-orm 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

2010

Open to Public Inspection

A Fo	r the 2	2010 ca	ilendar year, or tax year begin	ning 10-01-2010 and ending 09-30-20	011			
_		pplicable	C Name of organization AMERICAN ISRAEL PUBLIC AFFAIR	RS COMMITTEE			-	dentification number
_	iress ch	-	Doing Business As				0217	
_	me char ::al retur						phone	number
_	mınated		Number and street (or P O box in 251 H STREET NW	if mail is not delivered to street address)	Room/sui	te (20	2)639	9-5200
_			Chi. and the control of	-1 TID 4		G Gros	s receip	ots \$ 78,790,278
_	ended r		City or town, state or country, ar WASHINGTON, DC 20001	na ZIP + 4			·	
App	olication	n pending						
			F Name and address of p HOWARD KOHR	orincipal officer	H(a) Is	this a group retur	n for affil	nates? Yes Vo
			251 H STREET NW WASHINGTON, DC 2000	24	H(b) Ar	e all affiliates i	ncluded	γ Γyes ΓNo
			WASHINGTON, DC 2000	51	If	"No," attac	h a lis	t (see instructions)
та [x-exem	npt status	「 501(c)(3) ▼ 501(c)(4)	◀ (insert no)	H(c) ^G	Froup exemp	tion n	umber 🟲
w	ebsit e	: ► WW	/W AIPAC ORG					
€ For	n of ord	nanization	Corporation Trust Associa	ation Other ►	l Year	of formation 1	963	M State of legal domicile DC
	rt I		mary	dell' stier P	L rear	or ronnation 1	.505	Produce of legal dofficie. De
			·	sion or most significant activities				
	9	SPECIF	ICALLY, IT IS INTERESTED	IN EXPOSING HARMFUL AND UNTRU				
œ.	1	IMPAIR MIDDLE		ONS IT WILL SUPPORT CONSTRUCT	TIVE PROPO	SALS TO E	BRING	PEACE TO THE
Governance Governance	-							
<u> </u>	-							
ē,	2 0	Check th	nis box 🕶 if the organization	discontinued its operations or dispose	d of more tha	n 25% of it	s net a	assets
			•	erning body (Part VI, line 1a)			з	50
Acuvilles &				rs of the governing body (Part VI, line 1			4	50
	5 7	Total nu	mber of individuals employed i	ın calendar year 2010 (Part V, lıne 2a)			5	364
ą ą	6 7	Total nu	mber of volunteers (estimate i	fnecessary)			6	0
	7a 7	Total un	related business revenue from	n Part VIII, column (C), line 12			7a	109,912
	ь	Net unre	lated business taxable income	e from Form 990-T, line 34			7b	92,970
						Prior Year		Current Year
<u>a</u>	8			, line 1 h)		64,607		64,238,448
Revenue	9 10		ım service revenue (Part VIII ₎ tment income (Part VIII, colui	-	2,206	,656	2,964,559	
Æ	11			A), lines 5, 6d, 8c, 9c, 10c, and 11e)	•		,500	-840,479
	12			11 (must equal Part VIII, column (A), I	ıne			·
						67,166		66,862,011
	13			art IX, column (A), lines 1-3)	•		0	0
	14 15			t IX, column (A), line 4)	5-		- 0	0
\$	15	10)	es, other compensation, empre	byee beliefits (Fart IX, Column (A), fine.		24,863	,689	21,427,874
Expenses	16a	Profes	sional fundraising fees (Part I	X, column (A), line 11e)		636	,200	735,089
ਡੌ	ь	Total fu	ndraısıng expenses (Part IX, column	(D), line 25) • 9,876,035				
	17), lines 11a-11d, 11f-24f)		38,897	`	39,107,320
	18			nust equal Part IX, column (A), line 25)	64,397		61,270,283
_ 47	19	Reven	ue less expenses Subtract IIr	ne 18 from line 12	Pogin	2,768	_	5,591,728
net Assets of Fund Bafances					begin	ning of Curre Year		End of Year
93.00 94.00 94.00	20	Total	assets (Part X, line 16)			89,961	,886	105,064,763
2 E	21	Totall	iabilities (Part X, line 26) .			38,406	,543	49,730,215
	22			ct line 21 from line 20		51,555	,343	55,334,548
	rt II		ature Block			. d		
mow	ledge a			nined this return, including accompanying te. Declaration of preparer (other than off				
mow	ledge.							
		****	**			2012-04-23		
Sign	1	Signa	ature of officer			Date		
Here			ARD KOHR EXECUTIVE DIRECTOR					
	1	<u> F </u>	or print name and title		T	1	15	T
		Print/Type preparer's		Preparer's signature YONG ZHANG CPA	Date	Check if se employed		PTIN
Paid			me MCGLADREY & PULLEN LLP	Firm's EIN 🕨				
Prepa		Fırm's add	dress • 8000 TOWERS CRESCENT DI		Phone no (703) 336-			
Jse (July		V/JENNA VA 221826205					6400

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

✓ Yes No

Form	990	(2010)

Page 2	
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Par		of Program Servedule O contains a res				দ				
1	Briefly describe the	organization's missio	า							
					CACY ORGANIZATION DADVOCACY SUPPORT	WHOSE MISSION IS TO				
2		undertake any signific or 990-EZ?			which were not listed on	┌ Yes ┌ No				
If "Yes," describe these new services on Schedule O										
3		cease conducting, or			nducts, any program	┌ Yes ┌ No				
	If "Yes," describe the	ese changes on Sched	lule O							
4	Section 501(c)(3) a		tions and section	4947(a)(1) trusts a	largest program services to required to report the arthe ereported					
4a	(Code) (Expenses \$	18,836,456 II	ncluding grants of \$) (Revenue \$)				
	MEMBERSHIP EVENTS A	ND ACTIVITIES TO SUPPOR	RT THE LOBBYING AND	EDUCATIONAL MISSION	OF AIPAC					
4b	(Code) (Expenses \$	13,324,400 п	ncluding grants of \$) (Revenue \$	2,844,247)				
	INFORMATION AND MEI UNITED STATES AND IS		' CONFERENCE ANNU	ALTHREE DAY EVENT HE	LD TO NUTURE AND ADVANCE TI	HE RELATIONSHIP BETWEEN THE				
	(Code) (Expenses \$	3,171,714 II	ncluding grants of \$) (Revenue \$	120,312)				
4c	`) (Expenses \$ MBER EDUCATION - SUMM)			, , , , , ,	120,312)				
4d	Other program serv	rices (Describe in Sc	nedule O) See als	o Additional Data fo	r Description					
	(Expenses \$	491,327 in	cluding grants of \$	5) (Revenue \$)				
4e	Total program serv	ice expenses►\$	35,823,897							

Part TV	Checklist	of Rec	mired	Sche	dules
4.11.	CIICCNIISE	01 1/0/	1411 C 4	2011	uuics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, 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 term, permanent,or quasi- endowments? <i>If</i> " <i>Yes," complete Schedule D, Part V</i>	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, line10? 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		Νο
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Νο
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	
e	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? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	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, XII, and XIII 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	, , , , ,	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	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	Yes	
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		Νο
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	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) and 501(c)(4) 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		Νo
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νo
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
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		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Form 990 (2010)															
	Part V	Sta	tem	ents	R	egar	ding	Other	IRS	Filings	and	Tax	Со	mplia	nce
		- 1		- 1		_							_		

the Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	364 37 2b 3a 3a 3b	Yes	No
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and report gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other au over, a financial account in a foreign country (such as a bank account, securities account, or other finar account)? b If "Yes," enter the name of the foreign country IS See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Account in a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact or If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	364 37 2b 3a 3b thority		
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the statements filed for the calendar year ending with or within the year covered by this return	2b 3a 3b thority	Yes	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns. Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0 4a At any time during the calendar year, did the organization have an interest in, or a signature or other au over, a financial account in a foreign country (such as a bank account, securities account, or other finan account)? b If "Yes," enter the name of the foreign country ►IS See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Account any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact or If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5a 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? 5a Did the organization include with every solicitation an express statement that such contribution were not tax deductible? 5b If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	2b 3a 3b thority	Yes	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	2b 3a 3b thority	Yes	1
 Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b thority	103	
year?	. 3b		
 b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	. 3b		
At any time during the calendar year, did the organization have an interest in, or a signature or other au over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country ►IS See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts to a prohibited tax shelter transaction at any time during the tax year? . b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? . c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	thority	Yes	
over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country ►IS See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts to a prohibited tax shelter transaction at any time during the tax year? . b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	•	Yes	
b If "Yes," enter the name of the foreign country ►IS See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Acc b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	Ciai		
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Acc 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	4a	Yes	
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 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?	10n ² 5b		Νο
 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?			
 organization solicit any contributions that were not tax deductible?	5с		
 b If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible?	6a	Yes	
 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go 			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	6Ь	Yes	
	ods and 7a		
	Jus and 7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was rile Form 8282?	equired to		
d If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contrac	t? 7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Forr required?	n 8899 as 7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizati	on file a		
Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization the supporting organization, or a donor advised fund maintained by a sponsoring organization, have exceeding the supporting organization and section 509(a)(3) supporting organization.			
business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	. 9a		<u> </u>
b Did the organization make a distribution to a donor, donor advisor, or related person?	. 9ь		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
facilities			
11 Section 501(c)(12) organizations. Enter			
a 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) 11b			
	412		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10- b If "Yes," enter the amount of tax-exempt interest received or accrued during the	41? 12a		
year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2			
b Enter the amount of reserves the organization is required to maintain by the states	<u> </u>		
in which the organization is licensed to issue qualified health plans		1	1
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?			
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14a		Νο

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

Se	ection 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								
b	Enter the number of voting members included in line 1a, above, who are independent								
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	Does the organization have members or stockholders?	6		No					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No					
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	The governing body?	8a	Yes						
ь	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		103	No					
Se	organization's mailing address? If "Yes," provide the names and addresses in Schedule O ection B. Policies (This Section B requests information about policies not required by the Internal			NO					
	evenue Code.)								
			Yes	No					
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes						
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes						
11a	11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form								
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"								
12	describe in Schedule O how this is done	12c	Yes Yes						
13									
14 15	Does the organization have a written document retention and destruction policy?	14	Yes						
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15-	Yes						
	The organization's CEO, Executive Director, or top management official	15a	Yes						
ь	Other officers or key employees of the organization	15b	res						
	Ti fes to fine 15a of 15b, describe the process in schedule of (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," has the organization adopted a written policy or procedure requiring the organization to evaluate its								
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Se	ection C. Disclosure								
17	List the States with which a copy of this Form 990 is required to be filed ►AL , AK , AZ , AR , CA , CO , CT , DC , F KY , LA , ME , MD , MA , MI , MN , MS , I NY , NC , ND , OH , OK , OR , PA , RI , S WA , WV , WI	MO,N	H,NJ,	NM,					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)								

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization BARBARA SPELMAN
 251 H STREET NW
 WASHINGTON, DC 20001
 (202) 639-5200

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

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, and current key employees 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 instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	Posi	(C) Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
See Additional Data Table	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
-										
			<u> </u>							

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

	(A) Name and Title	(B) Average hours	1	tion (that a	(che		II		(D) Reportable compensation	(E) Reportable compensation			ited fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	;	compens from t rganizati relati organiza	:he on and ed
See A	Addıtıonal Data Table												
							+						
1b	Sub-Total					•	<u></u>	Þ					
	Total from continuation sheets	· · · · · · · · · · · · · · · · · · ·					-		2.672.025				202.256
d							•	<u> </u>	2,673,035		0	•	303,256
2	Total number of individuals (incl \$100,000 in reportable compen	_					above) wnc	received more tha	n			
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch					eye •	mploy •	ee, o	r highest compensa	ated employee	3		No
4	For any individual listed on line organization and related organization										4	Yes	
5	Did any person listed on line 1a	receive or accri	ie comi	- oensa	tion	fror	n anv	- unrel	lated organization o	r individual for	4	res	
	services rendered to the organiz						-		-	•	5		N o
S	ection B. Independent Con												
1	Complete this table for your five \$100,000 of compensation from			ndep	ende	ent o	ontra	tors	that received more	than			

(A) Name and business address	(B) Description of services	(C) Compensation
AGENCY Q 1110 13TH STREET 450 WASHINGTON, DC 20005	CONFERENCE SERVICE	931,696
NEW DEMAND 8 SOUTHVIEW DRIVE BOONTON, NJ 07005	CONFERENCE SERVICE	486,450
CITY SECURITY CONSULTANTS INC 2010 KENDALL ST NE WASHINGTON, DC 20002	CONSULTING SERVICE	444,643
PINKERTON CONSULTING PO BOX 406394 ATLANTA, GA 40639	CONSULTING SERVICE	207,659
RATIONAL PUBLIC RELATIONS 1501 M STREET 614 WASHINGTON, DC 20005	PR SERVICES	120,000
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►5) who received more than	

				(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512, 513, or	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a b Membership dues 1b 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 g Noncash contributions included in lines 1a-1f \$	11,500,000 6,610,181 46,128,267 109,291				514	
	h Total. Add lines 1a-1f	ısıness Code	64,238,448				
Program Service Revenue	ANNUAL CONFERENCE b c d e	900099	2,964,559	2,964,559			
Prog	f All other program service revenue g Total. Add lines 2a-2f		2,964,559				
	3 Investment income (including dividends, interest and other similar amounts)		288,904			288,904	
		ıı) Personal					
	(i) Securities 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 7	(II) O ther	210,579			210,579	
Other Revenue	(not including \$ 11,500,000 of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events	208,941 1,263,072	-1,054,131			_	
	9a Gross income from gaming activities See Part IV, line 19 . a b Less direct expenses b c Net income or (loss) from gaming activities		, ,			1,054,131	
	returns and allowances . a b Less cost of goods sold b c Net income or (loss) from sales of inventory						
	MISCEllaneous Revenue 11a BUILDING SIGN REVENUE b OTHER INCOME c	531390 900099	109,912 103,740		109,912	103,740	
	d All other revenue e Total. Add lines 11a-11d		213,652				
	12 Total revenue. See Instructions		66,862,011		109.912	-450,908	

	990 (2010)				Page 10
Par	t IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations mus Il other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	general expenses	expenses
2	Grants and other assistance to individuals in the			-	
	U S See Part IV, line 22]	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,342,531	777,290	205,191	360,050
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	13,128,688	7,601,164	2,006,574	3,520,950
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,913,049	1,107,605	292,388	513,056
9	Other employee benefits	3,448,583	1,996,639	527,078	924,866
10	Payroll taxes	1,595,023	923,476	243,782	427,765
а	Fees for services (non-employees) Management				· ·
ь	Legal	510,620	86,913	423,707	
с	Accounting	198,149	33,066	165,083	
d	Lobbying	·			
e	Professional fundraising services See Part IV, line 17	735,089			735,089
f	Investment management fees	29,020	4,843	24,177	·
g	Other	1,428,504	255,072	 	
12	Advertising and promotion	563,239	313,189	55,114	194,936
13	Office expenses	718,762	433,487	3,076	282,199
14	Information technology	130,702	124,723		5,979
15	Royalties	,			· · · · · · · · · · · · · · · · · · ·
16	Occupancy	1,585,939	636,117	236,650	713,172
17	Travel	981,269		<u> </u>	286,135
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				· · · · · ·
19	Conferences, conventions, and meetings	23,252,190	20,071,432	1,666,707	1,514,051
20	Interest	534,064		534,064	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,386,979		2,386,979	
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	BAD DEBT EXPENSE	3,685,711		3,685,711	
b	GENERAL OPERATIONS	1,710,920	561,659	995,289	153,972
c	OTHER EXPENSE	491,597		491,597	
d	EQUIPMENT RENTAL AND MA	450,124	36,415	349,935	63,774
е	MAILING COSTS	449,531	269,490		180,041
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	61,270,283	35,823,897	15,570,351	9,876,035
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	· · · · · · · · · · · · · · · · · · ·				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			117,567	1	108,167
	2	Savings and temporary cash investments			19,056,661	2	24,122,973
	3	Pledges and grants receivable, net			9,809,740	3	8,043,135
	4	Accounts receivable, net			118,427	4	52,004
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$, and contributing e sponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions)	mploy	ers, and			
ets		Schedule L				6	
ssets	7	Notes and loans receivable, net			125,631	7	183,458
₹	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			912,581	9	720,127
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	58,166,293			
	ь	Less accumulated depreciation	10Ь	11,452,181	47,677,967	10c	46,714,112
	11	Investments—publicly traded securities	6,315,204	11	10,140,667		
	12	Investments—other securities See Part IV, line 11				12	2,993,822
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			5,828,108	15	11,986,298
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			89,961,886	16	105,064,763
	17	Accounts payable and accrued expenses .			4,356,062	17	5,644,865
	18	Grants payable				18	
	19	Deferred revenue			2,241,388	19	3,016,843
	20	Tax-exempt bond liabilities				20	
es S	21	Escrow or custodial account liability Complete Part IV of Schedul	le D .			21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ē		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties			19,783,162	23	28,904,834
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			12,025,931	25	12,163,673
	26	Total liabilities. Add lines 17 through 25			38,406,543	26	49,730,215
- N		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	olet e l	ines 27			
<u>9</u>		through 29, and lines 33 and 34.					
ਨੁੰ	27	Unrestricted net assets			49,746,085	27	47,077,182
Fund Balance	28	Temporarily restricted net assets			1,609,258	28	8,057,366
Ξ	29	Permanently restricted net assets			200,000	29	200,000
		Organizations that do not follow SFAS 117, check here ► ar lines 30 through 34.	nd com	plet e			
S O.	30	Capital stock or trust principal, or current funds				30	
Ą	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Assets	32	Retained earnings, endowment, accumulated income, or other fu				32	
Net ,	33	Total net assets or fund balances			51,555,343		55,334,548
Ž	34	Total liabilities and net assets/fund balances			89,961,886		105,064,763
					35,55.,300		. 35,55 1,7 56

Pa	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		66.8	362,01:
2	Total expenses (must equal Part IX, column (A), line 25)	2			270,283
3	Revenue less expenses Subtract line 2 from line 1	3		5,5	591,728
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		51,5	555,343
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-1,8	312,523
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		55,3	34,548
Pai	rt XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		•	৷~	
	<u> </u>			Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	ssued			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		Νο
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

DLN: 93493115006052

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. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-EZ)

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

- ◆ 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," to 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

If th	, , , , -	t have NOT filed Form 5768 (electi s," to Form 990, Part IV, Line 5 zations Complete Part III		•	•
	me of the organization ERICAN ISRAEL PUBLIC AFFAIRS COMM	ПТЕЕ		Employer iden	tification number
Airii	ERICAN ISRAEL FODEE AFFAIRS COMM	ITTEE		53-0217164	
Par	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign ac	tivities in Part IV	
2	Political expenditures			▶	\$
3	V olunteer hours				
Dar	+T-D Complete if the or	ganization is exempt und	er section 501/	(2)(3)	
1	•	e tax incurred by the organization	_		ф
2		e tax incurred by organization ma			→
3		section 4955 tax, did it file Form		m +333	Yes No
4a	Was a correction made?	rection 1999 tax, and it me form	1720 101 11113 year		Γ Yes Γ No
ь	If "Yes," describe in Part IV				, 100 , 110
		ganization is exempt und	er section 501(c) except section 501	l(c)(3).
1		ended by the filing organization fo	_		\$
2	Enter the amount of the filing o	organization's funds contributed t	o other organization	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter h	ere and on Form 112	20-POL, line 17b	¢
4	Did the filing organization file I	Form 1120-POI for this year?			▼
5	organization made payments l amount of political contribution	nd employer identification numbe For each organization listed, ente ns received that were promptly ai political action committee (PAC)	r the amount paid fr nd directly delivered	om the filing organization's f I to a separate political orga	unds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Sch	edule C (Form 990 or 990-EZ) 2010			Р	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT fi	led Fo		
		(a	1)	(b)	
		Yes	No	A mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Γ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t IIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), o	r sectio	n
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1 Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	No

Par	t III-B	Complete if the organization is exempt under section $501(c)(4)$, section 50)1(c)	(5), or section
		501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III	I-A,	line 3 is
		answered "Yes".		
1	Dues. as	sessments and similar amounts from members	1	

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

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As Filed Data

DLN: 93493115006052

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE 53-0217164 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d

3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during
	the taxable year ▶
4	Number of states where property subject to conservation easement is located ►
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨
7	A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements
) a i	Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D Schedule D (Form 990) 2010

Par	444 Organizations Maintaining Co	ollections of Art	:, His	torical	Treas	ures, or Ot	the	<u>r Similar As</u>	sets (c	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e followir	ng that a	are a significa	nt us	se of its collect	ion	
а	Public exhibition		d	☐ Lo	an or ex	change progra	ams			
b	Scholarly research		e	┌ ot	her					
с	Preservation for future generations									
4	Provide a description of the organization's c Part XIV	ollections and expla	ın hov	v they fur	ther the	organization'	s ex	empt purpose ı	n	
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•					Yes	┌ No
Par	t IV Escrow and Custodial Arrang	•				on answered	l "Ye	es" to Form 9	90,	
	Part IV, line 9, or reported an ar		•							
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other asse	ets n	ot J	Yes	Г No
Ь	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ing table		_		A		
_						<u> </u>	_	Am	ount	
C	Beginning balance					<u> </u>	1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance					[:	1f			
2a	Did the organization include an amount on F		e 21?					J	Yes	│ No
	If "Yes," explain the arrangement in Part XI									
Рa	rt V Endowment Funds. Complete	(a)Current Year		wered " Prior Year		Form 990, Two Years Back		Three Years Back	(e)Four	Years Back
1a	Beginning of year balance	200,000	(6)	200,	<u> </u>	200,000	+	Tillee Tears back	(C) Our	rears back
ь	Contributions									
c	Investment earnings or losses	14,231								
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs									
f	Administrative expenses	244 224		200	000	200.000				
g	End of year balance	214,231		200,	000	200,000	'			
2	Provide the estimated percentage of the year	ar end balance held a	as							
а	Board designated or quasi-endowment 🕨									
Ь	Permanent endowment 🕨 93 360 %									
c	Term endowment ► 6640 %									
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	atıon t	that are h	neld and	administered	for	the	Yes	No
	(i) unrelated organizations							3a(No
	(ii) related organizations							3a(i	ii)	Νο
b	If "Yes" to 3a(II), are the related organization	ns listed as require	d on S	chedule	R?.			3b	,	
4	Describe in Part XIV the intended uses of th									
Par	t VI Investments—Land, Building	s, and Equipme	nt. S	<u>ee Form</u> T	า 990, I	Part X, line 1	10.			
	Description of investment				or other estment)	(b)Cost or oth basis (other		(c) Accumulated depreciation	(d) Bo	ook value
1a	Land					8,647,	068			8,647,068
b	Buildings		•			36,898,	216	3,375,969) :	33,522,247
c	Leasehold improvements					915,	760	551,098	3	364,662
d	Equipment					11,705,	249	7,525,114	1	4,180,135
e	Other					1			1	

46,714,112

Part VII Investments—Other Securities. See I	Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value		od of valuation f-year market value
(1)Financial derivatives		33237373	, your market raide
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	<u>Form 990, Part X, line :</u> I	1	
(a) Description of investment type	(b) Book value		od of valuation f-year market value
			·
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin	e 15.		
(a) Descrip	tion		(b) Book value
(1) DEPOSITS			1,746,581
(2) DUE FROM AFFILIATE			10,090,556
(3) INTEREST RECEIVABLE			11,262
(4) ORGANIZATIONAL COST			8,837
(5) INSURANCE CASH SURRENDER VALUE			129,062
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:			11,986,298
Part X Other Liabilities. See Form 990, Part X		<u> </u>	11,500,290
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	-		
DEFERRED RENT	702,626		
PAYABLE TO AFFILIATE	10,000,000		
CAPITAL LEASE LIABILITY	384,516		
INTEREST RATE SWAP AGREEMENT	1,076,531		
Total (Column (h) chould agual Form 200, Part V L(R) has 25.)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	12,163,673		

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	66,862,011
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	61,270,283
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,591,728
4	Net unrealized gains (losses) on investments	4	-602,739
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,209,784
9	Total adjustments (net) Add lines 4 - 8	9	-1,812,523
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	3,779,205
	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	
1	Total revenue, gains, and other support per audited financial statements	1	67,427,651
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 112,250		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	565,640
3	Subtract line 2e from line 1	3	66,862,011
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	66,862,011
	TXIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	63,648,446
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	2,451,853
3	Subtract line 2e from line 1	3	61,196,593
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b 73,690		
c	Add lines 4a and 4b	4c	73,690
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	61,270,283
Pa	rt XIV Supplemental Information		

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information							
Ident if ier	Return Reference	Explanation					
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE COMMITTEE INVESTS ALL ENDOWMENT FUNDS IN A POOLED FUND MANAGED BY AN INVESTMENT MANAGER ACCORDING TO THE OBJECTIVES AND GUIDELINES OF THE COMMITTEE'S INVESTMENT POLICY CURRENTLY, THE COMMITTEE HAS CHOSEN NOT TO SPEND THE ENDOWMENT EARNINGS					
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	AIPAC IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE THE COMPANY IS A LIMITED LIABILITY COMPANY (LLC) WHOSE SOLE MEMBER IS AIPAC CONSEQUENTLY, THE COMPANY IS A DISREGARDED ENTITY FOR FEDERAL AND STATE INCOME TAX PURPOSES THERE WAS NO NET TAX LIABILITY FOR UNRELATED BUSINESS INCOME FOR THE YEAR ENDED SEPTEMBER 30, 2011 THE COMMITTEE FOLLOWS THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, THE COMMITTEE MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS MANAGEMENT EVALUATED THE COMMITTEE HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE GENERALLY, THE COMMITTEE IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE US FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2008					
PART XI, LINE 8 - OTHER ADJUSTMENTS		CURRENCY LOSS -133,253 INTEREST RATE SWAP AGREEMENT -1,076,531					
PART XII, LINE 2D - OTHER ADJUSTMENTS		PENSION FORFEITURE CLASSIFED AS EXPENSE -73,690 CURRENCY LOSS -133,253 FUNDRAISING EXPENSE REPORTED ON LINE 8B 1,263,072					
PART XIII, LINE 2D - OTHER ADJUSTMENTS		INTEREST RATE SWAP AGREEMENT 1,076,531 FUNDRAISING EXPENSE REPORTED ON LINE 8B 1,263,072					
PART XIII, LINE 4B - OTHER ADJUSTMENTS		PENSION FORFEITURE CLASSIFED AS EXPENSE 73,690					

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2010

Open to Public Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Statement of Activities Outside the United States

Name of the organization
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTE

Employer identification number

МЕ	RICAN ISRAEL PUBLIC AFFAIR	S COMMITTEE			53-0217164	
Pa	rt I General Informatio "Yes" to Form 990, Pa			he United States.		zation answered
1	For grantmakers. Does the assistance, the grantees' elig	organization n	naıntaın record		-	
	the grants or assistance?					│ Yes │ No
2	For grant makers. Describe in Pa United States	irt V the organiz	zation's procedu	res for monitoring the us	e of grant funds outside	the
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	a (f) Total expenditures for region/investments in region
	MIDDLE EAST AND NORTH AFRICA	1	8	PROGRAM SERVICES	INFORMATION AND EDUCATION	1,541,572
	Sub-total	1	8			1,541,572
b	Total from continuation sheets to Part I	0	0			

8

c Totals (add lines 3a and 3b)

1,541,572

Pa	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000										
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
2	Enter total nur tax-exempt by	mber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►			
3	Enter total nur	mber of other	organızatıons or en	tities				. ▶			
								Schodulo F	(Form 990) 2010		

Part III	Grants and Other Assistance to	Individuals	Outside the Unit	ed States. Complete	if the organization a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if additional space is nee	eded.		-	_		

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			1				
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		+	<u> </u>			 	+
			<u> </u>		<u> </u>	<u> </u>	<u> </u>

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	₹	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	~	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	굣	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	্	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Additional Data

Software ID:

Software Version:

EIN: 53-0217164

Name: AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE

Schedule F (Form 990) 2010

Page **5**

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

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OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Mail solicitations

SCHEDULE G

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

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public Inspection

Name of th	e organization
AMERICA	I ISRAEL PUBLIC AFFAIRS COMMITTEE

Internet and e-mail solicitations

Employer identification number

53-0217164

e Solicitation of non-government grants

Solicitation of government grants

Part I	Fundraising	Activities.	Complete if the	organization	answered	"Yes" to	Form 990	, Part IV	, line 17.
--------	-------------	-------------	-----------------	--------------	----------	----------	----------	-----------	------------

Indicate whether the organization raised funds through any of the following activities. Check all that apply

- Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990. Part VII) or entity in connection with professional fundraising services? **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (i) Name and address of (ii) Activity (iv) Gross receipts (vi) A mount paid to (iii) Did (v) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No DIRECT MAIL AB DATA 1808 SWANN STREET NW Νo 1.664.640 661.518 1,003,122 WASHINGTON, DC 20009 TELEMARKETING SIEGEL MARKETING GROUP 1845 N FARWELL AVE 300 Νo 219.861 73,571 146,290 MILWAUKEE, WI 53202 1,884,501 735,089 1,149,412
- List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

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

Pa	rt II	Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.								
			(a) Event #1 ANNUAL EVENT NY (event type)	(b) Event #2 ANNUAL EVENT LA (event type)	(c) O ther Events 2 (total number)	(d) Total Events (Add col (a) through col (c))				
φ	1	Gross receipts	6,400,000	2,208,941	3,100,000	11,708,941				
Revenue	2	Less Charitable contributions	6,400,000	2,000,000	3,100,000	11,500,000				
<u>~</u>	3	Gross income (line 1 minus line 2)		208,941		208,941				
	4	Cash prizes								
မှာ	5	Non-cash prizes								
Expenses	6	Rent/facility costs								
ă	7	Food and beverages								
Direct Direct	8	Entertainment								
Δ	9	Other direct expenses .	585,182	543,799	134,091	1,263,072				
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		1,263,072				
	11	Net income summary Combine li	nes 3 and 10 ın column (d)		-1,054,131				
Par	t III	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than				
Revenue			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))				
	1	Gross revenue								
Ses	2	Cash prizes								
Expenses	3	Non-cash prizes								
	4	Rent/facility costs								
Direct	5	Other direct expenses								
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	┌ Yes %					
	7	Direct expense summary Add line	s 2 through 5 ın column (d)						
	8	Net gaming income summary Com	ibine lines 1 and 7 in colu	ımn (d)	<u> ▶ </u>					
9 a b	Is t	er the state(s) in which the organiza the organization licensed to operate No," Explain	gaming activities in eac			· Fyes FNo				
10a b		re any of the organization's gaming Yes," Explain			the tax year?	「Yes 「No				

revenue?	11	Does the organization operate ga	aming activities with nonmembers? .		┌ _{Yes} ┌ _{No}
Indicate the percentage of gaming activity operated in a The organization's facility An outside facility Interpretation is facility Address Name Address Does the organization have a contract with a third party from whom the organization's gaming/special events books and records Name Address Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization \$ \$ and the amount of gaming revenue retained by the third party \$ \$ and the amount of gaming revenue retained by the third party \$ \$ and the amount of gaming revenue retained by the third party \$ \$ and the amount of gaming manager information Name Address Address Description of services provided Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ \$ Partivices \$ Partivices \$ Partivices \$ \$ Partivices \$ Partivices \$ Partivices \$ \$ Partivices \$ \$ Partivices \$ \$ \$ Partivices \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	L2	Is the organization a grantor, ber	neficiary or trustee of a trust or a mem	ber of a partnership or other entity	
a The organization's facility		formed to administer charitable g	gaming?		┌ _{Yes} ┌ _{No}
An outside facility	L3	Indicate the percentage of gamir	ng activity operated in		
Name ► Address ► LSa Does the organization have a contract with a third party from whom the organization receives gaming revenue?	а	The organization's facility		13a	
Address ► Address ► Address ► Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming manager information Name ► Gaming manager compensation ►\$ Description of services provided ► Director/officer	b	An outside facility		13b	
Address ► Address ► Address ► Does the organization have a contract with a third party from whom the organization receives gaming revenue?	14		fthe person who prepares the organiza	tion's gaming/special events books and	
Address ► 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		records			
Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Name 🟲			
revenue?		Address 🟲			
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming and address Name ▶ Address ▶ Address ▶ Gaming manager information Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Independent contractor 17 Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	15a	Does the organization have a cor	ntract with a third party from whom the	organization receives gaming	
amount of gaming revenue retained by the third party \(\) \\$ C If "Yes," enter name and address Name \(\) Address \(\) Address \(\) Gaming manager information Name \(\) Gaming manager compensation \(\) \\$ Description of services provided \(\) Director/officer \(\) Employee \(\) Independent contractor 17 Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? \(\) \(\) \(\) \(\) \(\) Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \(\) \\$ Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)		revenue?			┌ _{Yes} ┌ _{No}
Address ► Address ► Address ► Gaming manager information Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer	b				
Address ► Address ► Address ► Gaming manager information Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer	_				
Address Gaming manager information Name Gaming manager compensation \$ Description of services provided Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		ir yes, entername and address	5		
Name Gaming manager compensation \$ Director/officer		Name 🟲			
Name Gaming manager compensation \$ Director/officer					
Name Gaming manager compensation \$ Director/officer		Address 🟲			
Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer					
Gaming manager compensation ► \$ Description of services provided ► Director/officer	16	Gaming manager information			
Description of services provided ► Director/officer					
Gaming manager compensation ► \$ Description of services provided ► Director/officer		N b			
Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Name F			
Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Gaming manager compensation	\$		
If the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Description of services provided	•		
If the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		-	- .		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		,	I Employee	I Independent contractor	
retain the state gaming license?		•	er state law to make charitable distribi	itions from the gaming proceeds to	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)	4				
In the organization's own exempt activities during the tax year ► \$ Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)	b	<u> </u>			res I No
instructions.)	-				
	Par	t IV Complete this part to p		responses to question on Schedule G (se	ee
		•	ReturnReference	Evalanation	

DLN: 93493115006052

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

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AME	AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE 53-0217164					
Pa	rt I Questions Regarding Compensation					
			_		Yes	Νo
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to p					
	First-class or charter travel	Housing allowance or residence for p	personal use			
	Travel for companions	Payments for business use of persor	nal residence			
	<u> </u>	Health or social club dues or initiation				
	Discretionary spending account	Personal services (e g , maid, chauff	eur, chef)			
b	b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?					
3	Independent compensation consultant		ion committee			
4	During the year, did any person listed in Form 990, Part or a related organization	VII, Section A , line 1a with respect to th	e filing organization			
а	Receive a severance payment or change-of-control payn	nent from the organization or a related or	ganization?	4a		Νo
Ь	Participate in, or receive payment from, a supplemental r	nonqualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-based	compensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	e the applicable amounts for each item in	Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must corporate on the section A, line compensation contingent on the revenues of		у			
а	The organization?			5a		Νo
b	Any related organization?		Ī	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	1a, did the organization pay or accrue an	y			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," descr		-fixed	7		Νo
8	Were any amounts reported in Form 990, Part VII, paid of subject to the initial contract exception described in Reg in Part III			8		No
9	If "Yes" to line 8, did the organization also follow the reb	uttable presumption procedure described	d in Regulations			

section 53 4958-6(c)?

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

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation	
(1)		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
1) HOWARD KOHR	(I) (II)	506,232 0	0	0	25,128 0	18,633 0	549,993 0		
2) RICHARD FISHMAN	(ı) (ıı)	426,912 0	0 0	C	25,128 0	18,633 0	470,673 0		
3) CHRYSTAL KERN	(I) (II)	296,609 0	0	C	25,128 0	128 0	321,865 0		
(4) JONATHAN MISSNER	(ı) (ıı)	348,376 0	0	0	25,128 0	18,633 0	392,137 0		
(5) ROBERT BASSIN	(ı) (ıı)	288,527 0	0	C	25,128 0	18,633	332,288 0		
(6) MARVIN FEUER	(ı) (ıı)	292,212 0	0	0	25,128 0	12,653 0	329,993 0		
(7) BRAD GORDON	(ı) (ıı)	299,912 0	0	0	25,128 0	0	325,040 0		
(8) JEREMY RIDER	(ı) (ıı)	214,255 0	0	0	21,813	18,633	254,701 0		
9)									
10)									
11)									
[12)									
13)									
14)									
15)									
16)									

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation

Schedule J (Form 990) 2010

OMB No 1545-0047

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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

NonCash Contributions

Name of the organization
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE

Employer identification number

					53-0217164			
Pa	Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(c Method of determining amounts		contribut	tion
1	Art—Works of art			-9				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
jood								
_	Cars and other vehicles .							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded							
10	Securities—Closely held stock							
11	Securities—Partnership,							
4.5	LLC, or trust interests .							
	Securities—Miscellaneous Qualified conservation							
	contribution—Historic structures							
	Q ualified conservation contribution—O ther							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts .			·				
	Other ► (SUPPLIES)	X	1	15,291	+			
	Other ► (<u>CARPET</u>)	X	1	19,000	+			
	Other ► (<u>EQUIPMENT</u>)	X	1	75,000	J F M V			
	Other ► ()							
29	Number of Forms 8283 received b for which the organization complet				29			
	ior which the organization complet	euronni	5205, I dit IV, Dollee ACKI	iowieugement			Yes	No
30a	During the year, did the organization	on receiv	e hy contribution any prope	arty reported in Part I lines	: 1-28 that it		163	140
	must hold for at least three years							
	for exempt purposes for the entire			on, and which is not require	su to be useu	20-		No
						30a		NO
b	If "Yes," describe the arrangemen							
31	Does the organization have a gift a					31	<u> </u>	Νo
3∠a	Does the organization hire or use to contributions?	.nira parti	es or related organizations	to solicit, process, or sell	non-cash	32a		Νo
Ь	If "Yes," describe in Part II							
33	If the organization did not report re	evenuesı	n column (c) for a type of p	roperty for which column (a	a) is checked,			
	describe in Part II					1		

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493115006052

OMB No 1545-0047

2010

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SCHEDULE 0 (Form 990 or 990-EZ)

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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE **Employer identification number**

53-0217164

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE 990 IS REVIEWED BY THE CONTROLLER, EXTERNAL AUDITOR, CFO, AND THE BOARD OF DIRECTORS BEFORE FILING WITH THE IRS

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	CONFLICTS OF INTEREST PROHIBITED 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 THERE FROM, 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 SUCH 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 AUTHORIZED HOWEVER, SHOULD THE POLICY OR BUSINESS TO BE ADOPTED OR CONDUCTED BY AIPAC INVOICE 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 MANAGEMENT COMMITTEE FOR REVIEW AND RECOMMENDATION TO THE BOARD 3 UPON DISCLOSURE OF SUCH RELATIONSHIP INTEREST AND/OR RECOMMENDATION OF THE MANAGEMENT COMMITTEE 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 SHALL NOT PARTICIPATE IN ANY OF THE DISCUSSIONS CONCERNING THE AUTHORIZATION OR OTHERWISE VOTE IN THE MATTER BEING DISCUSSED 4 THE MINUTES OF ANY SUCH MEETING SHALL REFLECT THE DISCLOSURE SHALL NOT PARTICIPATE IN ANY OF THE DISCUSSION OF THE EXISTENCE OF A QUORUM OR OTHERWISE VOTE IN THE MATTER BEING DISCUSSED 4 THE MINUTES OF ANY SU

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION COMMITTEE REVIEWS ALL SENIOR STAFF COMPENSATION TAKING INTO ACCOUNT REVIEWS CURRENT INDUSTRY DATA ON LIKE POSITIONS, AND DECISIONS ARE DOCUMENTED AS WELL

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	UPON REQUEST

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -602,739 CURRENCY LOSS -133,253 INTEREST RATE SWAP AGREEMENT -1,076,531 TOTAL TO FORM 990, PART XI, LINE 5 - 1,812,523

Identifier	Return Reference	Explanation
	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

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE	Employer iden	Employer identification number					
				53-0217164			
Part I Identification of Disregarded Entities (Complete if the organ	nization answered "Yes	" on Form 990, Pai	rt IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary acti	vity (c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	g	
(1) 251 MASSACHUSETTS AVENUE LLC 251 H STREET NW WASHINGTON, DC 20001 20-4721352	LEASING	DC	3,906,191	46,044,3	AMERICAN ISRAEL PUB 15 AFFAIRS COMMITTEE	BLIC	
Part II Identification of Related Tax-Exempt O or more related tax-exempt organizations du		plete if the organization	n answered "Yes" (on Form 990, Pari	IV, line 34 becaus	e it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	(g) 512(b)(1 trolled nization
(1) AMERICAN ISRAEL EDUCATION FOUNDATION 251 H STREET NW WASHINGTON, DC 20001 52-1623781	PROVIDE EDU & INFORMATION ABOUT RELATIONSHIP BETWE THE U S AND ISRAEL		501(C)(3)	LINE 7	AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE	Yes	No
<u> </u>							

because	it had one or mo	ore relat	ed organizations t	reated as a partne	ership during the t	ax yeaı	r.)									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	of total income Share of er		ome (g) Share of end-of-year assets		(h Disprop allocat	ortionate	(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	(j) Gener mana partr	al or ging	(k) Percentage ownership
								Yes	No			Yes	No			
_																
				l ble as a Corpora ations treated as a						l nswered "Y	es" on	Form	990,	Part IV,		
Name, address, and	(a) d EIN of related organiz	ation	(b) Primary activity	(c) Legal domicile (state or foreign country)	(c Direct co ent	ntrolling	(e) Type of er (C corp, S or trust	corp,	Share o	(f) f total income	Shai end-o	g) re of f-year sets		(h) Percentage ownership		
													+			

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34

chedule R (Form 990) 2010					Page	e 3
Part V Transactions With Related Organizations (Complete if the organization answered	"Yes" on Form 990, Pa	art IV, line 34, 35, 3	5A, or 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III or IV				Y	es	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related of	organizations listed in Par	ts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			16	а		No
b Gift, grant, or capital contribution to other organization(s)			11	ь		No
c Gift, grant, or capital contribution from other organization(s)			10	c Y	es	
d Loans or loan guarantees to or for other organization(s)			10	d		No
e Loans or loan guarantees by other organization(s)			10	e		No
f Sale of assets to other organization(s)			11	F		No
g Purchase of assets from other organization(s)			19	9		No
h Exchange of assets			11	h		No
i Lease of facilities, equipment, or other assets to other organization(s)			1			No
			1:	+		No
j Lease of facilities, equipment, or other assets from other organization(s)			11	_		No
k Performance of services or membership or fundraising solicitations for other organization(s)			1	_		No
Performance of services or membership or fundraising solicitations by other organization(s)						140
m Sharing of facilities, equipment, mailing lists, or other assets				m Y		
n Sharing of paid employees			1	n Y	es	
Reimbursement paid to other organization for expenses			10	-		No
p Reimbursement paid by other organization for expenses			11	p Y	es	
q Other transfer of cash or property to other organization(s)			10			No
r Other transfer of cash or property from other organization(s)			1	<u> </u>		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this lii	ne, including covered rela	tionships and transact	ıon thresholds			
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of detem Involv	nınıng	amou	ınt
1) AMERICAN ISRAEL EDUCATION FOUNDATION	С	6,610,181	CASH			
A) AMERICAN TODAY FOUNDATION		†				

(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	Method of determining amount involved
(1) AMERICAN ISRAEL EDUCATION FOUNDATION	С	6,610,181	CASH
(2) AMERICAN ISRAEL EDUCATION FOUNDATION	Р	18,149,039	CASH
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(a) ddress, and EIN of entity Primary activity (c) Legal domicile (state or foreig country)		501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		(h) neral or naging irtner?	
			Yes	No		Yes	No		Yes	No	
			-								
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Ident if ier Ret urn Reference Explanation	Ident if ier		Explanat ion
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Schedule R (Form 990) 2010

Software ID: Software Version:

EIN: 53-0217164

Name: AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE

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

Compensated Employees, and In (A)	(D)	(F)							
Name and Title	(B) A verage hours		tion (that a	(che	II		Reportable compensation	(E) Reportable compensation	Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee		 Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
LEE ROSENBERG PRESIDENT	8 00	Х		Х			0	0	0
JEFFREY SNYDER SECRETARY/TREASURER	8 00	Х		х			0	0	0
DENNIS ALBERS VP	8 00	Х		х			0	0	0
HERTA AMIR VP	8 00	Х		х			0	0	0
ROBERT ASHER VP	8 00	Х		х			0	0	0
PAUL L BAKER V P	8 00	Х		х			0	0	0
RICHARD BASSUK VP	8 00	Х		х			0	0	0
NORM BROWNSTEIN VP	8 00	Х		х			0	0	0
ROBERT COHEN VP	8 00	Х		х			0	0	0
MARSHALL COOOPER VP	8 00	Х		х			0	0	0
DAVID CORDISH VP	8 00	Х		х			0	0	0
TED CUTLER VP	8 00	Х		х			0	0	0
ANN DAVIS VP	8 00	Х		х			0	0	0
PHIL DARIVOFF VP	8 00	Х		х			0	0	0
JON P DIAMOND VP	8 00	Х		х			0	0	0
BOB DIENER VP	8 00	Х		х			0	0	0
MELVIN DOW VP	8 00	Х		х			0	0	0
IKE FISHER VP	8 00	Х		х			0	0	0
AMY FRIEDKIN VP	8 00	Х		х			0	0	0
HOWARD E FRIEDMAN VP	8 00	Х		х			0	0	0
SANDER GERBER VP	8 00	Х		х			0	0	0
HOWARD GREEN VP	8 00	Х		х			0	0	0
STEVE GROSSMAN VP	8 00	Х		Х			0	0	0
RUSSELL HOLDSTEIN VP	8 00	Х		х			0	0	0
ADA HORWICH VP	8 00	Х		х			0	0	0

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours	Posi t	tion (hat a	che)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Former Highest compensated employee Key employee Officer		Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
LONNY KAPLAN VP	8 00	Х		х				o	0	0	
BOB KARGMAN VP	8 00	Х		Х				0	0	0	
MICHAEL KASSEN VP	8 00	Х		х				0	0	0	
BETSY KORN VP	8 00	Х		Х				0	0	0	
MICHAEL LEVIN VP	8 00	х		х				0	0	0	
EDWARD CL LEVY JR VP	8 00	Х		Х				0	0	0	
BERNICE MANO CHERIAN VP	8 00	х		х				0	0	0	
BARRY MANNIS VP	8 00	Х		х				0	0	0	
CARLYN MAYER VP	8 00	Х		х				0	0	0	
ROBERT MAZER VP	8 00	Х		х				0	0	0	
LARRY MIZEL VP	8 00	Х		х				0	0	0	
AMNON RODAN VP	8 00	Х		х				0	0	0	
STEVEN PL ROSENTHAL VP	8 00	Х		х				0	0	0	
YOSSI SIEGEL VP	8 00	Х		х				0	0	0	
BARRY SILVERMAN VP	8 00	Х		х				0	0	0	
ROGER SOFER VP	8 00	Х		х				0	0	0	
ETA SOMEKH VP	8 00	Х		х				0	0	0	
DAVID STEINER VP	8 00	Х		х				0	0	0	
DONNA STERNBERG VP	8 00	Х		х				0	0	0	
ROSELYNE C SWIG VP	8 00	Х		х				0	0	0	
MIKE TUCHIN VP	8 00	Х		х				0	0	0	
DAVID VICTOR VP	8 00	Х		х				0	0	0	
LARRY WEINBERG VP	8 00	Х		Х				0	0	0	
TIM WULIGER VP	8 00	Х		х				0	0	0	
HARRIET ZIMMERMAN VP	8 00	Х		Х				0	0	0	

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

compensated Employees, and Independent contractors										
(A) Name and Title	(B) Average hours	1	tion (that a	che)		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
HOWARD KOHR EXECUTIVE DIRECTOR	40 00			х				506,232	0	43,761
RICHARD FISHMAN MANAGING DIRECTOR	40 00			х				426,912	0	43,761
CHRYSTAL KERN CFO	40 00			х				296,609	0	25,256
JONATHAN MISSNER DIR OF DEVELOPMENT&NATIONAL AFFAIRS	40 00					х		348,376	0	43,761
ROBERT BASSIN POLITICAL DIRECTOR	40 00					Х		288,527	0	43,761
MARVIN FEUER DIR, POLICY AND GOVERNMENTAL AFFAIRS	40 00					х		292,212	0	37,381
BRAD GORDON DIR, POLICY AND GOVERNMENTAL AFFAIRS	40 00					х		299,912	0	25,128
JEREMY RIDER DIR, OF MARKETING AND CREATIVE SERVICES	40 00					х		214,255	0	40,447

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)										
4d. Other program	services									
(Code) (Expenses \$	491,327	ıncludıng grants of \$) (Revenue \$)					
INFORMATION AN	ND MEMBER EDUCATION - M	EMBERSHIP	EVENTS							