TIN: 53-0217164

Form **990**

Department of the

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

Open to Public Inspection

Interna	,	(ODLIO							
S erv F 0	the	2022 calen	dar year, or tax year beginning 10-01-2022 , and ending 09-30-2023						
B Chec	k if an	pplicable: O	C Name of organization American Israel Public Affairs Committee			D Employer i	dentificati	on number	
	ss ch		% SUZANNE KINZER			53-02171	64		
	chan	-	Doing business as						
	returr								
	ided re	erminated (eturn (Number and street (or P.O. box if mail is not delivered to street address) Root 251 H STREET NW	m/suite		E Telephone	number		
Appli	cation	pending	City or town, state or province, country, and ZIP or foreign postal code			(202) 639	9-5200		
			WASHINGTON, DC 20001						
						G Gross rece	ipts \$ 115	,142,143	
			F Name and address of principal officer: HOWARD KOHR	H(a) Is this	a group return	n for		
			251 H STREET NW			dinates?		🗆 Yes 🛂 No	
			WASHINGTON, DC 20001	H(b) Are al includ	l subordinates ed?		☐ Yes ☐No	
l lax	-exem	npt status:	□ 501(c)(3)		If "No	" attach a list.	See instr	uctions.	
J We	bsite	e: 🕨 WW	W.AIPAC.ORG	H(c) Group	exemption nu	mber 🕨		
						1	• • •		
K Form	of org	ganization: 🔽	Corporation Trust Association Other	LY	ear of format	ion: 1963	M State of	of legal domicile: DC	
	ud I	C							
Pa	rt I	Summ Briefly desc	ribe the organization's mission or most significant activities:						
an a			THEN AND EXPAND THE U.SISRAEL RELATIONSHIP IN WAYS THAT ENHANCE	THE SEC	JRITY OF T	HE UNITED ST	ATES AN	ID ISRAEL.	
ě									
Ë									
Governance	2	Check this	box ▶ □						
Ğ	3	Number of	voting members of the governing body (Part VI, line 1a)				3	44	
×8 ∽	4	Number of	independent voting members of the governing body (Part VI , line 1b)				4	42	
Activities &	5	Total numb	ber of individuals employed in calendar year 2022 (Part V , line 2a)		5	376			
Ě	6	Total numb	ber of volunteers (estimate if necessary)				6	47	
ΑC	7a	Total unrel	ated business revenue from Part VIII , column (C), line 12				7a	0	
	b	Net unrelat	ted business taxable income from Form 990-T, Part I, line 11				7b	0	
					Pr	ior Year		Current Year	
9	8	Contribution	ons and grants (Part VIII , line 1h)			71,071,1	78	72,023,025	
ne Pu	9	Program s	ervice revenue (Part VIII , line 2g)			953,5	504	4,742,794	
Revenue	10	Investmen	t income (Part VIII , column (A), lines 3, 4, and 7d)			1,305,7	'81	2,635,185	
	11	Other reve	nue (Part VIII , column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			182,5	33	0	
	12	Total rever	nue—add lines 8 through 11 (must equal Part VIII , column (A), line 12)			73,512,9	196	79,401,004	
	13	Grants and	similar amounts paid (Part IX , column (A), lines 1-3)			10,0	000	0	
	14	Benefits pa	aid to or for members (Part IX , column (A), line 4)	Ī			0	0	
88	15	Salaries, of	ther compensation, employee benefits (Part IX, column (A), lines 5-10)	Ī		38,071,0	35	40,766,306	
us(16a	Profession	nal fundraising fees (Part IX , column (A), line 11e)	Ī		133,1	24	132,886	
Exp enses	b	Total fundrai	ising expenses (Part IX , column (D), line 25) ▶21,701,936	Ī					
Ø	17	Other expe	enses (Part IX , column (A), lines 11a-11d, 11f-24e)	ľ		40,888,6	10	42,181,870	
	18	Total expe	nses. Add lines 13–17 (must equal Part IX , column (A), line 25)	ţ		79,102,7	'69	83,081,062	
	19	Revenue le	ess expenses. Subtract line 18 from line 12	ļ		-5,589,7	73	-3,680,058	
e of					Beginning	of Current Year		End of Year	
Net Assets or und Balances									
Bal	20	Total asset	ts (Part X , line 16)			163,965,5			
ot A	21	Total liabili	ities (Part X , line 26)			50,525,2	289	59,478,666	
2.7	22	Not accete	or fund halances. Subtract line 21 from line 20	ſ		113 440 2	34	111 117 507	

Part II Signature Block

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

Signature of officer Signature in the company of the company o	24-08-08					
Part Property P						
aid reparer Use Farrir name 000 USA Farrir name						
reparer Use inly Firms admiss						
reparer Use rinty Firms and selection between the property shown above? See Instructions. Firms address ▶ 8401 GREENSBORD DRIVE 800 MICLEAR VA 22102 When IRS discuss this return with the preparer shown above? See Instructions. Cat. No. 11282Y Page 2 Imm 990 (2022) Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III. Briefly describe the organization's mission: STRENGTHEN AND EXPAND THE U.SISRAEL RELATIONSHIP IN WAYS THAT ENHANCE THE SECURITY OF THE UNITED STATES AND ISRAEL. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? If Yes, describe these new services on Schedule 0. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? If Yes, describe these changes on Schedule 0. Did the organization case conducting, or make significant changes in how it conducts, any program services? If Yes, describe these changes on Schedule 0. Describe the organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for eacl service reported. 10 (Code:) (Expenses \$ 14,922,162 including grants of \$ 0) (Revenue \$ 0) (Reve						
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e Total program service expenses ▶ 34,880,341 Page 3						
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	F					
Part IV Checklist of Required Schedules						
	Yes 1					
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	١					
	Ver					
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. See	Yes					
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office?	Yes					
If "Yes," complete Schedule C, Part I 🐿	\vdash					
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						
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar						
amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 🥵						

		5		NO
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			No
7	Schedule D,Part I	6 7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	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	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
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	Yes	
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		No
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		No
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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 📆	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX , column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		No
16	Did the organization report on Part IX , column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
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. See instructions	17	Yes	
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
			Form 9	90 (2022)
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Form	990 (2022)			Page 4
Pai	Checklist of Required Schedules (continued)			
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	Yes	No No
23	Did the organization answer "Yes" to Part VII , Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a			<u></u>
		24a		No

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D	uia tne 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		No
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		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
ь 36	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)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
27	If "Yes," complete Schedule R, Part V , line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for <i>Part VI</i> , lines 11b and 19? <i>Note.</i> All Form 990	37		No
	filers are required to complete Schedule O	38	Yes	
Pa	rt 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 150			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	(0000)
			Form 9	990 (2022)
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Form '	990 (2022)			Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account securities account or other financial account)?	4a	Yes	

	ioreign country (such as a bank account, securities account, or other infancial accounty:			ļ
b	If "Yes," enter the name of the foreign country: If			
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			
		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
		711		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	,			
12a	, , , , , , , , , , , , , , , , , , , ,	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	Yes	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17		
			Form 9	90 (2022)

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Part VI

	oneon in concease o containe a recoponed or note to any line in the case of th		_	
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 44			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 42			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the			
b	governing body?	7a 7b	Yes	No
	the governing body?	/6		NO
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII , Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule 0	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to	10a		No
b	10b			
11a	11a	Yes		
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this</i>	12b	Yes	
	was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
	AL , AR , CA , FL , GA , HI , IL , KS , KY , MD , MA , I NC , ND , OR , PA , RI , SC , TN , UT , VA , WV , WI	MN, MS	, NH , N.	J, NY,
18	Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website ✓ Another's website □ Upon request □ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: SUZANNE KINZER 251 H STREET NW WASHINGTON, DC 20001 (202) 639-5200			

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

V

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for	box, ι	on (do not ch unless persor and a direct	eck i is b or/ti	oth a	en offic	cer	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	organization and related organizations
(1) Richard L Fishman	40.0	х		х				1,216,046	0	76,715
Co Chief Executive Officer	5.0							.,,,	·	
(2) Howard Kohr	40.0	x		х				1,223,915	0	66,954
Chief Executive Officer	0.0							.,,		
(3) Arne Christenson MD of Policy anD POLITICS	40.0			х				730,777	0	76,715
(4) Brian T Shankman	40.0								_	
Chief Strategic Director	0.0					Х		676,004	0	71,813
(5) Elliot Brandt MD of National Affairs	40.0				х			681,468	0	60,432
(6) Elias Saratovsky	0.0 40.0									
Director of Regional Affairs						Х		671,122	0	70,331
(7) Michael Sachs	40.0									
Atlantic States Director	0.0					Х		666,064	0	74,093
(8) Robert H Bassin	40.0								_	
CEO United Democracy Project	5.0					Х		620,656	0	76,715
(9) Philip S Friedman General Counsel & Director	40.0				х			617,619	0	32,141
(10) Jeremy Rider	0.0 40.0									
Dir of Events & Creative srvs	0.0					Х		551,137	0	74,083
(11) Suzanne M Kinzer	40.0				T					
Chief Financial Officer	5.0			Х				496,241	0	57,170
(12) Samantha C Margolis	40.0				T					
Chief Administrative Officer	0.0				Х			429,341	0	48,901
(13) Michael Tuchin	4.0			,,						
President, Board of Directors	4.0	X		Х				0	0	0
(14) Betsy Berns Korn	4.0			х				0	0	0
Chairperson of Board of Dir.	4.0	Х		Ĺ						
(15) Mark Rubin	8.0									

Secretary/Treasurer	0.0	Х	х		0	0	0
(16) Robert Asher Board Member	8.0	Х			0	0	0
(17) Ronald Bakalarz Board Member	8.0	Х			0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for	box, ι	(Con (do not ch unless person and a direct	eck r is b or/tr	oth a	an offic	cer	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	2/1099- MISC/1099-NEC)	2/1099- MISC/1099-NEC)	organization and related organizations
(18) Richard Bassuk	4.0	. x						0	0	0
Board Member	4.0	. ^						U	U	
(19) Susie Bender	8.0	. x						0	0	0
Board Member	0.0	. ^						U	U	
(20) Donna Bender	8.0							0	0	0
Board Member	0.0	. X							U	U
(21) Norman Brownstein	8.0							0		0
Board Member	0.0	. X						0	0	U
(22) Sarit Catz	8.0									
Board Member	0.0	. X						0	0	0
(23) Robert Cohen	4.0									
Board Member	8.0	. X						0	0	0
(24) Steve Demby	8.0									
Board Member	0.0	. X						0	0	0
(25) Melvin Dow	8.0							_		
Board Member	0.0	. X						0	0	0
(26) Matt Engel	8.0									
Board Member	0.0	. X						0	0	0
(27) Alan Franco	8.0									
Board Member	0.0	. X						0	0	0
(28) Mort Fridman	8.0									
Board Member	0.0	. X						0	0	0
(29) Amy Friedkin	8.0									
Board Member	0.0	. X						0	0	0
(30) Anita Friedman	8.0									
Board Member	0.0	. X						0	0	0
(31) Howard Friedman	4.0									
Board Member	4.0	. X						0	0	0
(32) Steve Grossman	8.0									
Board Member	0.0	. X						0	0	0
(33) Bernie Kaminetsky	8.0									
Board Member	0.0	. X						0	0	0
(34) Michael Kassen	4.0									
Board Member	4.0	. X						0	0	0
(35) Alan Levow	4.0		<u> </u>							
Board Member	4.0	. X						0	0	0
(36) Edward Levy Jr	8.0	 				l				
Board Member	0.0	. X						0	0	0
(37) Dianne Lob	8.0					l				
		. X	I			l	l	0	0	0

393 Bernock Mancherharan	(38) Yana Lukeman	8.0	V						0	_	
South Member	Board Member		. х						U	U	
Description		8.0									
South Member	Board Member		. x						0	0	
Soard Member 0.0	(40) Rick Matros	8.0									
49 Let y Micro 8.0			. X						0	0	
Soard Member 0.0	(41) Larry Mizel	8.0									
40 First Newberry	Board Member		. X						0	0	
Board Member	(42) Erika Neuberg	8.0									
Sound Member Sou	Board Member		. X						0	0	
Source	(43) Yehuda Neuberger										
Source Member Source Memb	Board Member		. X						0	0	
Seard Member	(44) Kevin Pailet	8.0									
Sound Member Sou	Board Member		. X						0	0	
Board Member	(45) Sandy Perl	8.0									
Sourd Member Sou	Board Member		. X						0	0	
Sourd Member	(46) Bob Pincus	8.0									
47) Lillar Prinkus	Board Member		. X						0	0	
Board Member	(47) Lillian Pinkus	_									
48) Prili Riberts 8.0			. X						0	0	
Board Member	(48) Phil Roberts	_									
49) Lee Rosenberg 4.0 Board Member 4.0 Si) Debise Rudy 8.0 Board Member 9.0 Board Member 9	Board Member		. X						0	0	
Board Member	(49) Lee Rosenberg										
Son			. X						0	0	
Board Member	(50) Debbie Rudy										
Solid Member Sol	Board Member		. X						0	0	
Board Member	(51) Harriet Schleifer								1	_	
Source Single Source			. х						0	0	
Board Member 0.0	(52) Bonnie Siegel	8.0									
Soard Member Soar	Board Member		. X						0	0	
Board Member 0.0	(53) Hilary Smith Kapner	8.0									
Solution			. X						0	0	
Board Member 0.0	(54) Jamie Sprayregen	8.0									
Seard Member Sea	Board Member	0.0	. X						0	0	
Board Member 0.0	(55) David Steiner										
Search Member	Board Member		. X						0	0	
Board Member 0.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(56) David Sterling	8.0									
Soard Member 4.0	Board Member		. X						0	0	
Board Member 4.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(57) David Victor	4.0									
Second Member Second Membe	Board Member		. X						0	0	
Board Member 0.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(58) Tim Wuliger										
Soard Member Soa	Board Member		. X						0	0	
Board Member 0.0 1b Sub-Total	(59) Jan Zakowski	_									
1b Sub-Total		0.0	. X						0	0	
c Total from continuation sheets to Part VII, Section A						•					
d Total (add lines 1b and 1c)						▶				<u> </u>	
compensation from the organization ► 187						▶		8,580,390		0	786,06
compensation from the organization ► 187			sted ah	ove) who rece	ived m	ore than	\$100	0.000 of reportable	e	l .	
Т Т	compensation from the organization 187		cica ab	, 11110 1000		c aluli	. 🔾 100	s,coo or reportabl	-		
1 1, 1 1,	<u> </u>										

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

Section B. Independent Contractors

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

· · · · · · · · · · · · · · · · · · ·	(A) Name and business address	•	(B) Description of services	(C) Compensation
OnMessage Inc, 705 Melvin Avenue 105			Digital Consulting	2,891,876

ANNAPOLIS, MD 21401						
Rational 360, 1828 L Street NW 640 WASHINGTON, DC 20036				Digital Consul	ting	2,809,429
MTX Group, 1450 Western Avenue Suite 304 ALBANY, NY 12203				Digital Consul	ting	1,692,676
AB Data Ltd, 600 AB Data Drive MILWAUKEE, WI 53217				Direct Mail		992,242
Foremost Glatt Kosher Caterers Inc, 65 Anderson Avenue MOONACHIE, NJ 07074				Catering Servi	ces	959,810
2 Total number of independent contracto	ors (including b	out not limited to those	listed above) who rece	ived more than \$100,0	00 of compensation	
from the organization > 17						Form 990 (2022)
						,
			Page 9			
Form 990 (2022)						Page 9
Part VIII Statement of Revenue						
Check if Schedule O conta	ins a response	or note to any line in t		(=)		
			(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
				exempt function	business revenue	excluded from tax under sections
				revenue		512 - 514
Federated campaigns	1a					
Contributions, Cifts, Grants,	16					
and Membership dues Bimilar	1b					
Amounts c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e					
f All other contributions, gifts, grants, and similar amounts not included above	1f					
72,023,025						
g Noncash contributions included in lines 1a - 1f:\$						
11.0	1g					
3,837,677						
h Total . Add lines 1a-1f		72,023,025				
		Business Code				
2a EDUCATIONAL SERIES		900099	4,742,794	4,742,794		
- A						
Φ.						
Service Revenue						
ж т						
Program						
por						
f All other program service revenue.						
9 Total. Add lines 2a-2f		4,742,794				
3 Investment income (including divide			I	I		T
similar amounts)		▶'	2,595,090			0 2,595,090
4 Income from investment of tax-exen		: <u>-</u>	0			
5 Royalties			0			<u> </u>
	(i) Real	(ii) Personal				
6a Gross rents 6a						
b Less: rental						I

С	Rental income or (loss)	6с		0		0				
	d Net rental income o		2)	U		<u> </u>	0			
	u Net fental income o	(105		•			Ŭ			
		١, ١	(i) Securities	3	(ii) Other	_				
78	Gross amount from sales of	7a	35,78	1,234						
	assets other than inventory		·							
ge	•					_				
æ	Less: cost or other basis and sales	7b	35,74	1,139						
ě	expenses									
<u> </u>	Gain or (loss)	7c	4	0,095						
Other Revenue	d Net gain or (loss) .	<u> </u>			.	40.	095			40,095
ŏ	Gross income from fund	Iraisino				 				,
1	including \$		of							
	contributions reported of See Part IV , line 18		1c).							
	See Talt IV, ille 10 .	•		За		0				
	b Less: direct expense	s.	[8	3b		0				
	c Net income or (loss)	from	fundraising even	ts .	•		0			
			Γ							
9a	Gross income from ga See Part IV , line 19									
	See Part IV, line 19			9a		0				
	b Less: direct expense	s.	9)b		0				
	c Net income or (loss)	from	gaming activities	· ·	•	<u> </u>	0			
10	a Gross sales of invent returns and allowand									
				0a		0				
	b Less: cost of goods :	sold	10	0b		0				
	c Net income or (loss)	from	sales of inventor	y .		<u> </u>	0			
					Business Code					
11	la									
	b									
	U									
OtherR	evenueMiscAmt									
	d All other revenue .									
	e Total. Add lines 11a-			I_						
	e Total. Add lines 11a	TTU		•			0			
12	Total revenue. See in	struc	tions	•	•	- 79,401,i	∩∩ ⊿	4,742,794	0	2,635,185
						7 5 7 13 17		1,7 12,7 7		Form 990 (2022)
						_ Page 10				
	90 (2022) ——————————————————————————————————									Page 10
Part			ctional Expens			all actions All athor		ganizations must comp	lata asluman (A)	
	Section 501(c)	(3) ai	id 501(c)(4) orga	IIIZatio	ons must complete	all columns. All other	org	gariizations must comp	lete column (A).	
				nse o	r note to any line ir	this Part IX		<u> </u>	(0)	. U
	include amounts repo 9b, and 10b of Part VI		on lines 6b,			(A) Total expenses	Pr	(B) ogram serviceexpenses	(C) Management and	(D) Fundraising
	rants and other assista		o domestic organ	izatio	ne and domestic	0	4	- 9	general expenses	expenses
	overnments. See Part I				ns and domestic	Ü				
2 G	rants and other assista	ince to	o domestic indivi	duals.	See Part IV , line	0	┢			
2:	2	•								
3 G	rants and other assista	ince to	o foreian oraaniza	ations	, foreign	0	╁			
g	overnments, and foreig	n indi	viduals. See Part	IV, lir	nes 15 and 16.					
		•		٠						
4 B	enefits paid to or for m	embe	rs	•		0	L			
	ompensation of curren					5,936,975		2,018,074	2,901,625	1,017,276
eı	mployees						1			

6 Compensation not included above, to disqualified persons (as defined

	(3)(B)				
7	Other salaries and wages	26,456,477	12,299,536	5,866,13	5 8,290,806
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,470,045	1,181,481	544,772	743,792
9	Other employee benefits	3,892,654	1,595,732	1,098,813	1,198,109
10	Payroll taxes	2,010,155	811,038	628,542	570,575
11	Fees for services (non-employees):				
а	Management	0			
b	Legal	245,526	8,474	234,92	1 2,131
С	Accounting	189,739	6,463	179,710	3,566
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	132,886			132,886
f	Investment management fees	232,668		232,668	3
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,810,971	1,020,941	1,243,990	546,040
12	Advertising and promotion	0			
13	Office expenses	2,280,853	803,619	837,162	2 640,072
14	Information technology	1,231,107	456,987	462,198	311,922
15	Royalties	0			
16	Occupancy	4,342,396	1,682,474	759,023	1,900,899
17	Travel	665,483	299,964	146,389	219,130
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings	12,107,128	6,994,242	1,998,756	3,114,130
20	Interest	1,656,779	702,085	441,084	513,610
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,577,653	1,499,907	896,52	1,181,221
23	Insurance	520,129	22,709	481,656	5 15,764
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
	a BAD DEBT EXPENSE	6,666,057		6,666,057	7
	b CONTRIBUTIONS TO UDP	2,000,000	2,000,000		
	c EDUCATIONAL PROG & DIRECT MAIL	1,917,206	618,104	78	3 1,299,024
,	d CONTRIBUTIONS TO CANDIDATES	786,500	786,500		
	e All other expenses	951,675	72,011	878,68	983
25	Total functional expenses. Add lines 1 through 24e	83,081,062	34,880,341	26,498,78	21,701,936
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation.Check here if following SOP 98-2 (ASC 958-720).				
					Form 990 (2022)
		Page 11			
	1 990 (2022)				Page 11
Р	art X Balance Sheet				
	Check if Schedule O contains a response or note to any line in this	Part IX			. 🗆
			(A) Beginning of yea	ar	(B) End of year
	1 Cash-non-interest-bearing		26,8	32,942 1	32,521,907
	2 Savings and temporary cash investments			0 2	0
	3 Pledges and grants receivable, net			0 3	0
	4 Accounts receivable, net		20,2	70,768 4	16,626,191
	5 Loans and other receivables from any current or former officer, dire employee, creator or founder, substantial contributor, or 35% contromember of any of these persons			0 5	0

60	7	Notes and loans receivable, net		0	7	0	
sset	8	Inventories for sale or use			0	8	0
SS	9	Prepaid expenses and deferred charges			5,140,327	9	4,738,935
A	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	62,457,266			
	b	Less: accumulated depreciation	10b	28,348,589	36,924,138	10c	34,108,677
	11	Investments-publicly traded securities .			71,481,584	11	68,311,510
	12	Investments-other securities. See Part IV, line 11 .			429,610	12	411,122
	13	Investments—program-related. See Part IV, line 11 .			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets. See Part IV, line 11			2,886,154	15	13,877,831
	16	Total assets. Add lines 1 through 15 (must equal line 3	33) .		163,965,523	16	170,596,173
	17	Accounts payable and accrued expenses			18,778,510	17	18,601,279
	18	Grants payable			0	18	0
	19	Deferred revenue			3,904,226	19	532,418
	20	Tax-exempt bond liabilities	-		0,50,7220	20	0
	21	Escrow or custodial account liability. Complete Part IV	of Sche	idule D	0	21	0
es		, ,					
<u>.</u>	22	Loans and other payables to any current or former office creator or founder, substantial contributor, or 35% contributor, or 3					
Liabilities		of these persons			0	22	0
	23	Secured mortgages and notes payable to unrelated thi	rd partie	s	16,964,677	23	16,180,573
	24	Unsecured notes and loans payable to unrelated third p	arties		0	24	0
	25	Other liabilities (including federal income tax, payables	to relate	ed third parties, and other	10,877,876	25	24,164,396
		liabilities not included on lines 17 - 24). Complete Part	nedule D				
	26	Total liabilities . Add lines 17 through 25			50,525,289	26	59,478,666
Balances		Organizations that follow FASB ASC 958, check here	✓	and complete lines 27, 28,			
an	27	32, and 33. Net assets without donor restrictions	92,567,626	27	93,820,003		
Sal	28			· · · · <u> </u>	20,872,608	28	17,297,504
	20	Net assets with donor restrictions		20,672,006	20	17,297,304	
Fund		Organizations that do not follow FASB ASC 958, check	here 🕨	and complete lines			
o	29	29 through 33. Capital stock or trust principal, or current funds				29	l İ
	30	Paid-in or capital surplus, or land, building or equipmen				30	<u> </u>
Assets							<u> </u>
As	31	Retained earnings, endowment, accumulated income, o	or otner	runas	110.110.001	31	44447.507
et	32	Total net assets or fund balances	•		113,440,234	32	111,117,507
Z	33	Total liabilities and net assets/fund balances			163,965,523	33	170,596,173
Form	n 990 (2	2022)		Page 12			Form 990 (2022) Page 12
	art XI	Reconcilliation of Net Assets					raye 12
	A1 C 7 C1	Check if Schedule 0 contains a response or note to	any line	in this Part XI			\square
_	T. 4					_	70 404 004
1		al revenue (must equal Part VIII , column (A), line 12) .				1	79,401,004
2		al expenses (must equal Part IX, column (A), line 25) .				2	83,081,062
3		enue less expenses. Subtract line 2 from line 1			• •	3	-3,680,058
4		assets or fund balances at beginning of year (must equa				4	113,440,234
5		unrealized gains (losses) on investments				5	1,357,331
6		ated services and use of facilities				6	
7		estment expenses				7	
8		r period adjustments				8	
9		er changes in net assets or fund balances (explain in Sch				9	
10	Net	assets or fund balances at end of year. Combine lines 3	through	9 (must equal Part X , line 32, col	umn (B))	10	111,117,507
Pa	art XII	Financial Statements and Reporting Check if Schedule O contains a response or note to	ony line	in this Part VII			

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

			res	NO
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	ĺ	No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated ba or both:	sis,		
	☐ 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 audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.I. Part 200, Subpart F?	R. 3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, expl why in Schedule O and describe any steps taken to undergo such audits.	ain 3b		
			Form 9	90 (202
	990 (2022) ditional Data	Detro	to F	
Au	attorial bata	Retur	n to For	m

Software ID: Software Version:

efile Public Visual Render ObjectId: 202442219349301469 - Submission: 2024-08-08 TIN: 53-0217164 OMB No. 1545-0047 Schedule B Schedule of Contributors (Form 990) ► Attach to Form 990, 990-EZ, or 990-PF. **2022** Department of the Treasury ► Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service **Employer identification number** Name of the organization American Israel Public Affairs Committee 53-0217164 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ☐ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

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

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

Cat. No. 30613X

Schedule B (Form 990) (2022)

purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

Name of organization American Israel Publ	n ic Affairs Committee	Employer iden 53-0217164	ification number
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		\$ RESTRICTED	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)
	Page 3		

53-0217164

Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	if additional space is needed.		
(a) No. from Part I	(b) Description of noncash proper	ty given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	
(a) No. from Part I	(b) Description of noncash proper	ty given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			\$	
(a) No. from Part I	(b) Description of noncash proper	ty given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			\$	
(a) No. from Part I	(b) Description of noncash proper	ty given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			\$	
(a) No. from Part I	(b) Description of noncash proper	ty given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			\$	
(a) No. from Part I	(b) Description of noncash proper	ty given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			\$	
		Page 4		Schedule B (Form 990) (2022
Name of org	3 (Form 990) (2022) anization ael Public Affairs Committee		Employer	Page identification number
Part III	Exclusively religious, charitable, etc., contributions the \$1,000 for the year from any one contributor. Componenting Part III, enter the total of exclusively religions once. See instructions.)	lete columns (a) through (e) gious, charitable, etc., contri	and the following line entry	(10) that total more than y. For organizations
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	iption of how gift is held
·	Transferee's name, address, and ZIP 4	(e) Transfer of gift	elationship of transferor to	o transferee
(a) No. from	(b) Purpose of aift	(c) Use of gift	(d) Descri	iption of how gift is held

Part I	(2) . 2. p. 20 2 . g	(0) 000 0. g	(3/ 2000) priori di moni ginti di moni
		(e) Transfer of gift	
	Transferee's name, address, and 2	ZIP 4 Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and z	(e) Transfer of gift ZIP 4 Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and 2	(e) Transfer of gift ZIP 4 Relation	nship of transferor to transferee
			Schedule B (Form 990) (2022

Dotum to Form

Additional Data

TIN: 53-0217164

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

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

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

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

	ection 501(c)(4), (5), or (6) organiz	ations: Complete Part III.		15 1 11 115		
	e of the organization ican Israel Public Affairs Committee			Employer identific	ation number	
				53-0217164		
Part	I-A Complete if the organizati	on is exempt under section 501(c) o	r is a section 527 organi	zation.		
1	Provide a description of the organizati activities."	on's direct and indirect political campaign	activities in Part IV. See inst	ructions for definition of "po	olitical campaig	n
2	Political campaign activity expenditure	es. See instructions	>	:	\$	12,343,239
3	Volunteer hours for political campaign	activities. See instructions				
Part	I-B Complete if the organizati	on is exempt under section 501(c)(3	3).			
1	Enter the amount of any excise tax inc	urred by the organization under section 49	955	•	\$	
2	Enter the amount of any excise tax inc	urred by organization managers under sec	ction 4955	▶ :	\$	
3	If the organization incurred a section 4	1955 tax, did it file Form 4720 for this year	?		☐ Yes	□ No
4a	Was a correction made?					
L	If "Yes," describe in Part IV.				☐ Yes	□ No
b Part	•	on is exempt under section 501(c), e	excent section 501(c)(3)			
1		the filing organization for section 527 exe	. ,,,,		ċ	10,343,239
2	, , ,	tion's funds contributed to other organization	•		\$	10,343,239
-			nono for occitori ozi exempt	i function detivities	\$	2,000,000
3	Total exempt function expenditures. A	•	\$	12,343,239		
4	Did the filing organization file Form 11		Ÿ			
-					Yes	□ No
5	organization made payments. For each contributions received that were prom	oyer identification number (EIN) of all sect h organization listed, enter the amount pai ptly and directly delivered to a separate po s needed, provide information in Part IV.	d from the filing organization	n's funds. Also enter the am		
(a) Na	ime	(b) Address) Amount paid from filing organization's funds. If none, enter -0	(e) Amount contributions promptly ar delivered to political orga none, en	received and oddirectly a separate inization. If
(1) AIP	AC PAC	251 H StREET NW Washington, DC 20001	87-3836092	4,381,943		0
(2) Uni project	ted Democracy	200 MASSACHUSETTS AVE NW 440 Washington, DC 20001	87-4162668	2,000,000		0
3						
4						
5						
6						
For Pap	erwork Reduction Act Notice, see the instruc	L tions for Form 990.	Cat. No.	50084S	Schedule C (Fo	orm 990) 2022
_					•	•

Schedule C (Form 990) 2022 Page 2

Page 2

A (check if the filing organization belongs to an affiliated expenses, and share of excess lobbying expend	group (and list in Part IV itures).	each affiliated group	o member's nam	ie, address, EIN,	
В	Check Great if the filing organization checked box A and "limited by the control of the contro	•	apply.			
	Limits on Lobbying E (The term "expenditures" means am				(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass ro	oots lobbying)				
b	Total lobbying expenditures to influence a legislative body (direc	et lobbying)				
С	Total lobbying expenditures (add lines 1a and 1b)					
	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1c and 1d)	L				
	Lobbying nontaxable amount. Enter the amount from the follow columns.	ing table in both				
	If the amount on line 1e, column (a) or (b) is:	e lobbying nontaxable a	mount is:			
	Not over \$500,000 209	6 of the amount on line 1e.				
	Over \$500,000 but not over \$1,000,000 \$10	00,000 plus 15% of the exces	s over \$500,000.			
	Over \$1,000,000 but not over \$1,500,000 \$17	5,000 plus 10% of the exces	s over \$1,000,000.			
	Over \$1,500,000 but not over \$17,000,000 \$22	25,000 plus 5% of the excess	over \$1,500,000.			
	Over \$17,000,000 \$1,	000,000.				
g	Grassroots nontaxable amount (enter 25% of line 1f)					
h	Subtract line 1g from line 1a. If zero or less, enter -0					
i	Subtract line 1f from line 1c. If zero or less, enter -0					
	If there is an amount other than zero on either line 1h or line 1i, osection 4911 tax for this year?	•				☐ Yes ☐ No
	(Some organizations that made a columns below. See	the separate instruc	tion do not have to tions for lines 2a t	through 2f.)	of the five	
	Lobbying Exp	penditures During 4-1	ear Averaging Pe	riod		
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
с	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
					Sche	edule C (Form 990) 2022
		Page 3 -				
0 - 1	dula 0 (Farma 200) 2000					_
	dule C (Form 990) 2022 art II-B Complete if the organization is exempt und	ler section 501(c)(3)	and has NOT filed	l Form 5768 (election under	Page 3
	section 501(h)).				(a)	(b)
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV	' a detailed description o	f the lobbying activity	:	Yes N	
1	During the year, did the filing organization attempt to influence attempt to influence public opinion on a legislative matter or r			ncluding any		
а	Volunteers?					
a b	Paid staff or management (include compensation in expense		rough 1i)?			
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
-						

f	Grants to other organizations for lobb	ying purposes?		i i	1		
g	•	affs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, cor	nventions, speeches, lectures, or any similar means?					
i	Other activities?						
j	Total. Add lines 1c through 1i						
2a	Did the activities in line 1 cause the or	ganization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax in	curred under section 4912					
С	If "Yes," enter the amount of any tax in	curred by organization managers under section 4912					
d	If the filing organization incurred a sec	ction 4912 tax, did it file Form 4720 for this year?					
Pa	rt III-A Complete if the organi	zation is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)((6).				
						Yes	No
1	• • •	ues received nondeductible by members?			1		
2	Did the organization make only in-hou	se lobbying expenditures of \$2,000 or less?			2		
3	· · · · · · · · · · · · · · · · · · ·	er lobbying and political expenditures from the prior year?			3		
Pa		zation is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)((6) and	l if eithe	r (a) E	вотн	Part
1		answered "No" OR (b) Part III-A, line 3, is answered "Yes."	1	1			
2	·	g and political expenditures (do not include amounts of political expenses for which the	<u> </u>				
	section 527(f) tax was paid).	5 L					
а			2a				
b	· · · · · · · · · · · · · · · · · · ·		2b				
С			2c				
3		6033(e)(1)(A) notices of nondeductible section 162(e) dues.	3				
4	If notices were sent and the amount o	n line 2c exceeds the amount on line 3, what portion of the excess does the organization stimate of nondeductible lobbying and political expenditure next year?					
	3	stimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and politi	cal expenditures. See Instructions	5				
P	art IV Supplemental Informa	·					
		A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2	(see in	structions	s), and	Part II-	·B, line
	Return Reference	Explanation	,				
SCHE	DULE C, PART I-A, LINE 1:	AIPAC PAC - IN DECEMBER 2021, AIPAC FORMED A CONNECTED POLITICAL ACTION COPUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE (AIPAC PAC), PURSUANT ELECTION CAMPAIGN ACT (FECA) AND THE REGULATIONS OF THE FEDERAL ELECTION A 527 POLITICAL ORGANIZATION UNDER THE INTERNAL REVENUE CODE (IRC) AND IS GITHE FECA AS A SEPARATE SEGREGATED FUND (SSF), MORE COMMONLY REFERRED TO ACTION COMMITTEE (PAC)*. THE PURPOSE OF THE AIPAC PAC IS TO SUPPORT CANDID ARE SUPPORTIVE OF A STRONG U.S ISRAEL RELATIONSHIP. EFFECTIVE DECEMBER 16 AIPAC PAC HAVE BEEN INCLUDED IN THE OPERATIONS OF AIPAC. UNITED DEMOCRACY INCORPORATED AS A NOT-FOR-PROFIT CORPORATION ORGANIZED UNDER THE LAWS OUT IS AFFILIATED WITH AIPAC. IN JANUARY 2022, UDP FILED ITS STATEMENT OF ORGELECTION COMMISSION (FEC). UDP IS A 527 POLITICAL ORGANIZATION UNDER THE IRC LAWS OF THE FECA AS AN "INDEPENDENT EXPENDITURE ONLY" COMMITTEE, MORE COSUPER PAC. UDP MAKES INDEPENDENT EXPENDITURES IN FEDERAL RACES TO SUPPOR CANDIDATES CONSISTENT WITH THE VALUES AND OBJECTIVES OF AIPAC. IN 2023, AIP CONTRIBUTION TO UDP.	TO THI COMM GOVERN AS A "C ATES FG G, 2021, PROJE OF THE I ANIZAT C AND I OMMON RT OR C PAC MAI	E LAWS O ISSION. T IED UNDE CONNECT OR FEDEF THE OPE ECT - UDP DISTRICT FION WITH IS GOVER ILY REFER DEFEAT FE	F THE HE AII R THE ED PO RAL OF RATIO WAS OF CO H THE NED U RED T EDERA	FEDER PAC PAC LAWS LITICA FICE V NS OF DLUMB FEDER NDER O AS A L	RAL AC IS FOR IL WHO THE IIA. AAL THE
Ad	ditional Data			Retu	n to l	orm	
74	and officer butter			Ketul	11 (0	-orm	

efile Public Visual Render

ObjectId: 202442219349301469 - Submission: 2024-08-08

TIN: 53-0217164

SCHEDULE D (Form 990)

Department of the

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Treas		► Go to www.irs.gov/Fo	orm990 for instructions and the	e latest information.			Inspection
	al Revenue Service ne of the organization	on .			Emple	yer identificati	ion number
	rican Israel Public Affai				_	•	ion number
		Non-Maintainin Borra Adding Front	Oth Other than Front	A	53-02	.17164	
Pa		itions Maintaining Donor Advised Fund e if the organization answered "Yes" on		Accounts.			
	complet	on the organization anomorous research	(a) Donor advised	funds		(b) Funds and	d other accounts
1	Total number at end	d of year					
2	Aggregate value of	contributions to (during year)					
3	Aggregate value of	grants from (during year)					
4	Aggregate value at	end of year					
5		on inform all donors and donor advisors in wi o the organization's exclusive legal control? .		nor advised funds are	e the org	ganization's	☐ Yes ☐ No
6		on inform all grantees, donors, and donor adv of the donor or donor advisor, or for any othe				able purposes a	and
							☐ Yes ☐ No
Pa		ation Easements. e if the organization answered "Yes" on	Form 990 Part IV line 7				
1	•	servation easements held by the organization					
		of land for public use (e.g., recreation or edu		Preservation of an his	storicall	v important lan	d area
		f natural habitat		Preservation of a cert		•	a area
			0 1	reservation of a cert	illeu ille	storic structure	
2		of open space	d aanaamiatian aantrihiitian in t	ha farm of a across	otion o		loot dou
2	of the tax year.	through 2d if the organization held a qualifie	a conservation contribution in t	ne form of a conserv	лацоп еа Г		he End of the Year
а		onservation easements			2a		
b	Total acreage restr	icted by conservation easements			2b		
С	Number of conserv	vation easements on a certified historic struc	ture included in (a)	İ	2c		
d	Number of conserv	vation easements included in (c) acquired aft al Register	er July 25, 2006, and not on a h	istoric structure	2d		
3	Number of conser tax year	vation easements modified, transferred, relea	ased, extinguished, or terminate	d by the organization	n during	the	
4	Number of states	where property subject to conservation ease	ment is located 🕨				
5		tion have a written policy regarding the periodasements it holds?		lling of violations, an	d enfor		Yes No
6	Staff and voluntee	r hours devoted to monitoring, inspecting, ha	ndling of violations, and enforc	ing conservation eas	ements		
7	Amount of expens	es incurred in monitoring, inspecting, handlin	ng of violations, and enforcing c	onservation easeme	nts duri	ng the year	
8		vation easement reported on line 2(d) above		tion 170(h)(4)(B)(i) a	and sect		Yes No
9	balance sheet, and	be how the organization reports conservation I include, if applicable, the text of the footnot accounting for conservation easements.					
Pa		ntions Maintaining Collections of Art, H e if the organization answered "Yes" on		r Similar Assets.			
1a	If the organization other similar asset	elected, as permitted under FASB ASC 958, r ts held for public exhibition, education, or res tts that describes these items.	not to report in its revenue state				
b	If the organization	elected, as permitted under FASB ASC 958, t ts held for public exhibition, education, or res					
(i) Revenue included	on Form 990, Part VIII, line 1		▶\$			
(ii) Assets included in	n Form 990, Part X			\$		
2	If the organization	received or held works of art, historical treas required to be reported under FASB ASC 958	sures, or other similar assets for		de the		
а	Revenue included	on Form 990, Part VIII, line 1					
b	Assets included in	Form 990, Part X			\$		

Schedule D (Form 990) 2022 Page **2**

 Using the organization's apply): Public exhibition Scholarly research 	acquisition, accession, and	other records, check ar	ny of the fo	ollowin	g that a	are a sign	ificant use	of its collecti	on items (c	heck all th	nat
a Public exhibition b			d								
					Loan c	or exchan	ge program	S			
	1		е		Other -						
c Preservation for fo	ituro gonoratione										
4 Provide a description of	the organization's collection	s and explain how they	further th	ne orga	nizatio	n's exemp	ot purpose i	n			
	rganization solicit or receive										
	funds rather than to be ma	intained as part of the	organizati	ion's co	llection	1?			☐ Yes	□ N	0
	istodial Arrangements. e organization answered	l "Ves" on Form 000	Dart IV/ I	ina 0	or ren	orted an	amount o	n Form 000) Dart V I	ina 21	
•	ent, trustee, custodian or ot						arriount C	III FOIIII 990	, rait A, i	ille Z I.	
	art X?								☐ Yes	□ N	o
b If "Yes," explain the arran	gement in Part XIII and com	nplete the following tab	ole:						Amount		
						•	1c				
d Additions during the year						•	1d				
e Distributions during the y	ear					•	1e				
f Ending balance							1f				
2a Did the organization incl	ude an amount on Form 990), Part X, line 21, for esc	crow or cu	stodial	accou	nt liability	?		☐ Yes	□ N	<u> </u>
b If "Yes" explain the arran	gement in Part XIII. Check h	ere if the explanation h	nas heen n	rovide	d in Par	t XIII	\square		_ 103		•
Part V Endowment Fu		ere ii tire explanation ii	ido been p	701140	4 1111 41						
Complete if the	e organization answered	·),						
1a Beginning of year balance		(a) Current year 9,144,964	(b) Pr	ior year 10,49	3 689	(c) Two ye	ears back 8,532,965	(d) Three yea	rs back 7,980,042	(e) Four ye	ars back 6,271,181
b Contributions		542,106			6,850		860,815		270,407		1,624,310
c Net investment earnings, o	ains, and losses	1,153,418		-1,61			1,441,394		556,042		309,018
d Grants or scholarships .											
e Other expenditures for fac											
and programs		324,256		24	1,131		341,485		273,526		224,467
f Administrative expenses											
g End of year balance .		10,516,232			4,964		10,493,689		8,532,965		7,980,042
•	rcentage of the current yea	, 5	column (a))) held	as:						
a Board designated or qua		00 %									
b Permanent endowment											
c Term endowment	4.000 % : 2a, 2b, and 2c should equa	J 100%									
	nds not in the possession of		are held ar	nd adm	ninistere	ed for the					
organization by:	·	-								Yes	No
	ns				•	•			3a	,,	No
` '	elated organizations listed				• •				3a(No
* **	ntended uses of the organiz	•			•	•					
	s, and Equipment.										
Complete if the	e organization answered										
Description of property	(a) Cost or othe (investmen		st or other b	asis (otl	her)	(c) Acc	cumulated de	preciation	(c	l) Book valu	e
1a Land				8,7	86,703						8,786,703
				37,8	00,940			14,867,472			22,933,468
b Buildings		J						0.040.005			
b Buildingsc Leasehold improvements				2,7	47,771			2,048,385			699,386
					747,771 187,297			894,103			193,194
c Leasehold improvements				1,0							

Schedule D (Form 990) 2022

(a) Description of security or category	(b) Boo	k	(c) Method of	
(including name of security)	value	С	ost or end-of-year	r market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII Investments - Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV,	line 11e C	as Form 000 Port	V line 12	
(a) Description of investment	, lille TTC. S	(b) Book value	(c) M	ethod of valuation: nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	•			
Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, I	line 11d Se	e Form 990 Part	X line 15	
(a) Description		, , , , , , , , , , , , , , , , , , ,	7.ye 1 e.	(b) Book value
(1)RIGHT-OF-USE ASSETS - OP LEASE				12,998,546
(2)INSURANCE CASH SURRENDER VALUE (2)				879,285
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			▶	13,877,831
Part X Other Liabilities.	l: 44	11f See Form 990	Part X line 25	
Complete if the organization answered 'Yes' on Form 990 Part IV	line i re or			
Complete if the organization answered 'Yes' on Form 990, Part IV, 1. (a) Description of liability	line Tie or	111.566 1 01111 990	1	(b) Book value
(15 10 00 00 10	line i ie or			

				j.	10,002,100
AFFILIATES					301,943
olumn (b) must equal Form 990, Part X, col.(B) line	25.)			•	24,164,396
lity for uncertain tax positions. In Part XIII,	provide the text of the footnote to the orga	anization's fina	ancial statements that report	s the organizati	on's liability for
ain tax positions under FIN 48 (ASC 740). C	heck here if the text of the footnote has be	een provided i	n Part XIII 🔽		
				Schedu	ıle D (Form 990) 2022
	Page 4				
le D (Form 990) 2022					Page 4
•	er Audited Financial Statements With		er Return.		
	answered 'Yes' on Form 990, Part IV, I				
Total revenue, gains, and other support per	r audited financial statements			1	80,525,667
Amounts included on line 1 but not on Forr	m 990, Part VIII, line 12:				
Net unrealized gains (losses) on investmer	nts	2a	1,357,331		
Donated services and use of facilities .		2b			
Recoveries of prior year grants		2c			
Other (Describe in Part XIII.)		2d		_	
Add lines 2a through 2d				2e	1,357,331
Subtract line 2e from line 1				3	79,168,336
Amounts included on Form 990, Part VIII, li	ine 12, but not on line 1 :				
Investment expenses not included on Form	n 990, Part VIII, line 7b .	4a	232,668		
Other (Describe in Part XIII.)		4b			
Add lines 4a and 4b				4c	232,668
Total revenue. Add lines 3 and 4c. (This mu	ust soul Form 000 Port Line 12)	• • •	· ·	5	79,401,004
				3	79,401,004
	oer Audited Financial Statements Wit answered 'Yes' on Form 990, Part IV, I		per keturn.		
Total expenses and losses per audited fina		iiile iza.		1	82,848,394
·			• •		02,040,074
Amounts included on line 1 but not on Forr				+	
Donated services and use of facilities .		1 - 1			
D. C. C. C. C. C. P. C. C. C. C. C. C.		2a			
Prior year adjustments		2a 2b			
Other losses					
		2b			
Other losses		2b 2c		2e	
Other losses		2b 2c			82 848 304
Other losses		2b 2c		2e 3	82,848,394
Other losses		2b 2c 2d			82,848,394
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, lin Investment expenses not included on Form	ne 25, but not on line 1:	2b 2c 2d 			82,848,394
Other losses	ne 25, but not on line 1:	2b 2c 2d	232,668		82,848,394
Other losses	ne 25, but not on line 1:	2b 2c 2d 			82,848,394 232,668
Other losses . Other (Describe in Part XIII.)	n 990, Part VIII, line 7b	2b 2c 2d		3	
Other losses	ne 25, but not on line 1: n 990, Part VIII, line 7b 	2b 2c 2d		3 4c	232,668
Other losses	ne 25, but not on line 1: n 990, Part VIII, line 7b 	2b 2c 2d		3 4c 5	232,668 83,081,062
Other losses	ne 25, but not on line 1: n 990, Part VIII, line 7b must equal Form 990, Part I, line 18.)	2b 2c 2d		3 4c 5	232,668 83,081,062
Other losses	ne 25, but not on line 1: n 990, Part VIII, line 7b must equal Form 990, Part I, line 18.)	2b 2c 2d	 2b; Part V, line 4; Part X, line 2	3 4c 5	232,668 83,081,062
Other losses	ne 25, but not on line 1: n 990, Part VIII, line 7b must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information.	2b 2c 2d	2b; Part V, line 4; Part X, line 2	4c 5	232,668 83,081,062 2d and 4b; and Part
Other losses	must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information.	2b 2c 2d	2b; Part V, line 4; Part X, line 2 Explanation NDOWMENT FUNDS BOARD	3 4c 5 2; Part XI, lines 2	232,668 83,081,062 2d and 4b; and Part NDOWMENTS - THE BOA
Other losses	me 25, but not on line 1: n 990, Part VIII, line 7b must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information. DESCRIPTION OF INTENE DIRECTORS DESIGNATED AND MEMBER EDUCATIO	2b 2c 2d	2b; Part V, line 4; Part X, line 2 Explanation NDOWMENT FUNDS BOARD ITS WITHOUT DONOR RESTR S. ENDOWMENTS WITH DON	3 4c 5 C; Part XI, lines 2 DESIGNATED E ICTIONS TO SU OR RESTRICTION	232,668 83,081,062 2d and 4b; and Part NDOWMENTS - THE BOA IPPORT AIPAC'S INFORM. DNS - ENDOWMENTS SUE
Other losses	me 25, but not on line 1: n 990, Part VIII, line 7b must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information. DESCRIPTION OF INTENE DIRECTORS DESIGNATED AND MEMBER EDUCATIO TO STIPULATIONS IMPOS	2b 2c 2d	2b; Part V, line 4; Part X, line 2 Explanation NDOWMENT FUNDS BOARD ITS WITHOUT DONOR RESTR S. ENDOWMENTS WITH DON RS. SOME DONOR RESTRICT	3 4c 5 C; Part XI, lines 2 DESIGNATED E ICTIONS TO SU OR RESTRICTIONS ARE TEM	232,668 83,081,062 2d and 4b; and Part NDOWMENTS - THE BOA IPPORT AIPAC'S INFORM. DNS - ENDOWMENTS SUE PORARY IN NATURE; THO
Other losses	must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information. DESCRIPTION OF INTENE DIRECTORS DESIGNATED AND MEMBER EDUCATION TO STIPULATIONS IMPOS RESTRICTIONS WILL BE MESTRICTIONS WILL BE MESTRIC	2b 2c 2d	2b; Part V, line 4; Part X, line 2 Explanation NDOWMENT FUNDS BOARD ITS WITHOUT DONOR RESTR S. ENDOWMENTS WITH DON RS. SOME DONOR RESTRICT DNS OF AIPAC OR BY THE PA	3 4c 5 C; Part XI, lines 2 DESIGNATED E ICTIONS TO SU OR RESTRICTION IONS ARE TEM SSAGE OF TIMI	232,668 83,081,062 2d and 4b; and Part NDOWMENTS - THE BOA PPPORT AIPAC'S INFORM. DNS - ENDOWMENTS SUE PORARY IN NATURE; THO
Other losses	must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information. DESCRIPTION OF INTENE DIRECTORS DESIGNATED AND MEMBER EDUCATION TO STIPULATIONS IMPOS RESTRICTIONS WILL BE MESTRICTIONS WILL BE MESTRIC	2b 2c 2d	2b; Part V, line 4; Part X, line 2 Explanation NDOWMENT FUNDS BOARD ITS WITHOUT DONOR RESTR S. ENDOWMENTS WITH DON RS. SOME DONOR RESTRICT	3 4c 5 C; Part XI, lines 2 DESIGNATED E ICTIONS TO SU OR RESTRICTION IONS ARE TEM SSAGE OF TIMI	232,668 83,081,062 2d and 4b; and Part NDOWMENTS - THE BOA PPPORT AIPAC'S INFORM. DNS - ENDOWMENTS SUE PORARY IN NATURE; THO
Other losses	must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information. DESCRIPTION OF INTENE DIRECTORS DESIGNATED AND MEMBER EDUCATIO TO STIPULATIONS IMPOS RESTRICTIONS WILL BE M RESTRICTIONS ARE PERF PERPETUITY. UNDER ASC TOPIC 740-1	2b 2c 2d	Explanation NDOWMENT FUNDS BOARD ITS WITHOUT DONOR RESTR S. ENDOWMENTS WITH DON RS. SOME DONOR RESTRICT DNS OF AIPAC OR BY THE PA ATURE, WHERE THE DONOR S	3 4c 5 DESIGNATED E ICTIONS TO SU OR RESTRICTIONS ARE TEM SSAGE OF TIMI STIPULATES THE COME TAXES, A	232,668 83,081,062 2d and 4b; and Part NDOWMENTS - THE BOA IPPORT AIPAC'S INFORM. DNS - ENDOWMENTS SUE PORARY IN NATURE; THO E. OTHER DONOR IE FUNDS BE MAINTAINE
Other losses	must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information. DESCRIPTION OF INTENE DIRECTORS DESIGNATED AND MEMBER EDUCATIO TO STIPULATIONS IMPOS RESTRICTIONS WILL BE MESTRICTIONS ARE PERPERETUITY. UNDER ASC TOPIC 740-11 TAX BENEFIT FROM AN L	2b 2c 2d	2b; Part V, line 4; Part X, line 2 Explanation NDOWMENT FUNDS BOARD ITS WITHOUT DONOR RESTRICT S. ENDOWMENTS WITH DON IRS. SOME DONOR RESTRICT INS OF AIPAC OR BY THE PA ATURE, WHERE THE DONOR S ING FOR UNCERTAINTY IN IN- AX POSITION ONLY IF IT IS M	3 4c 5 DESIGNATED E ICTIONS TO SU OR RESTRICTIONS ARE TEM SSAGE OF TIMI STIPULATES THE COME TAXES, A ORE LIKELY THE	232,668 83,081,062 2d and 4b; and Part NDOWMENTS - THE BOA IPPORT AIPAC'S INFORM. DNS - ENDOWMENTS SUE PORARY IN NATURE; THO E. OTHER DONOR IE FUNDS BE MAINTAINE AIPAC MAY RECOGNIZE T AN NOT THAT THE TAX
Other losses	must equal Form 990, Part I, line 18.) s 3, 5, and 9; Part III, lines 1a and 4; Part IV, rovide any additional information. DESCRIPTION OF INTENE AND MEMBER EDUCATION TO STIPULATIONS IMPOSIBLE TO STIPULATIONS WILL BE NESTRICTIONS ARE PERPETUITY. UNDER ASC TOPIC 740-11 TAX BENEFIT FROM AN LIPOSITION WILL BE SUSTA	2b 2c 2d	Explanation NDOWMENT FUNDS BOARD ITS WITHOUT DONOR RESTR S. ENDOWMENTS WITH DON RS. SOME DONOR RESTRICT DNS OF AIPAC OR BY THE PA ATURE, WHERE THE DONOR S	3 4c 5 DESIGNATED E ICTIONS TO SU OR RESTRICTIONS ARE TEM SSAGE OF TIMI STIPULATES TH COME TAXES, A ORE LIKELY TH HORITIES, BASE	232,668 83,081,062 2d and 4b; and Part NDOWMENTS - THE BOA IPPORT AIPAC'S INFORM. DNS - ENDOWMENTS SUE PORARY IN NATURE; THO E. OTHER DONOR IE FUNDS BE MAINTAINE AIPAC MAY RECOGNIZE T AN NOT THAT THE TAX ED ON THE TECHNICAL M

REALIZED UPON ULTIMATE SETTLEMENT. MANAGEMENT EVALUATED AIPAC'S TAX POSITIONS AND CONCLUDED THAT AIPAC HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF ASC 740-10. GENERALLY, AIPAC IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE SEPTEMBER 30, 2020

YEARS BEFORE SEPTEMBER 30, 2020	
	Schedule D (Form 990) 2022
Additional Data	
Additional Data	Return to Form

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ObjectId: 202442219349301469 - Submission: 2024-08-08

TIN: 53-0217164

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2022

	artment of the Treasury nal Revenue Service			anization ente	red more thar ttach to Form	n \$15,000 on Form 990-EZ, line 6a. 990 or Form 990-EZ. nstructions and the latest informati	•	Open to Public Inspection
	e of the organization rican Israel Public Affairs (Committee						fication number
							53-0217164	
P	-					d "Yes" on Form 990, Part	: IV, line 17.	
1			ot required to com	-		ctivities. Check all that apply.		
' a	Mail solicitations	gariization ra	iisea ranas tinoagii a	ally of the f	e e			
b	Internet and email se	olicitations			f	Solicitation of govern	ğ	
	_	oncitations)	-	
C	✓ Phone solicitations				g	Special fundraising e	events	
d	In-person solicitation	ns						
2a	or key employees listed	in Form 990), Part VII) or entity in	connectio	n with prof	ıding officers, directors, trust essional fundraising service	s? 🗸 Y	es 🗆 No
b	If "Yes," list the 10 highes to be compensated at le	st paid indiv east \$5,000 b	iduals or entities (fu by the organization.	ndraisers)	oursuant to	agreements under which th	e fundraiser is	
(i)	Name and address of ind or entity (fundraiser)		(ii) Activity	have cu	fundraiser ustody or trol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
	AD DATA	Б	IDEOT MAII	Yes	No			
	AB DATA 600 AB DATE DRIVE MILWAUKEE, WI 53217		IRECT MAIL		No	1,283,981	91,650	1,192,331
	SIEGEL MARKETING GROU 1845 N FARWELL AVE 300		ELE Marketing		No	152,057	41,236	110,821
	MILWAUKEE, WI 53202							
		+						
Tota	l					1,436,038	132,886	1,303,152
3	List all states in which the	organizatio	n is registered or lice	ensed to so	licit contrib	utions or has been notified i	t is exempt from registration	or licensing.
AL, A	kK, AZ, AR, CA, CO, CT, DC,	FL, GA, HI, IL	_, KS, KY, LA, ME, MD	, MA, MI, M	IN, MS, MO,	, NV, NH, NJ, NM, NY, NC, ND	, OH, OK, OR, PA, RI, SC, TN, U	JT, VA, WA, WV, WI
For P	aperwork Reduction Act Notice	e, see the Inst	ructions for Form 990 c	or 990-EZ.		Cat. No. 5	50083H	Schedule G (Form 990) 2022
					Ра	ge 2		

fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a)Event #1 (event type)	(b) Event #2 (event type)	(c)Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue					
	1 Gross receipts				
	Less: Contributions Gross income (line 1 minus line 2)				
	4 Cash prizes				
so.	5 Noncash prizes				
euse	6 Rent/facility costs				
ă	7 Food and beverages				
Direct Expenses	8 Entertainment				
ă	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 throu				
- Do	11 Net income summary. Subtract line 10 from Int III Gaming. Complete if the organize			r reported more than \$15	000 on Form 000-E7
- 10	line 6a.	T	1	Treported more than \$15,	
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
~					
	1 Gross revenue				
	1 Gross revenue				
Expenses	2 Cash prizes				
	2 Cash prizes				
Expenses	2 Cash prizes	☐ Yes%_	☐ Yes % ☐ No		
Expenses	2 Cash prizes	No		□ No	
Expenses	2 Cash prizes	No ugh 5 in column (d) e 7 from line 1, column (d) .		□ No	
Expenses	2 Cash prizes	No Igh 5 in column (d) e 7 from line 1, column (d) . conducts gaming activities: ng activities in each of these s	No No	□ No	☐ Yes ☐ No
b e Direct Expenses	2 Cash prizes	No Igh 5 in column (d) e 7 from line 1, column (d) . onducts gaming activities: ng activities in each of these s es revoked, suspended or terr	No	No No	☐ Yes ☐ No

			Page 3				_
Sched	dule G (Form 990) 2022					Pa	ge 3
1		g activities with nonmembers? .			Yes	□ No	
2	Is the organization a grantor, beneficia	ary or trustee of a trust or a member c	of a partnership or other entity		∪ res	∪ NO	
	formed to administer charitable gamin	_			☐ Yes	□ No	
3	Indicate the percentage of gaming act						
a	The organization's facility			13a			%
b	•			13b			%
4	Enter the name and address of the pe	son who prepares the organization's	gaming/special events books and records:				
	Name						
	Address						
5a	Does the organization have a contract					_	
L					☐ Yes	□ No	
b	amount of gaming revenue retained by		\$ and the				
С	If "Yes," enter name and address of the		`				
	The second state of the se						
	Name						
	Address						
	Address						
_	0						
6	Gaming manager information:						
	Name						
	Gaming manager compensation ► \$_						
	Description of services provided						
	bescription of services provided a						-
	☐ Director/officer	☐ Employee	☐ Independent contractor				
	_ birector, officer	C Employee	independent contractor				
7	Mandatory distributions:						
а	Is the organization required under state	e law to make charitable distribution:	s from the gaming proceeds to				
_	retain the state gaming license?				Yes	□ No	
b	Enter the amount of distributions requ		her exempt organizations or spent				
Pai	in the organization's own exempt active rt IV Supplemental Information		red by Part I, line 2b, columns (iii) and (v); and	Part III lir	nes 9 9h	10b 15b	
1 (1)		cable. Also provide any additiona		i ait iii, iii	1100 5, 50	, 105, 105,	
	Return Reference		Explanation				_
			Schedu	le G (Form 9	90) 2022		_
							_
Δd	ditional Data				Doture	to Form	
- 10					actuill	W FUIIII	

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ObjectId: 202442219349301469 - Submission: 2024-08-08

TIN: 53-0217164

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Ves" on Form 990, Part IV, line 23.
Attach to Form 990.

Department of the
Treasury

TIN: 53-0217164

OMB No. 1545-0047

Ombe No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number American Israel Public Affairs Committee 53-0217164 **Questions Regarding Compensation** Part I Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. 1a First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees

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

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

directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?

Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all

Discretionary spending account

Compensation committee
Unidependent compensation consultant
Form 990 of other organizations
Written employment contract
Compensation survey or study
Approval by the board or comp

Approval by the board or compensation committee

Personal services (e.g., maid, chauffeur, chef)

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

Participate in, or receive payment from, a supplemental nonqualified retirement plan?

Participate in, or receive payment from, an equity-based compensation arrangement?

If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

Receive a severance payment or change-of-control payment? .

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

If "Yes," on line 6a or 6b, describe in Part III.

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

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

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

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

Cat. No. 50053T

58-6(c)?

Schedule J (Form 990) 2022

1b

2

4b Yes

4c

5b

6b

7

No

No

No

No

No

No

No

No

Page **2**

_ Page 2 _

Schedule 1 (Form 990) 2022

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

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

(A) Name and Title		(B) Breakdown of	W-2, 1099-MISC com 1099-NEC	pensation, and/or	other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(B)(i)-(D)	reported as deferred on prior Form 990
1 Howard Kohr Chief Executive Officer	(i)	998,227	0	225,688	32,300	34,654	1,290,869	0
	(ii)	0	0	0	0	0	0	0
2 Richard L Fishman Co Chief Executive Officer	(i)	937,721	0	278,325	32,300	44,415	1,292,761	0
	(ii)	0	0	0	0	0	0	0
3 Arne Christenson MD of Policy anD POLITICS	(i)	730,777	0	0	32,300	44,415	807,492	0
	(ii)	0	0	0	0	0	0	0
4 Elliot Brandt MD of National Affairs	(i)	660,968	0	20,500	32,300	28,132	741,900	0
	(ii)	0	0	0	0	0	0	0
5 Brian T Shankman Chief Strategic Director	(i)	655,504	0	20,500	32,300	39,513	747,817	0
	(ii)	0				0	0	
6 Elias Saratovsky	m	650.622	^	20 500	22.200	20 021	741 459	^

			0	0	0	0	0	0
7 Michael Sachs Atlantic States Director	(i)	645,564	0	20,500	32,300	41,793	740,157	0
	(ii)							
	(11)	0	0	0	0	0	0	0
8 Robert H Bassin CEO United Democracy Project	(i)	600,156	0	20,500	32,300	44,415	697,371	0
CEO United Democracy Project	400							
	(ii)	0	0	0	0	0	0	0
9 Philip S Friedman General Counsel & Director	(i)	617,619	0	0	3,143	28,998	649,760	0
octicial coaliser a pirector	(**)							
	(ii)	0	0	0	0	0	0	0
10 Jeremy Rider Dir of Events & Creative srys	(i)	530,637	0	20,500	32,300	41,783	625,220	0
DII OI EVERIO A OICARIVE SITS	(
	(ii)	0	0	0	0	0	0	0
11 Suzanne M Kinzer Chief Financial Officer	(i)	496,241	0	0	32,300	24,870	553,411	0
oner i mandiai onicci	(**)							
	(ii)	0	0	0	0	0	0	0
12 Samantha C Margolis Chief Administrative Officer	(i)	408,841	0	20,500	32,300	16,601	478,242	0
onion riaminodative onion	(ii)							
	(II)	0	0	0	0	0	0	0
						1		1
	•	•	•	•	•	<u>, </u>	Schedule J	(Form 990) 2022
								, ,
		Pag	IA 3					
Schedule J (Form 990) 2022								Page 3
								rage 3

Additional Data Return to Form

HOWARD KOHR: \$357,767 RICHARD FISHMAN: \$648,661 ELLIOT BRANDT, BRIAN SHANKMAN, ELIAS SARATOVSKY, MICHAEL SACHS, ROB BASSIN, JEREMY RIDER AND SAMANTHA MARGOLIS EACH RECEIVED \$20,500. THE COMMITTEE HAS ESTABLISHED A 457(F) SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN FOR THE BENEFIT OF CERTAIN EXECUTIVES. THE COMMITTEE RECOGNIZED \$1,006,428 OF THE EXPENSE TO THE SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN DURING THE YEAR ENDED SEPTEMBER 30, 2023.

Schedule J (Form 990) 2022

Software ID:

Director of Regional Affairs

Supplemental Information

Provide the information, explanation, or descrip

SCHEDULE J, Part I, Line 4b:

Part III

TIN: 53-0217164

Schedule L (Form 990)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-F7, Part V, line 38a or 40b

OMB No. 1545-0047

		Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.									2022		
epartment of the reasury		►Go to	www.irs.gov/l	Form990 for ins	structions and th	e latest infor	mation.					n to Pu	
Name of the organiz American Israel Public								Employ	er ident	ification			
ariencan israel Public	Arrairs Committee							53-0217	7164				
	Benefit Transact												
	te if the organization a) Name of disqualif				between disqua				Descript	tion of		(d) Corrected?	
	, '	<u>'</u>	,	. ,	organization	•			ransact		_	Yes No	
2 Enter the amo	unt of tax incurred b	w the organize	tion managers	or diagnalified	noroono during t	the year unde	r agotion	40E0					
	unt of tax incurred to unt of tax, if any, on							▶ \$					
3 Enter the amo	unt of tax, if any, on	line 2, above, r	eimbursed by	the organizatio	n		. •	\$					
	ns to and/or From plete if the organiza			. 990-F7 Part V	line 38a or Form	n 990 Part IV	' line 26: c	r if the	organiza	ation ren	orted a	an amoi	ınt on
Form	990, Part X, line 5,	6, or 22	100 0111 01111	1 9 9 0 EZ, 1 alt v,	inic ood, or rom	11 3 3 0, 1 u t 1 v	, 11110 20, 0	T II tile	organiz.	attorriep	orteu t	arr arriot	anic 011
(a) Name of nterested person	(b) Relationship with organization	(c) Purpose of loan		o or from the nization?	(e) Original principal	(f) Balanc due		g) In fault?		proved pard or		(i) Writ	
niterested person	mar organization	or loan	organ	nzation.	amount	uuc		ruurt.		nittee?		agreem	O
			То	From			Yes	No	Yes	No	Yes		No
								1					
Part III Grant Comp	ts or Assistance I	Benefiting Int	terested Persered "Yes" on	sons. Form 990, Pa		(d) T	uno of ago	istanos		(a) Pu	urnoco	of again	tanco
Part III Grant	ts or Assistance I plete if the organi sted person (Benefiting In	terested Persered "Yes" on p between on and the	sons. Form 990, Pa		(d) T	ype of ass	sistance	:	(e) Pu	ırpose	of assis	tance
Part III Grant Comp	ts or Assistance I plete if the organi sted person (Benefiting Interested (b) Relationship	terested Persered "Yes" on p between on and the	sons. Form 990, Pa	art IV, line 27.	(d) T	ype of ass	istance		(e) Pu	ırpose	of assis	tance
Part III Grant Comp	ts or Assistance I plete if the organi sted person (Benefiting Interested (b) Relationship	terested Persered "Yes" on p between on and the	sons. Form 990, Pa	art IV, line 27.	(d) T	ype of ass	istance	9	(e) Pu	ırpose	of assis	stance
Part III Grant Comp	ts or Assistance I plete if the organi sted person (Benefiting Interested (b) Relationship	terested Persered "Yes" on p between on and the	sons. Form 990, Pa	art IV, line 27.	(d) T	ype of ass	sistance		(e) Pu	ırpose	of assis	stance
Part III Grant Comp (a) Name of interes	ts or Assistance I plete if the organi sted person (ii	Benefiting Inf zation answe (b) Relationship nterested perso organiza	terested Persered "Yes" on p between on and the tion	sons. Form 990, Pa (c) Amoun	art IV, line 27. t of assistance			sistance					
Part III Grant Comp (a) Name of interes	ts or Assistance I plete if the organi sted person (ii	Benefiting Inf zation answe (b) Relationship nterested perso organiza	terested Persered "Yes" on p between on and the tion	sons. Form 990, Pa (c) Amoun	art IV, line 27. t of assistance	(d) T		sistance				of assis	
Part III Grant Comp (a) Name of interes	ts or Assistance I plete if the organi sted person (ii	Benefiting Inf zation answe (b) Relationship nterested perso organiza	terested Persered "Yes" on p between on and the tion	sons. Form 990, Pa (c) Amoun	art IV, line 27. t of assistance			sistance					
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Additional Data Return to Form

Software ID: Software Version:

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ObjectId: 202442219349301469 - Submission: 2024-08-08

TIN: 53-0217164

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** American Israel Public Affairs Committee 53-0217164 Part I Types of Property (a) (c) Number of contributions or Noncash contribution amounts Method of determining Check if applicable items contributed reported on noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art . . Art-Historical treasures Art-Fractional interests Books and publications 5 Clothing and household goods Cars and other vehicles . . 6 7 Boats and planes 8 Intellectual property . . . 9 Securities-Publicly traded . Х 646 3,837,677 FMV 10 Securities-Closely held stock . Securities—Partnership, LLC, or trust interests . . . 12 Securities-Miscellaneous . . Qualified conservation contribution-Historic structures . . . Qualified conservation contribution-Other . . . 15 Real estate-Residential . Real estate-Commercial . . Real estate-Other . . . 17 Collectibles Food inventory . . . Drugs and medical supplies . 21 Taxidermy Historical artifacts . . . 22 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (_ 26 Other ► (_ 27 Other ▶ (. 28 Other ► (-29 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a No **b** If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a contributions? . . . 32a No b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

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

Cat. No. 51227J

Schedule M (Form 990) (2022)

column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
	Schedule M (Form 990) (2022)
Additional Data	Peturn to Form

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
American Israel Public Affairs Committee

Employer identification number
53-0217164

Explanation

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6 & 7A:	MEMBERS SHALL BE ENTITLED TO ELECT ONE MEMBER TO THE BOARD OF DIRECTORS AND/OR VOTE ON THE ORGANIZATION'S ACTION PRINCIPLES BY CASTING THEIR VOTES AT AN ANNUAL MEETING OF MEMBERS. THERE ARE NO CLASSES OF MEMBERSHIP IN AIPAC.
FORM 990, PART VI, SECTION B, LINE 11:	THE FORM 990 IS REVIEWED BY THE CONTROLLER, DIRECTOR OF FINANCE, CFO AND THE AUDIT COMMITTEE AS REPRESENTATIVES OF THE BOARD OF DIRECTORS PRIOR TO FILING WITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 12C:	1. EACH DIRECTOR, OFFICER, AND EMPLOYEE OF AIPAC (HEREAFTER "KEY PERSON") IN A POSITION TO INFLUENCE OR TO VOTE UPON ANY POLICY OR BUSINESS OF AIPAC SHALL EXERCISE GOOD FAITH IN ALL TRANSACTIONS RELATING TO AIPAC, AND SHALL NOT USE HIS OR HER POSITION OR KNOWLEDGE GAINED THEREFROM, DIRECTLY OR INDIRECTLY, TO PERMIT A CONFLICT OF INTEREST TO ARISE BETWEEN THE INTERESTS OF AIPAC AND THE PERSONAL AND/OR BUSINESS INTERESTS OF ANY KEY PERSON, INCLUDING THOSE OF IMMEDIATE FAMILY MEMBERS OF SUCH KEY PERSONS. 2. PRIOR TO THE AUTHORIZATION AND DISCUSSION OF ANY POLICY OR BUSINESS TO BE ADOPTED OR CONDUCTED BY AIPAC, SHOULD ANY KEY PERSON, INCLUDING THOSE OF IMMEDIATE FAMILY MEMBERS OF KEY PERSONS, HAVE ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST BETWEEN AIPAC AND THE POLICY OR BUSINESS TO BE CONSIDERED, SUCH KEY PERSON SHALL DISCLOSE SUCH RELATIONSHIP OR INTEREST TO THE BOARD OR BOARD COMMITTEE ACTING ON THE POLICY OR BUSINESS TO BE AUTHORIZED. HOWEVER, SHOULD THE POLICY OR BUSINESS TO BE ADOPTED OR CONDUCTED BY AIPAC TO INCLUDE ANY OFFER FOR THE PURCHASE OF GOODS OR SERVICES, IN WHICH ANY KEY PERSON OR ANY LAY LEADER OF AIPAC, HAS A PERSONAL RELATIONSHIP OR OTHER INTEREST, SUCH POLICY OR BUSINESS MATTER SHALL FIRST BE REFERRED TO THE BOARD FOR REVIEW AND RECOMMENDATION. 3. UPON DISCLOSURE OF SUCH RELATIONSHIP INTEREST AND/OR RECOMMENDATION. OF THE BOARD FOLLOWING REVIEW, THE KEY PERSON MAKING SUCH DISCLOSURE SHALL NOT PARTICIPATE IN ANY OF THE DISCUSSIONS CONCERNING THE AUTHORIZATION OF THE POLICY OR BUSINESS IN WHICH THE INTEREST OR RELATIONSHIP HAS BEEN DISCLOSURE NOR SHALL SUCH KEY PERSON BE PERMITTED TO COUNT IN DETERMINING THE EXISTENCE OF A QUORUM OR OTHERWISE VOTE IN THE MATTER BEING DISCUSSED. 4. THE MINUTES OF ANY SUCH MEETING SHALL REFLECT THE DISCLOSURE MADE, THE VOTE TAKEN, AND WHERE APPLICABLE, THE ABSTENTION FOR PARTICIPATION AND VOTING OF THE KEY PERSON WHO HAS MADE THE REQUIRED DISCLOSURE. 5. EACH NEW KEY PERSON SHALL BE PROVIDED A COPY OF THIS POLICY UPON COMMENCEMENT OF HIS OR HER POSITION AS A KEY P
FORM 990, PART VI, SECTION B, LINE 15A:	AIPAC ENGAGES AN INDEPENDENT THIRD PARTY TO REVIEW THE REASONABLENESS OF THE COMPENSATION FOR THE CEO AND CO-CEO. WORK OF THE THIRD PARTY INCLUDES COMPARING COMPENSATION DATA WITH SIMILARLY SITUATED ORGANIZATIONS. AIPAC PROVIDES DATA TO THE COMPENSATION COMMITTEE, WHO REVIEWS AND MAKES DETERMINATIONS ON ANNUAL COMPENSATION ADJUSTMENTS.
FORM 990, PART VI, SECTION B, LINE 15B:	FOR COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES, AIPAC REVIEWS SALARY SURVEY INFORMATION AND OTHER PUBLICLY AVAILABLE INFORMATION IN DETERMINING ANNUAL COMPENSATION ADJUSTMENTS. THE COMPENSATION COMMITTEE REVIEWS ANNUAL COMPENSATION ADJUSTMENTS.
FORM 990, PART VI, SECTION C, LINE 19:	TO THE EXTENT THAT AIPAC'S STATE CHARITABLE REGISTRATIONS REQUIRE THE PROVISION OF GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS, THOSE DOCUMENTS ARE MADE AVAILABLE THROUGH PUBLIC REQUEST CHANNELS.
FORM 990, PART XII, LINE 2C:	THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.

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

Cat. No. 51056K

Schedule O (Form 990) 2022

Additional Data

Return to Form

TIN: 53-0217164

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047 **2022**

Open to Public Inspection Department of the Treasury Name of the organization American Israel Public Affairs Committee Employer identification number 53-0217164 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 (f) Direct controlling entity (c) Legal domicile (state or foreign country) (a) Name, address, and EIN (if applicable) of disregarded entity (e) End-of-year assets (1) 251 MASSACHUSETTS AVENUE LLC 251 H STREET NW WASHINGTON, DC 20001 20-4721252 BUILDING OP DC 5.087.750 33.111.341 AIPAC Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (c) Legal domicile (state or foreign country) (e) Public charity status (if section 501(c)(3)) (f) Direct controlling entity (b) Primary activity (a) Name, address, and EIN of related organization (d) Exempt Code section (g) Section 512(b) (13) controlled entity? Yes No (1)AMERICAN ISRAEL EDUCATION FOUNDATION 251 H STREET NW DUC/INFO DC 01(C)(3) INE 7 WASHINGTON, DC 20001 (2)aipac-aief israel ra 15 SAREI YISRAEL STREET JERUSALEM SUPPORT US-IS IS Yes (3)AIPAC PAC 251 H STREET NW POLITICAL DC AIPAC WASHINGTON, DC 20001 87-3836092

(4)UNITED DEMOCRACY PROJECT
200 MASSACHUSETTS AVE NW 440 OLITICAL WASHINGTON, DC 20001 87-4162668 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2022 — Page 2 — Schedule R (Form 990) 2022 Page 2 Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. (e)
Predominant
income(related,
inrelated, excluded
from tax under
sections 512-514) (i) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065) (a) Name, address, and EIN of related organization (c) Legal domicile (state or foreign country) (h) Disproprtionate allocations? (j) General or managing partner? Yes No Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year (a) Name, address, and EIN of related organization (e) Type of entity (C corp, S corp, or trust) (i) Section 512(b)(13) controlled entity? (d) (f) Share of total (g) Share of end-of-Legal domicile (state or foreign Direct controlling entity Primary activity year assets Yes country)

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	Pa	ge 3											
hedule R (Form 990) 2022 Part V Transactions With Related Organizations. Col	mplata if the are	ronization .	anawarad "V	'oo" on F	orm 000 Dort	IV line 24	25h or 26						Page 3
Note. Complete line 1 if any entity is listed in Parts II, III, or I			answered r	es on r	01111 990, Part	17, 11116 34	, 330, 01 30					,	Yes No
1 During the tax year, did the orgranization engage in any of the fo			or more relat	ed organiz	zations listed in	Parts II-IV?						\vdash	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent												1a	No
b Gift, grant, or capital contribution to related organization(s)												1b \	Yes
c Gift, grant, or capital contribution from related organization(s)												1c	No
d Loans or loan guarantees to or for related organization(s)												1d \	Yes
e Loans or loan guarantees by related organization(s)												1e \	Yes
f Dividends from related organization(s)												1f	No
g Sale of assets to related organization(s)											1g	No	
h Purchase of assets from related organization(s)											1h	No	
i Exchange of assets with related organization(s)												1i	No
j Lease of facilities, equipment, or other assets to related orga	nization(s)								•			1j	No
k Lease of facilities, equipment, or other assets from related of	organization(s).											1k	No
Performance of services or membership or fundraising solic												11	Yes
m Performance of services or membership or fundraising solic		-										1m	No
n Sharing of facilities, equipment, mailing lists, or other assets	with related organ	nization(s) .										1n \	Yes
o Sharing of paid employees with related organization(s) .												10	Yes
p Reimbursement paid to related organization(s) for expenses	3											1р	No
q Reimbursement paid by related organization(s) for expense	s									•		1q	No
r Other transfer of cash or property to related organization(s)s Other transfer of cash or property from related organization												1r \	Yes No
2 If the answer to any of the above is "Yes," see the instruction													
					luding covered	relationsinp	s and trans	ction thresho	as.				
(a) Name of related organization				(I	o)		(c)	ction thresho		(d)	amount inv	olved	
Name of related organization			B		o) action	Amount	(c) t involved			(d) od of determining	amount inv	olved	
Name of related organization)UNITED DEMOCRACY PROJECT			В	(i Trans	o) action	Amount	(c) t involved 00,000	CASH	Metho	(d) od of determining	amount inv	olved	
Name of related organization UNITED DEMOCRACY PROJECT UNITED DEMOCRACY PROJECT			D	(i Trans	o) action	Amount	(c) t involved 00,000	CASH SEE PART VI	Metho	(d) od of determining	amount inv	olved	
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Schedule R (Form 990) 2022														Page 5
Part VII	Supplemental Information					•					•			
	Provide additional information for responses to questions on Schedule R. See instructions.													

Additional Data Return to Form

Explanation

THE ORGANIZATION HAS GUARANTEED THE LEASE PAYMENTS UNDER A LEASE IN WHICH THE RELATED ORGANIZATION IS LESSEE. AS OF SEPTEMBER 30, 2023 THE ORGANIZATION HAS NOT BEEN REQUIRED TO PERFORM UNDER THIS GUARANTEE.

Schedule R (Form 990) 2022

Software ID: Software Version:

Return Reference

SCHEDULE R, PART V, LINE 2, ITEM (2)