRANT AGREEMENT THAT REFLECTS THE GRANTEES' PROPOSAL. IT |
| | ES THE PROJECT ACTIVITIES, THE THREE YEAR OUTCOMES AND THE |
| | ING REQUIREMENTS. ONCE THE GRANTEE SIGNS AND RETURNS THE AGREEMENT |
| | 5, THE FIRST HALF OF THE TOTAL GRANT AMOUNT IS PROCESSED. PROGRAM |
| | RS AND CONSULTANTS TRACK THE PROGRESS OF THE PROJECT THROUGHOUT TH |
| | PERIOD. SIX MONTHS INTO THE GRANT, PROVIDED THERE ARE NO MAJOR |
| | |
| 432075 09-24-14 | |
| 511109 7 | 98 759915 6820018 2014.04030 AMERICAN JEWISH WORLD SERVI 682001 |
| | |

| Schedule F (Form 990) 2014 AMERICAN JEWISH WORLD SERVICE, INC. 22-2584370 Page 5 Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. |
|--|
| NARRATIVE AND FINANCIAL REPORT THAT IS IN ACCORDANCE WITH THE COMMITMENTS |
| AGREED UPON IN THE GRANT AGREEMENT IS REQUIRED ONE MONTH AFTER THE |
| PROJECT END DATE. |
| FOR DONOR-ADVISED FUND GRANTS, EXPENDITURE RESPONSIBILITY REQUIREMENTS |
| ARE FOLLOWED PER THE IRS. ONCE A GRANT HAS BEEN APPROVED BY AJWS' BOARD |
| COMMITTEE, AJWS STAFF DRAFTS A GRANT AGREEMENT WHICH INCLUDES THE PROJECT |
| AND REPORTING REQUIREMENTS. AFTER THE GRANTEE REVIEWS AND SIGNS THE |
| AGREEMENT, THE FIRST PAYMENT IS PROCESSED. SUBSEQUENT PAYMENTS FOR |
| MULTI-YEAR GRANTS ARE CONTINGENT UPON THE RECEIPT OF A SATISFACTORY |
| REPORT ON THE FIRST YEAR OF GRANT ACTIVITIES AND ADEQUATE FUNDING. ALL |
| DONOR-ADVISED FUND GRANTS MUST RECEIVE A FINANCIAL AND NARRATIVE REPORT |
| AT THE END OF EVERY GRANT PERIOD. AJWS STAFF REVIEWS THESE REPORTS |
| AGAINST THE ORIGINAL PROPOSAL AND UPON APPROVAL, PROCESSES ANY FURTHER |
| PAYMENTS IF APPLICABLE. |
| |
| |

FORM 990, SCHEDULE F, PART II

GRANTS WITH NEGATIVE AMOUNTS - GRANTS DISPLAYED AS A NEGATIVE NUMBER (E.G. -\$15,000) REPRESENT GRANT AGREEMENTS THAT WERE APPROVED AND AWARDED IN THE PREVIOUS FISCAL YEARS. FUTURE PAYMENTS FOR THESE GRANTS WERE WITHHELD OR FORFEITED BY AJWS FOR REASONS DEEMED NECESSARY BY THE MONITORING PROGRAM OFFICER AND THE DIRECTOR OF GRANTS. THESE GRANTS ARE USUALLY WRITTEN-OFF FROM THE ORGANIZATION'S PAYABLES LIST AFTER THE FISCAL YEAR IN WHICH THEY WERE ORIGINALLY GRANTED, THUS REFLECTING A NEGATIVE NUMBER IN THE CURRENT FISCAL YEAR.

99

432075 09-24-14

| SCHEDULE G | Cumpleme | | Han Davar | | F | due:e | | ۸ at:. | | OMB No. 1545-0047 | |
|--|---|--|---|--|--|---|---|------------|---|---|--|
| (Form 990 or 990-EZ) | Complete if the | organization a | nswered "Ye | s" to F | orm 9 | 90, P | ing or Gaming / art IV, lines 17, 18, o rm 990-EZ, line 6a. | or 19, | | 2014 | |
| Department of the Treasury Internal Revenue Service | | ► A | ttach to For | m 990 | or Fo | rm 99 | • | | rm 990. | Open to Public Inspection | |
| Name of the organization | 1 | | | | | | - | | Employer id | entification number | |
| | | N JEWISH | | | | | | | 22-258 | | |
| | complete this part | | organization | answe | red "Y | es" to | Form 990, Part IV, I | ine 17 | . Form 990-E | Z filers are not | |
| b If "Yes," list the ter | ions email solicitations ations licitations n have a written o ed in Form 990, Pa n highest paid indi | or oral agreement art VII) or entity in viduals or entitie | e X So f So g X So with any indi | olicitati olicitati pecial f ividual with pr | ion of ion of fundra (incluc rofessi | non-g gover iising ding o ional f | overnment grants nment grants events fficers, directors, tru undraising services? | stees | X Ye | | |
| compensated at le | ast \$5,000 by the | organization. | | | | | | | | | |
| (i) Name and address or entity (fund | | (ii) Activity | | | (iii) Did fundraiser have custody or control of contributions? | | (iv) Gross receipts from activity | tò (o f | Amount paid r retained by) undraiser ed in col. (i) | (vi) Amount paid to (or retained by) organization | |
| AMY TRIPI - 255 PLU | JTARCH | DIRECT MAIL/ | ACQUISITIO | N | Yes | No | | | | | |
| ROAD, HIGHLAND, NY | 12528 | MAIL/DIGITAL | CAMPAIGN | | | Х | 3,598,461. | | 132,170 | . 3,466,291. | |
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| | | | | | | | | | | | |
| Total | | | | | I | | 3,598,461. | | 132,170 | . 3,466,291. | |
| 3 List all states in white or licensing. | ch the organizatio | n is registered o | licensed to s | solicit c | contrib | utions | s or has been notified | d it is | exempt from | registration | |

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

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

Schedule G (Form 990 or 990-EZ) 2014

432081 08-28-14 Schedule G (Form 990 or 990-EZ) 2014 AMERICAN JEWISH WORLD SERVICE, INC. 22-2584370 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

| | | | (a) Event #1 TASTE OF AJWS | (b) Event #2 | (c) Other events NONE | (d) Total events (add col. (a) through col. (c)) |
|----------------|----------------------------------|--|--|---|------------------------------------|---|
| ų l | | | (event type) | (event type) | (total number) | coi. (c)) |
| | 1 | Gross receipts | 33,847. | | | 33,847 |
| | 2 | Less: Contributions | 11,940. | | | 11,940 |
| | 3 | Gross income (line 1 minus line 2) | 21,907. | | | 21,907 |
| | 4 | Cash prizes | | | | |
| | 5 | Noncash prizes | | | | |
| | 6 | Rent/facility costs | 8,837. | | | 8,837 |
| Urect Expenses | 7 | Food and beverages | 12,918. | | | 12,918 |
| - I | 8 | Entertainment | 450. | | | 450 |
| | 9 | Other direct expenses | 6,973. | | | 6,973 |
| | | | | | | |
| - | 11 | | n line 3, column (d) | | 🕨 | |
| Par | 11 T I | Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. | n line 3, column (d)n n answered "Yes" to Form (a) Bingo | | 🕨 | -7,271 (d) Total gaming (add |
| Par | 11 | Net income summary. Subtract line 10 from II Gaming. Complete if the organization | n line 3, column (d)n n answered "Yes" to Form (a) Bingo | 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | -7,271 |
| | 11 t I | Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. | n line 3, column (d)n n answered "Yes" to Form (a) Bingo | 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | -7,271 |
| | 11 t I 1 2 | Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue | n line 3, column (d) | 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | -7,271 |
| | 11 t II 1 2 3 | Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes | n line 3, column (d) n answered "Yes" to Form (a) Bingo | 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | 29 , 178 -7 , 271 (d) Total gaming (add col. (a) through col. (c |
| | 11 t II 1 2 3 | Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes | n line 3, column (d) | 990, Part IV, line 19, or n (b) Pull tabs/instant bingo/progressive bingo | eported more than (c) Other gaming | -7,271 |
| | 11 t I 2 3 4 5 | Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs | n line 3, column (d) n answered "Yes" to Form (a) Bingo | 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | -7,271 |
| | 11 1 2 3 4 5 6 | Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses | a line 3, column (d) n answered "Yes" to Form (a) Bingo (a) Bingo | 990, Part IV, line 19, or n (b) Pull tabs/instant bingo/progressive bingo | eported more than (c) Other gaming | -7,271 (d) Total gaming (add |

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

432082 08-28-14

Schedule G (Form 990 or 990-EZ) 2014

101

| Sch | edule G (Form 990 or 990-EZ) 2014 AMERICAN JEWISH WORLD SERVICE, INC. 22-2 | 2584370 | Page 3 |
|------|---|----------------|---------------|
| 11 | Does the organization conduct gaming activities with nonmembers? | Yes | No |
| 12 | | | |
| | | Yes | └── No |
| | | | |
| | | | <u>%</u> % |
| | | | % |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records. | | |
| | Name | | |
| | | | |
| | Address | | |
| | | | |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming revenue? | 🔛 Yes | └── No |
| | | | |
| b | | | |
| _ | | | |
| C | in "Yes," enter name and address of the third party: | | |
| | Name | | |
| | | | |
| | Address | | |
| | | | |
| 16 | Gaming manager information: | | |
| | | | |
| | Name | | |
| | | | |
| | Gaming manager compensation 🕨 \$ | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | Director/officer Employee Independent contractor | | |
| | | | |
| 17 | Mandatory distributions: | | |
| а | | | □ |
| | | Ves | L No |
| b | | | |
| Pa | | lines 9 9h 1 | 7h 15h |
| ľ | | 1163 3, 30, 10 | 55, 155, |
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| 4320 | 83 08-28-14 Schedule G (Form | n 990 or 990 | -EZ) 2014 |
| | 102 | | |

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2014.04030 AMERICAN JEWISH WORLD SERVI 68200182

| Schedule G | (Form 990 or 990-EZ) Supplemental Info | AMERICAN | JEWISH | WORLD | SERVICE, | INC. | 22-2584370 Page 4 |
|--------------------|---|-------------------|--------|-------|----------|------|---------------------------------|
| Part IV | Supplemental Info | rmation (continue | ed) | | | | |
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| 432084 05-01-14 | | | | | _ | | Schedule G (Form 990 or 990-EZ) |
| | | | | 10 | 3 | | |

09511109 759915 6820018 2014.04030 AMERICAN JEWISH WORLD SERVI 68200182

| SCHEDULE I (Form 990) | | Go | Grants and Oth vernments, ar lete if the organization | nd Individual | s in the Ŭni ' to Form 990, Pa | ted States | | OMB No. 1545-0047 2014 Open to Public |
|---|-----------------------------------|--------------------|---|-----------------------------|--|---|--|--|
| Internal Revenue Service | | Informat | ion about Schedule I | | | t www.irs.gov/form99 | 00. | Inspection |
| Name of the organization | | | RLD SERVICE | | | | | Employer identification number $22 - 2584370$ |
| Part I General In | formation on Grants a | | | , | | | | |
| 1 Does the organiz | ation maintain records | to substantiate th | e amount of the grants | s or assistance, the | grantees' eligibilit | y for the grants or ass | sistance, and the selec | ction |
| criteria used to a | ward the grants or assi | stance? | | | | | | X Yes No |
| 2 Describe in Part I | IV the organization's pro | | | | | | | |
| Part II Grants and | d Other Assistance to | Domestic Organi | izations and Domesti | c Governments. C | omplete if the org | anization answered " | Yes" to Form 990, Part | IV, line 21, for any |
| | nat received more than | | 1 . | | | (f) Method of | r | |
| • • | dress of organization rernment | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| ACCOUNTABILITY CO 244 KEARNY, FLOOR | 6 | | | | | | | |
| SAN FRANCISCO, CA | 94108 | 95-4116679 | 501(C)(3) | 50,000. | 0. | | | PROGRAM SUPPORT |
| BEYOND BORDERS, I 5016 CONNECTICUT WASHINGTON, DC 20 | AVENUE, NW | 23-2713126 | 501(C)(3) | 50,000. | 0. | | | PROGRAM SUPPORT |
| DISABILITY RIGHTS 89 SOUTH STREET, BOSTON, MA 02111 | | 27-5026293 | 501(C)(3) | 65,000. | 0. | | | PROGRAM SUPPORT |
| EARTHRIGHTS INTER 1612 K. ST. NW, S WASHINGTON, DC 20 | UITE 401 | 04-3265555 | 501(C)(3) | 45,000. | 0. | | | PROGRAM SUPPORT |
| EAST-WEST MANAGEM INC 575 MADISO FLOOR - NEW YORK, | N AVENUE, 25TH | 13-3586432 | 501(C)(3) | 20,000. | 0. | | | PROGRAM SUPPORT |
| EDGE FUNDERS ALLI BOX 599, 60 29TH SAN FRANCISCO, CA | ST | 20-8211195 | 501(C)(3) | 15,000. | 0. | | | PROGRAM SUPPORT |
| | er of section 501(c)(3) a | • | • | ne line 1 table | | | | 26. |
| | er of other organization | | | | | | | ▶ <u>1.</u> |
| LHA For Paperwork | Reduction Act Notice | , see the Instruct | tions for Form 990. | | | | | Schedule I (Form 990) (2014) |

Schedule I (Form 990) AMERICAN JEWISH WORLD SERVICE, INC.

22-2584370 Page 1

| Schedule I (Form 990) AMERICAN | OFMION MC | JELD SERVICE | , INC. | | | 2 | 2-2564570 Pag |
|--|-----------------|----------------------------------|--------------------------|---|---|--|---------------------------------------|
| Part II Continuation of Grants and Other | Assistance to G | overnments and Organ | nizations in the U | nited States (Sch | edule I (Form 990), Pa | rt II.) | |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| FORTIFY RIGHTS INTERNATIONAL | | | | | | | |
| 1532 GALENA STREET, #380 | | | | | | | |
| AURORA, CO 80010 | 46-0932179 | 501(C)(3) | 21,500. | 0. | | | PROGRAM SUPPORT |
| | 10 0502175 | 501(0)(0) | 11,000. | | | | |
| FUNDERS CONCERNED ABOUT AIDS | | | | | | | |
| 1100 CONNECTICUT AVE NW #1200 | | | | | | | |
| WASHINGTON, DC 20036 | 13-3869632 | 501(C)(3) | 16,600. | 0. | | | PROGRAM SUPPORT |
| | | | , | - • | | | |
| GLOBAL RIGHTS | | | | | | | |
| 1200 18TH STREET, NW, SUITE 602 | | | | | | | |
| WASHINGTON, DC 20036 | 52-1295669 | 501(C)(3) | 6,824. | 0. | | | PROGRAM SUPPORT |
| GRAY MATTERS CHARITABLE | | | , | | | | |
| FOUNDATION, INC 2987 CLAIRMONT | | | | | | | |
| ROAD, SUITE 350 - ATLANTA, GA | | | | | | | |
| 30329 | 58-2147850 | 501(C)(3) | 125,000. | 0. | | | PROGRAM SUPPORT |
| | | | , | | | | |
| HUMAN RIGHTS WATCH | | | | | | | |
| 350 FIFTH AVENUE, 34TH FLOOR | | | | | | | |
| NEW YORK, NY 10118 | 13-2875808 | 501(C)(3) | 100,000. | Ο. | | | PROGRAM SUPPORT |
| · · · · | | | | | | | |
| IMANI HOUSE, INC. | | | | | | | |
| 76-A FIFTH AVENUE | | | | | | | |
| BROOKLYN, NY 11217 | 11-3055131 | 501(C)(3) | 35,500. | Ο. | | | PROGRAM SUPPORT |
| | | | | | | | |
| INTERNATIONAL FUNDERS FOR | | | | | | | |
| INDIGENOUS PEOPLES (IFIP) - PO BOX | | | | | | | |
| 29184 - SAN FRANCISCO, CA 94129 | 75-3217508 | 501(C)(3) | 47,894. | 0. | | | PROGRAM SUPPORT |
| INTERNATIONAL HUMAN RIGHTS FUNDERS | | | | | | | |
| GROUP - C/O PROTEUS FUND, 15 | | | | | | | |
| RESEARCH DRIVE, SUITE B - | | | | | | | |
| AMHERST, MA 01002 | 04-3243004 | CORPORATION, NFP | 2,090. | 0. | | | PROGRAM SUPPORT |
| | | | | | | | |
| INTERNATIONAL RIVERS | | | | | | | |
| 2054 ALLSTON WAY, SUITE 300 | | | | | | | |
| BERKELEY, CA 94704 | 94-3158295 | 501(C)(3) | 50,000. | 0. | | | PROGRAM SUPPORT |

Schedule I (Form 990)

Schedule I (Form 990) AMERICAN JEWISH WORLD SERVICE , INC . Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| 22-2584370 | Page 1 |
|------------|--------|
| | Fayer |

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|----------------------------------|-----------------------------|---|---|--|--|
| LAST MILE HEALTH | | | | | | | |
| P.O. BOX 130122 | | | | | | | |
| BOSTON, MA 02113 | 26-1401736 | 501(C)(3) | 150,000. | 0. | | | PROGRAM SUPPORT |
| | | | | | | | |
| NAMATI | | | | | | | |
| 1824 JEFFERSON PLACE, NW LOWER LEVE | | 501 (2) (2) | CO 000 | | | | |
| WASHINGTON, DC 20036 | 45-2796201 | 501(C)(3) | 60,000. | 0. | | | PROGRAM SUPPORT |
| NATIONAL PUBLIC RADIO | | | | | | | |
| 635 MASSACHUSETTS AVENUE, NW | | | | | | | |
| WASHINGTON, DC 20001 | 52-0907625 | 501(C)(3) | 500,000. | Ο. | | | PROGRAM SUPPORT |
| , | | | , , | | | | |
| ORGANIZATION FOR VISUAL | | | | | | | |
| PROGRESSION - 4427 PURVES ST. #4C | | | | | | | |
| - LONG ISLAND, CITY, NY 11101 | 26-4216562 | 501(C)(3) | 47,000. | Ο. | | | PROGRAM SUPPORT |
| | | | | | | | |
| OTHER WORLDS | | | | | | | |
| 398 60TH STREET | | | | | | | |
| OAKLAND, CA 94608 | 77-0071852 | 501(C)(3) | 41,969. | Ο. | | | PROGRAM SUPPORT |
| | | | | | | | |
| PEACE AND SECURITY FUNDERS GROUP | | | | | | | |
| 1625 K ST NW, SUITE 1050 | | | | | | | |
| WASHINGTON, DC 20036 | 23-7391766 | 501(C)(3) | 10,000. | Ο. | | | PROGRAM SUPPORT |
| PULITZER CENTER ON CRISIS | | | | | | | |
| REPORTING - 1779 MASSACHUSETTS | | | | | | | |
| AVE, NW. SUITE 615 - WASHINGTON, | | | | | | | |
| DC 20036 | 27-0458242 | 501(C)(3) | 75,000. | Ο. | | | PROGRAM SUPPORT |
| | | | | | | | |
| THE GLOBAL FORUM ON MSM AND HIV | | | | | | | |
| 436 14TH STREET, SUITE 1500 | | | | | | | |
| OAKLAND, CA 94612 | 95-3842506 | 501(C)(3) | 9,000. | 0. | | | PROGRAM SUPPORT |
| THE PROJECT ON ORGANIZING, | | | | | | | |
| DEVELOPMENT, EDUCATION, AND | | | | | | | |
| RESEARCH - PO BOX 2086 - NEW YORK, | | | | | | | |
| NY 10013 | 27-1732776 | 501(C)(3) | 49,500. | Ο. | | | PROGRAM SUPPORT |

Schedule I (Form 990)

Schedule I (Form 990) AMERICAN JEWISH WORLD SERVICE , INC . Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

22-2584370 Page 1

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|----------------------------------|--------------------------|--|---|--|---------------------------------------|
| JRGENT ACTION FUND FOR WOMEN'S | | | | | | | |
| HUMAN RIGHTS - 660 13TH STREET, | | | | | | | |
| SUITE 200 - OAKLAND, CA 94612 | 03-0419743 | 501(C)(3) | 50,000. | 0. | | | PROGRAM SUPPORT |
| | | | | | | | |
| WORLD EDUCATION SENEGAL | | | | | | | |
| C/O 44 FARNSWORTH STREET | | | | | | | |
| BOSTON, MA 02110 | 13-1804349 | 501(C)(3) | 35,000. | 0. | | | PROGRAM SUPPORT |
| YANSA INC. | | | | | | | |
| 14 CHURCH ST | | | | | | | |
| COLD SPRING, NY 10516 | 27-1497426 | 501(C)(3) | 12,000. | ٥. | | | PROGRAM SUPPORT |
| | 27 1457420 | 501(0)(5) | 12,000. | | | | |
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Schedule I (Form 990)

Schedule I (Form 990) (2014)

22-2584370

Page 2

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

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance | | | | | |
|---|--------------------------|--------------------------|---------------------------------------|---|--|--|--|--|--|--|
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| Part IV Supplemental Information. Provide the information req | uired in Part I, lin | ie 2, Part III, column | (b), and any other a | dditional information. | | | | | | |
| PART I, LINE 2: | | | | | | | | | | |
| BEFORE A GRANT IS MADE TO A US-BAS | ED ORGAN | IZATION, A | JWS STAFF | MEMBERS OR | | | | | | |

CONSULTANTS MEET WITH STAFF MEMBERS FROM THE POTENTIAL GRANTEE ORGANIZATION

AND SCREEN ALL THE ORGANIZATIONS TO ENSURE COMPLIANCE WITH US TREASURY

GUIDELINES. AJWS STAFF MEMBERS REVIEW AUDITED FINANCIAL STATEMENTS AND THE

ORGANIZATION'S REGISTRATION STATUS. ONCE A GRANT HAS BEEN APPROVED BY

AJWS' BOARD COMMITTEE, USING LANGUAGE FROM THE GRANTEE'S PROPOSAL, AJWS'

STAFF DRAFT A GRANT AGREEMENT THAT DETAILS THE ACTIVITIES THE GRANTEE

COMMITS TO CARRYING OUT AND OUTLINES THE REPORTING REQUIREMENTS. PROGRAM

 Schedule (Form 990)
 AMERICAN JEWISH WORLD SERVICE, INC.
 22-2584370 Page 2

 Part IV
 Supplemental Information

 OFFICERS ARE THEN ASKED TO ASSESS THE PROGRESS OF THE PROJECT AT THE FIVE

 MONTH MARK. AT THE GRANT'S HALF-WAY MARK, THE GRANTEE WILL RECEIVE THE

 REMAINDER OF ITS FUNDS. GRANTEES ARE THEN REQUIRED TO PROVIDE DETAILED

 NARRATIVE AND FINANCIAL REPORTS IN ACCORDANCE WITH THE COMMITMENTS AGREED

 UPON IN THE GRANT AGREEMENT ONE MONTH AFTER THE END OF THE GRANT PERIOD.

 US-BASED GRANTEES ARE REQUIRED TO MEET ONCE YEARLY WITH AJWS STAFF TO

 REVIEW THE PROGRESS OF THE GRANT.

Schedule I (Form 990)

432291 05-01-14

09511109 759915 6820018

| sc | HEDULE J | Compensation Information | 1 | OMB No. 1 | 1545-00 | 47 |
|--------|-----------------------|---|------------|--------------|---------|--------|
| (Fo | rm 990) | For certain Officers, Directors, Trustees, Key Employees, and Highest | | 20 | 1/ | [|
| | | Compensated Employees | | ΖU | 14 | ľ |
| Dena | tment of the Treasury | Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. | | Open to | Publ | ic |
| | al Revenue Service | Information about Schedule J (Form 990) and its instructions is at www.irs.gov/for | rm990. | Inspe | ction | |
| Nan | ne of the organizatio | | Employer i | | | mber |
| | | AMERICAN JEWISH WORLD SERVICE, INC. | 22-2 | 258437 | 0 | |
| Pa | rt I Question | s Regarding Compensation | | | | |
| | | | | | Yes | No |
| 1a | Check the appropr | iate box(es) if the organization provided any of the following to or for a person listed in Form | 990, | | | |
| | Part VII, Section A, | line 1a. Complete Part III to provide any relevant information regarding these items. | | | | |
| | First-class or o | charter travel Housing allowance or residence for perso | nal use | | | |
| | Travel for com | panions Payments for business use of personal re | sidence | | | |
| | Tax indemnifie | cation and gross-up payments Health or social club dues or initiation fee | S | | | |
| | Discretionary | spending account Personal services (e.g., maid, chauffeur, c | :hef) | | | |
| | | | | | | |
| b | | on line 1a are checked, did the organization follow a written policy regarding payment or | | | | |
| | reimbursement or p | provision of all of the expenses described above? If "No," complete Part III to explain | | 1 b | | |
| 2 | Did the organizatio | n require substantiation prior to reimbursing or allowing expenses incurred by all directors, | | | | |
| | trustees, and office | rs, including the CEO/Executive Director, regarding the items checked in line 1a? | | 2 | | |
| | | | | | | |
| 3 | | ny, of the following the filing organization used to establish the compensation of the organization | | | | |
| | | ector. Check all that apply. Do not check any boxes for methods used by a related organizat | ion to | | | |
| | | ation of the CEO/Executive Director, but explain in Part III. | | | | |
| | X Compensation | | | | | |
| | | compensation consultant | | | | |
| | X Form 990 of o | ther organizations | ommittee | | | |
| | Duning the user di | I any names listed in Four 000 Part VIII. Castion A. liss 1s with user set to the filing | | | | |
| 4 | | any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing | | | | |
| • | organization or a re | | | 4a | х | |
| a b | | e payment or change-of-control payment? ceive payment from, a supplemental nonqualified retirement plan? | | | | x |
| | | ceive payment from, an equity-based compensation arrangement? | | | | X |
| C | | nes 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | | | |
| | | | | | | |
| | Only section 501(| c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | | | |
| 5 | | n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio | n | | | |
| - | contingent on the r | | | | | |
| а | • | | | 5a | | X |
| b | Any related organiz | ation? | | 5b | | X |
| - | | r 5b, describe in Part III. | | | | |
| 6 | | n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio | n | | | |
| | contingent on the r | | | | | |
| а | | | | 6a | | X |
| | | ation? | | | | X |
| | | r 6b, describe in Part III. | | | | |
| 7 | For persons listed i | n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments | \$ | | | |
| | | es 5 and 6? If "Yes," describe in Part III | | 7 | Х | |
| 8 | | reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the | | | | |
| | | ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | | 8 | | X |
| 9 | If "Yes" to line 8, d | d the organization also follow the rebuttable presumption procedure described in | | | | |
| | Regulations section | ד 53.4958-6(c)? | | 9 | | |
| LHA | | eduction Act Notice, see the Instructions for Form 990. | | lule J (Forn | n 990 |) 2014 |

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22-2584370

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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

| | (B) Breakdown of | W-2 and/or 1099-MI | SC compensation | (C) Retirement and other deferred | (D) Nontaxable benefits | (E) Total of columns | (F) Compensation in column (B) |
|--|------------------|------------------------|-------------------------|-----------------------------------|-------------------------|----------------------|-----------------------------------|
| (A) Name and Title | (i) Base | (ii) Bonus & | (iii) Other | compensation | Denenits | (B)(i)-(D) | reported as deferred |
| | compensation | incentive compensation | reportable compensation | | | | in prior Form 990 |
| | | • | · | | | | |
| (1) RUTH MESSINGER (i) | | 0. | 4,697. | 10,400. | 19,561. | 360,810. | 0. |
| PRESIDENT (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) ROBERT BANK (i) | | 0. | 980. | 10,400. | 12,688. | 335,020. | 0. |
| EXCEUTIVE VICE PRESIDENT (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (3) KRISTINE STALLONE (i) | 223,729. | 25,000. | 342. | 9,893. | 21,548. | 280,512. | 0. |
| VP FOR FINANCE & ADMIN (ii | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (4) MANIA BOYDER (i) | 179,305. | 25,000. | 75,490. | 8,211. | 17,173. | 305,179. | 0. |
| VP FOR DEVELOPMENT (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (5) AARON DORFMAN (i) | 204,262. | 0. | 228. | 8,099. | 22,668. | 235,257. | 0. |
| VP FOR NATIONAL PROGRAM (ii | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (6) JACQUELINE HART (i) | 203,272. | 0. | 342. | 8,160. | 9,306. | 221,080. | 0. |
| VP FOR STRATEGIC LEARNING RESEARCH & (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (7) STUART SCHEAR | 218,012. | 25,000. | 980. | 9,840. | 11,622. | 265,454. | 0. |
| VP FOR COMM. MARKETING & COMMUNITY R (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (8) SHARI TURITZ | 196,265. | 0. | 342. | 8,266. | 30,680. | 235,553. | 0. |
| VP FOR INTERNATIONAL PROGRAM (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (9) BROOKE HIRSCHFELDER (i) | 118,720. | 0. | 43,654. | 4,923. | 11,453. | 178,750. | 0. |
| DIRECTOR OF HUMAN RESOURCES (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (10) COREY LUTSKY | 143,743. | 0. | 205. | 5,916. | 26,158. | 176,022. | 0. |
| DIRECTOR OF INFORMATION TECHNOLOGY (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (11) ALLISON LEE | 133,635. | 0. | 228. | 5,615. | 20,512. | 159,990. | 0. |
| EXECUTIVE DIRECTOR, LOS ANGELES (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (12) SAMANTHA WOLTHUIS | 132,455. | 0. | 205. | 5,329. | 14,591. | 152,580. | 0. |
| DIRECTOR OF INTERNATIONAL OPERATIONS (ii | | 0. | 0. | 0. | 0. | 0. | 0. |
| (i) | | | | | | | |
| (ii | | | | | | | |
| (i) | | | | | | | |
| (ii | | | | | | | |
| (i) | | | | | | | |
| (ii | | | | | | | |
| (i) | | | | | | | |
| (ii | | | | | | | |

Part III Supplemental Information

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

PART I, LINE 4A:

SEPARATION PAYMENTS WERE MADE DURING THE YEAR; THE AMOUNTS ARE REPORTED ON

SCHEDULE J. THE DETAILED INFORMATION IS AVAILABLE TO THE IRS UPON REQUEST.

PART I, LINE 7:

THE FOLLOWING INDIVIDUALS, LISTED IN PART VII, EACH RECEIVED A \$25,000

NON-FIXED PAYMENT IN THE FORM OF A BONUS, DURING THE YEAR.

KRISTINE STALLONE

MANIA BOYDER

STUART SCHEAR

Schedule J (Form 990) 2014

| SCHEDULE | Μ |
|------------|---|
| (Form 990) | |

Noncash Contributions

OMB No. 1545-0047

ſ

22-2584370

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

Open To Public Inspection

4

| Name of the organi | zation |
|--------------------|--------|
|--------------------|--------|

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Inspection
Employer identification number

AMERICAN JEWISH WORLD SERVICE, INC.

| Pa | rt I Types of Property | | | | | | | |
|-----|--|------------------------|-------------------------|-------------------------------|-------------|--------------------|-----|----|
| | | (a) Check if | (b) Number of | (c) Noncash contribution | Method | (d) of determin | ina | |
| | | applicable | contributions or | amounts reported on | noncash cor | | | S |
| | | | items contributed | Form 990, Part VIII, line 1g | | | | |
| 1 | Art - Works of art | | | | | | | |
| 2 | Art - Historical treasures | | | | | | | |
| 3 | Art - Fractional interests | | | | | | | |
| 4 | Books and publications | | | | | | | |
| 5 | Clothing and household goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| 8 | Intellectual property | | 114 | | | | | |
| 9 | Securities - Publicly traded | X | 114 | 1,853,165. | SALES PRO | CEEDS | | |
| 10 | Securities - Closely held stock | | | | | | | |
| 11 | Securities - Partnership, LLC, or | | | | | | | |
| | trust interests | | | | | | | |
| 12 | Securities - Miscellaneous | | | | | | | |
| 13 | Qualified conservation contribution - | | | | | | | |
| | Historic structures | | | | | | | |
| 14 | Qualified conservation contribution - Other $_{\!\dots}$ | | | | | | | |
| 15 | Real estate - Residential | | | | | | | |
| 16 | Real estate - Commercial | | | | | | | |
| 17 | Real estate - Other | | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | | | | | | | |
| 20 | Drugs and medical supplies | | | | | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| 24 | Archeological artifacts | | | | | | | |
| 25 | Other ► () | | | | | | | |
| 26 | Other ► () | | | | | | | |
| 27 | Other ► () | | | | | | | |
| 28 | Other 🕨 () | | | | | | | |
| 29 | Number of Forms 8283 received by the organized | zation durin | g the tax year for c | ontributions | | | | |
| | for which the organization completed Form 82 | 83, Part IV, | Donee Acknowledg | gement 29 | | | | |
| | | | | | | | Yes | No |
| 30a | During the year, did the organization receive by | | | | | | | |
| | must hold for at least three years from the date | e of the initia | al contribution, and | I which is not required to be | used for | | | |
| | exempt purposes for the entire holding period? | ? | | | | 30a | | Х |
| b | If "Yes," describe the arrangement in Part II. | | | | | | | |
| 31 | Does the organization have a gift acceptance | policy that r | equires the review | of any non-standard contrib | utions? | 31 | | X |
| 32a | Does the organization hire or use third parties | or related or | rganizations to soli | cit, process, or sell noncash | | | | |

b If "Yes," describe in Part II.
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

contributions?

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

Schedule M (Form 990) (2014)

32a

Х

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| Schedule M (Form 990) (2014) AMERICAN JEWISH WORLD SERVICE, | INC |
|---|-----|
|---|-----|

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

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF CONTRIBUTIONS ABOVE REPRESENTS THE NUMBER OF DONORS OF

PUBLICLY TRADED SECURITIES DURING THE YEAR.

Schedule M (Form 990) (2014)

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| SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service | Supplemental Information to Form 990 c Complete to provide information for responses to specific ques Form 990 or 990-EZ or to provide any additional information ► Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www | tions on on. | OMB No. 1545-0047 2014 Open to Public Inspection |
|--|--|-----------------|--|
| Name of the organization | | Employe | r identification number 2584370 |
| FORM 990, PA | RT I SUMMARY | | |
| THE PRIOR YE. | AR AMOUNTS SHOWN IN PART I, LINES 8 THRO | UGH 22, REF | PRESENT |
| THE 4 MONTH | SHORT PERIOD FILING OF JANUARY 1, 2014 - | APRIL 30, | 2014. |
| | | | |
| | | | |
| FORM 990, PA | RT III, LINE 4A, PROGRAM SERVICE ACCOMPL | ISHMENTS: | |
| DOCUMENT OUR | CONTRIBUTION, AS WELL AS SERVING AS MOVE | EMENT BUILI | DING |
| INPUTS. IPD | ALSO ADMINISTERS A DONOR-ADVISED FUND TH | AT PROVIDES | GRANTS |
| TO HUMAN RIG | HTS ORGANIZATIONS AROUND THE GLOBE. | | |
| | | | |
| FORM 990, PA | RT III, LINE 4B, PROGRAM SERVICE ACCOMPL | ISHMENTS: | |
| ORGANIZE THE | IR OWN COMMUNITIES TO TAKE ACTION IN SUP | PORT OF GLO | DBAL |
| JUSTICE. NPD | COLLABORATES CLOSELY WITH SLRE TO CONTI | NUALLY LEAF | RN FROM, |
| IMPROVE, AND | EVALUATE OUR PROGRAMS. | | |
| | | | |
| FORM 990, PA | RT III, LINE 4C, PROGRAM SERVICE ACCOMPL | ISHMENTS: | |
| THOUGHT LEAD | ER IN THE HUMAN RIGHTS ARENA AND JEWISH | COMMUNITIES | 5. |
| COMMUNICATIO | NS WORKS CLOSELY WITH DIVISIONS THROUGHO | UT AJWS TO | ENSURE |
| THAT OUR MES | SAGES ACCURATELY REFLECT THE TOTALITY OF | THE ORGANI | ZATION'S |

| WORK. |
|-------|
|-------|

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: STRATEGIC LEARNING RESEARCH AND EVALUATION: THE STRATEGIC LEARNING, RESEARCH AND EVALUATION (SLRE) DIVISION DEVELOPS LEARNING AND EVALUATION PROCESSES AT AJWS, YIELDING NEW INSIGHTS THAT CAN BE USED TO STRATEGICALLY IMPROVE AJWS'S WORK TO ADVANCE HUMAN RIGHTS IN THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. MADE O (Form 990 or 990-EZ) (2014) 432211 08-27-14

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| Schedule O (Form 990 or 990-EZ) (2014) Name of the organization | Page 2 Employer identification number |
|--|--|
| AMERICAN JEWISH WORLD SERVICE, INC. | |
| DEVELOPING WORLD. SLRE INVESTIGATES KEY QUESTIONS ABOUT A | JWS'S NATIONAL |
| AND INTERNATIONAL STRATEGIES, INCLUDING HOW WE CREATE SUS | TAINED HUMAN |
| RIGHTS CHANGE AND WHAT IMPACT WE HAVE HAD. IN ADDITION TO | DESIGNING |
| RESEARCH AND EVALUATION THAT ANSWER THESE QUESTIONS, SLRE | ALSO HELPS |
| AJWS'S PROGRAMMATIC STAFF APPLY LESSONS LEARNED AND CREAT | E INNOVATIVE, |
| EVIDENCE-BASED INITIATIVES. | |
| EXPENSES \$ 1,807,659. INCLUDING GRANTS OF \$ 551,000. | REVENUE \$ 347,512. |
| FORM 990, PART VI, SECTION B, LINE 11: | |
| ANNUALLY, THE FINANCE TEAM, ALONG WITH MANAGEMENT, PERFOR | MS A THOROUGH |
| REVIEW OF THE FORM 990, INCLUDING ALL SCHEDULES AND SUPPL | EMENTAL |
| INFORMATION RELATED TO IT. THE RETURN IS THEN REVIEWED BY | THE AJWS AUDIT |
| AND RISK MANAGEMENT COMMITTEE AND BEFORE FILING, THE FORM | 990 IS |
| DISTRIBUTED TO THE FULL BOARD FOR REVIEW AND COMMENTS. | |
| | |
| FORM 990, PART VI, SECTION B, LINE 12C: | |
| AMERICAN JEWISH WORLD SERVICE (AJWS) REGULARLY AND CONSIS | TENTLY MONITORS |
| AND ENFORCES COMPLIANCE WITH OUR CONFLICT OF INTEREST POL | ICY. ALL OFFICERS, |
| DIRECTORS AND EMPLOYEES ANNUALLY REVIEW THE CONFLICT OF I | NTEREST POLICY AND |
| SIGN A CONFLICT OF INTEREST DISCLOSURE STATEMENT WHICH AF | FIRMS THAT THE |
| INDIVIDUAL: | |
| - HAS RECEIVED A COPY OF THIS CONFLICT OF INTEREST POLICY | ; |
| - HAS READ AND UNDERSTANDS THIS CONFLICT OF INTEREST POLI | СҮ; |
| - HAS AGREED TO COMPLY WITH THIS CONFLICT OF INTEREST POL | ICY; |
| - UNDERSTANDS THAT AJWS IS A CHARITABLE ORGANIZATION AND | THAT IN ORDER TO |
| MAINTAIN ITS TAX-EXEMPT ORGANIZATIONAL STATUS, IT MUST EN | GAGE PRIMARILY IN |
| ACTIVITIES THAT ACCOMPLISH ONE OR MORE OF ITS CHARITABLE, | TAX-EXEMPT |
| PURPOSES; AND | |
| 100010 | dule O (Form 990 or 990-EZ) (2014 |
| 511109 759915 6820018 2014.04030 AMERICAN JEWISH WOR | RLD SERVI 68200182 |

| Name of the organization | AMERICAN | JEWISH W | ORLD SER | VICE, IN | iC. | | identification n 2584370 | umber |
|--------------------------|-----------|-----------|----------|----------|------------|--------|-----------------------------|-------|
| - SHALL DISCL | OSE ANY F | INANCIAL | OR OTHER | MATERIA | L INTEREST | AND T | HE FACTS | AND |
| CIRCUMSTANCES | RELATING | THERETO. | | | | | | |
| ALL CONFLICT | OF INTERE | ST DISCLO | SURE STA | TEMENTS | ARE REVIEW | ED BY | THE AJWS | |
| COMPLIANCE OF | FICER. IF | AN INDIV | IDUAL DI | SCLOSES | A POTENTIA | L CONF | LICT OF | |

TRUSTEES FOR FINAL DETERMINATION. THE MOST RECENT PROCESS WAS DONE WITH ALL

INDIVIDUALS IN AUGUST 2015.

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

IN 2014 HUMAN RESOURCES ENGAGED INSIDENGO, A THIRD PARTY ASSOCIATION WHOSE MISSION IS TO STRENGTHEN THE OPERATIONAL AND MANAGEMENT CAPACITY OF ORGANIZATIONS IN THE GLOBAL NGO COMMUNITY TO EVALUATE ITS EXISTING COMPENSATION STRUCTURE AND DETERMINE INTERNAL EQUITABILITY AND EXTERNAL COMPETITIVENESS OF SALARIES RELATIVE TO THE CURRENT LABOR MARKET. INSIDENGO USED THREE PUBLISHED SURVEY SOURCES FROM 'TARGET MARKETS' (INTERNATIONAL HUMAN RIGHTS, NOT FOR PROFIT AND GRANT MAKING SECTORS) TO CONDUCT ANALYSIS IN ORDER TO UPDATE AJWS'S COMPENSATION STRUCTURE AND CREATE A JOB LEVEL FRAMEWORK. USING THE RESULTS FROM THIS ANALYSIS AND GUIDED BY AJWS'S AGREED UPON COMPENSATION PHILOSOPHY, INSIDENGO CREATED A JOB LEVELING FRAMEWORK AND UPDATED THE US SALARY STRUCTURE FOR US-BASED EMPLOYEES IN JULY 2014. AJWS IS CONTINUING TO WORK WITH INSIDENGO TO REVIEW AND UPDATE THE COMPENSATION PHILOSOPHY IN 2015. IN PRIOR YEARS HUMAN RESOURCES HIRED AN INDEPENDENT THIRD PARTY, ORC WORLDWIDE, TO EVALUATE AJWS'S JOB AND PAY STRUCTURE AND TO ASSESS INTERNAL EQUITABILITY AND EXTERNAL COMPETITIVENESS OF STAFF SALARIES. USING A COMBINATION OF PUBLISHED COMPENSATION SURVEY SOURCES, ORC COMPARED AJWS SALARIES WITH MARKET SALARIES IN SIMILARLY SIZED NON-PROFIT ORGANIZATIONS AT THE AVERAGE, 25TH, 50TH, 65TH, AND 75TH PERCENTILES. USING THIS 432212 08-27-14 Schedule O (Form 990 or 990-EZ) (2014) 117 09511109 759915 6820018 2014.04030 AMERICAN JEWISH WORLD SERVI 68200182

ANALYSIS, THE FIRM DEVELOPED A COMPENSATION STRUCTURE, WHICH WAS THEN USED TO INFORM ORGANIZATION-WIDE COMPENSATION DECISIONS.

AJWS HAS A COMPENSATION COMMITTEE COMPRISED OF MEMBERS OF THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES. THE COMPENSATION COMMITTEE'S RESPONSIBILITIES INCLUDE: OVERSIGHT FOR THE COMPENSATION PHILOSOPHY FOR THE ORGANIZATION; RELIANCE ON THIRD PARTY COMPARABILITY DATA TO REVIEW AND APPROVE COMPENSATION TRANSACTIONS FOR THE CEO AND OTHER KEY EMPLOYEES OF THE ORGANIZATION AS DEFINED BY THE IRS; REVIEW AND MONITOR ACTIONS PROPOSED BY CEO FOR HIS/HER DIRECT REPORTS; AND DOCUMENT BASIS FOR COMPENSATION DECISIONS. THE COMPENSATION COMMITTEE PROVIDES ANNUAL UPDATES TO THE FULL BOARD OF TRUSTEES.

ANNUALLY THE CEO'S SALARY IS APPROVED BY THE COMPENSATION COMMITTEE OF THE AJWS BOARD OF TRUSTEES. WHEN DETERMINING THE CEO'S SALARY, THE COMPENSATION COMMITTEE REVIEWS COMPARABLE EXECUTIVE DIRECTOR SALARIES AT NONPROFIT ORGANIZATIONS IN VARIOUS COMPARABLE SECTORS INCLUDING: INTERNATIONAL DEVELOPMENT, JEWISH COMMUNAL WORK, SOCIAL SERVICE, HUMAN RIGHTS, AND COMPENSATION SURVEYS AND FROM FORM 990S FROM OTHER ORGANIZATIONS OF COMPARABLE OR LARGER BUDGETS. THIS DATA, IN CONJUNCTION WITH THE BOARD CHAIR'S PERFORMANCE EVALUATION OF THE CEO, INFORM THE COMPENSATION COMMITTEE'S SALARY RECOMMENDATIONS.

 THE EXECUTIVE TEAM (EXECUTIVE VICE PRESIDENT, ALL VICE PRESIDENTS AND OTHER

 KEY EMPLOYEES) SALARIES ARE DETERMINED IN PARTNERSHIP BETWEEN THE CEO AND

 EXECUTIVE VICE PRESIDENT (EXCLUDING THE EXECUTIVE VICE PRESIDENT'S OWN

 SALARY WHICH IS DISCUSSED BETWEEN THE CEO AND CHAIR OF THE BOARD OF

 TRUSTEES). PERFORMANCE REVIEWS, COMPLEXITY OF POSITION, EXPERIENCE LEVEL

 AND THE THIRD PARTY APPROVED AJWS COMPENSATION STRUCTURE ARE THE ANCHORS

 USED TO INFORM THE AFOREMENTIONED SALARY RECOMMENDATIONS. ONCE SALARY

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 Schedule O (Form 990 or 990-EZ) (2014)

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| Schedule O (Form 990 or 990-EZ) (2014) | Page 2 |
|--|---|
| Name of the organization AMERICAN JEWISH WORLD SERVICE, INC. | Employer identification number 22-2584370 |
| RECOMMENDATIONS ARE MADE FOR THESE POSITIONS, THE HUMAN R | ESOURCES & |
| ADMINISTRATIVE SERVICES REVIEWS ALL RECOMMENDATIONS AND T | HEN PREPARES A |
| PACKAGE OF INFORMATION FOR THE MEMBERS OF THE COMPENSATIO | N COMMITTEE TO |
| REVIEW AND APPROVE. THE COMPENSATION DECISIONS ARE ALL DO | CUMENTED AND |
| SIGNED OFF ON BY THE MEMBERS OF THE COMPENSATION COMMITTE | E. A COPY OF THE |
| APPROVAL IS PLACED IN EACH APPLICABLE EMPLOYEE'S PERSONNE | L. MEETING MINUTES |
| FOR THE COMPENSATION COMMITTEE ARE ALSO KEPT FOR RECORD. | |
| | |
| FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY | OF FORM 990: |

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

FORM 990, PART VI, SECTION C, LINE 19:

AMERICAN JEWISH WORLD SERVICE (AJWS) MAKES ITS GOVERNING DOCUMENTS,

CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE

PUBLIC UPON REQUEST.

FORM 990, PART VII

THE ORGANIZATION, IN A FULL TRANSPARENCY POSTURE TO REPORTING, IS

REPORTING ALL BENEFITS IN FULL IN PART VII, COLUMN F, AND NOT APPLYING

THE \$10,000 PER ITEM EXCEPTION FOR CERTAIN BENEFITS.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ACTUARIAL LOSS ON CHARITABLE GIFT ANNUITY OBLIGATION

-37,165.

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Schedule O (Form 990 or 990-EZ) (2014)

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Depreciation and Amortization Detail FORM 990 PAGE 10

| in service | | e No. | Cost or other basis | Basis reduction | Accumulated depreciation/amortization | Current year deduction |
|------------|---|--|---|--|--|---|
| | | | 948 809 | | 790 444 | 78,862 |
| | | | | | | |
| | |) 16 | 839,551. | | 599,996. | 27,873 |
| | | | 400 085 | | 377 611 | 14,734 |
| | | | 100,0031 | | 577,011. | 11,75 |
| | | | 718,618. | | 530,569. | 71,092 |
| | | | 1 701 270 | | 1 382 9/3 | 183,64 |
| | | | | | 1,302,943. | 105,04 |
| | | | 4,698,342. | 0. | 3,681,563. | 376,202 |
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| | | | Current vear soction 170 | (D) - Accot diacos | sed. | |
| | placed in service COMPUTER E VARIESSI COMPUTER S VARIESSI OFFICE EQU VARIESSI OFFICE FUR VARIESSI LEASEHOLD VARIESSI | placed in serviceINC Sec.or ratCOMPUTEREQUIPMENVARIESSL3.00COMPUTERSOFTWARIVARIESSL4.00OFFICEEQUIPMENTVARIESSL5.00OFFICEFURNITUREVARIESSL10.0LEASEHOLDIMPROVIVARIESSL0.00 | placed in service indicate (Inc. Sec. or rate (Inc. indicate (Inc. COMPUTER EQUIPMENT VARIESSI 3.00 16 COMPUTER SOFTWARE & WEI VARIESSI 4.00 16 OFFICE EQUIPMENT VARIESSI 5.00 16 0 OFFICE FURNITURE VARIESSI 5.00 16 0 OFFICE FURNITURE VARIESSI 10.0016 16 0 VARIESSI .000 16 1 10 16 VARIESSI .000 16 1 10 10 VARIESSI .000 16 1 10 10 VARIESSI .000 16 10 10 10 I I I I I I I I I I I I I I I I I I I I I I <tdi< td=""> I</tdi<> | placed intervice i | pieced Pieced Pieced Pieced Pieced Pieced UNARLESSL 3.00 16 948,809. OCOMPUTER COMPUTER SOFTWARE & WEBSITE VARIESSL 4.00 16 839,551. OFFICE FORMARE & WEBSITE VARIESSL 4.00 16 839,551. OFFICE FORMARE WEBSITE VARIESSL 10.00 16 1791,279. Image: Software Orestand Orestan | Instruction Interval Interval <thinterval< th=""> Interval Interval</thinterval<> |

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| Form 8868 | B |
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(Rev. January 2014)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

► X

| Department of the Treasur |
|---------------------------|
| Internal Revenue Service |

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 ·

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (*e-file*) . You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.
Enter filer's identifying number

| Type or | Name of exempt organization or other filer, see instructions. | Employer identification number (EIN) or | | |
|--|--|---|--|--|
| File by the due date for filing your return. See instructions. | AMERICAN JEWISH WORLD SERVICE, INC. | 22-2584370 | | |
| | Number, street, and room or suite no. If a P.O. box, see instructions. 45 WEST 36TH STREET | Social security number (SSN) | | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. | | | |

NEW YORK, NY 10018

| Enter the Return code for the return that this application is for (file a s | separate application for each return) | Γ | 0 | 1 |
|---|---------------------------------------|---|---|---|
| | | | | |

| Application | | Application | | Return | | | | | | | |
|--|------------|-----------------------------------|----|--------|------|--|--|--|--|--|--|
| Is For | | Is For | | | Code | | | | | | |
| Form 990 or Form 990-EZ | | Form 990-T (corporation) | | | 07 | | | | | | |
| Form 990-BL | | Form 1041-A | | | 08 | | | | | | |
| Form 4720 (individual) | | Form 4720 (other than individual) | | | 09 | | | | | | |
| Form 990-PF | | Form 5227 | | | 10 | | | | | | |
| Form 990-T (sec. 401(a) or 408(a) trust) | | Form 6069 | | | 11 | | | | | | |
| Form 990-T (trust other than above) | | Form 8870 | | | 12 | | | | | | |
| • The books are in the care of ► 45 WEST 36TH STREET, 11TH FLOOR - NEW YORK, NY 10018 | | | | | | | | | | | |
| Telephone No. ► 212-792-2838 Fax No. ► | | | | | | | | | | | |
| If the organization does not have an office or place of business in the United States, check this box | | | | | | | | | | | |
| • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this | | | | | | | | | | | |
| box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs of all members the extension is for. | | | | | | | | | | | |
| I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until <u>DECEMBER 15, 2015</u>, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ or ▶ tax year beginning <u>MAY 1, 2014</u>, and ending <u>APR 30, 2015</u>. | | | | | | | | | | | |
| If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period | | | | | | | | | | | |
| 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, nonrefundable credits. See instructions. | , or 6069, | enter the tentative tax, less any | 3a | \$ | 0. | | | | | | |
| b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and | | | | | | | | | | | |
| estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b | | | | | | | | | | | |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, | | | | | | | | | | | |
| by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ | | | | | 0. | | | | | | |
| Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions. | | | | | | | | | | | |
| LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev. 1-20 | | | | | | | | | | | |
| 121 | | | | | | | | | | | |

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