Form 9

Department of the Treasury

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

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



Intern	al Revei	Go to www.irs.gov/Form990 for instructions and	i the latest	information.	mapecuon			
			ending					
Bc	heck if pplicabl	C Name of organization		D Employer identified	cation number			
a,								
	Addre: chang Name							
	chang			13-181872				
	return		Room/suite	E Telephone number				
	Final return/ termin	605 THIRD AVENUE		(212) 88				
_	ated Ameno	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	93,202,783.			
	_return	NEW IORK, NI 10138-3380	_	H(a) Is this a group re				
	tion pendir	F Name and address of principal officer: U OINAT HAIN GREENDLAT			? Yes X No			
	-	SAME AS C ABOVE		H(b) Are all subordinates in				
		empt status: X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. See instructions			
		e: WWW.ADL.ORG		H(c) Group exemption				
		organization: X Corporation Trust Association Other	L Year	of formation: 1913 N	State of legal domicile: DC			
Pa	rt I	Summary	I A B A					
ø		Briefly describe the organization's mission or most significant activities: ADL V						
anc		ELIMINATE ANTI-SEMITISM AND BIGOTRY IN THE US AND AROUND THE WORLD.						
Activities & Governance		Check this box 🕨 🛄 if the organization discontinued its operations or dispos		ets. 17				
Š				3	17			
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		Number of independent voting members of the governing body (Part VI, line 1b)			439			
ies		Total number of individuals employed in calendar year 2020 (Part V, line 2a)			3500			
Ĭž		Total number of volunteers (estimate if necessary)			<u> </u>			
Aci A		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
_	a	Net unrelated business taxable income from Form 990-T, Part I, line 11						
	8	Contributions and grants (Dart VIII line 1b)		Prior Year 78,152,040.	Current Year 85,020,986.			
ne		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		5,745,756.	5,397,934.			
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,430.	44,887.			
Be		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,918,360.	849,984.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		91,822,586.	91,313,791.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		24,000.	0.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		44,430,183.	-			
enses		Professional fundraising fees (Part IX, column (A), line 11e)		498,761.	209,898.			
ē				, , , ,,	,			

360. 849,984. 586. 91 313,791. ,000. 0. ,183. 47,394,412. 209,898. 761. b Total fundraising expenses (Part IX, column (D), line 25) Ъ 8,393,006. 31,681,604. 22,536,328. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 76,634,548. 70,140,638. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 21,173,153. 15,188,038. 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year P 46,795,249. 77,716,839. Total assets (Part X, line 16) 20 61,396,877. 42,694,464. 21 Total liabilities (Part X, line 26) El det 4,100,785. 16,319,962 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block

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

Sign Here	Signature of officer JONATHAN GREENBLATT, CEC	D/NATIONAL DIR.		Date			
	Type or print name and title						
Daid	Print/Type preparer's name P DANIEL ROMANO	Preparer's signature	Date	Check PTIN			
Paid		_					
Preparer	Firm's name 🕒 GRANT THORNTON LLI	P		Firm's EIN 🕨 36-6055558			
Use Only	Firm's address 757 THIRD AVENUE,	3RD FLOOR					
	NEW YORK, NY 1001			Phone no. (212) 599-0100			
May the I	May the IRS discuss this return with the preparer shown above? See instructions						
032001 12-2	032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)						

(Rev. January 2020)

### Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

<b>•</b>			
File	a separate	application fo	r each return.

► Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.* 

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	pe or         Name of exempt organization or other filer, see instructions.         Ta					on number (TIN)
print						18723
File by the due date for filing your return. See instructions.	Je date for ing your turn. See       Number, street, and room or suite no. If a P.O. box, see instructions.         605       THIRD AVENUE					
Enter the	Return Code for the return that this application is for	(file a separat	e application for each return)			0 1
Applicati Is For	on	Return Code	Application Is For			Return Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990	-BL	02	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	-PF	04	Form 5227			10
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870			12
<ul> <li>If the of</li> <li>If this box ▶</li> <li>1 I re the ▶</li> <li>2 If th</li> </ul>	anone No. ►       212-885-7700         organization does not have an office or place of busines for a Group Return, enter the organization's four digeneration. If it is for part of the group, check this box ►         quest an automatic 6-month extension of time until organization named above. The extension is for the extension. The extension is for the extension. The extension is for the extension is for the extension is for the extension. The extension is for the extension is for the extension is for the extension. The extension is for the extension is for the extension. The extension is for the extension is for the extension. The extension is for the extension is for the extension. The extensic extension. The extension is for the extensio	git Group Exe and atta NOVEN organization's , an s, check rease	mption Number (GEN) I <u>ch a list with the names and TINs of</u> <u>IBER 15, 2021</u> , to file return for: d ending on: Initial return	f this is fo all membe	r the whole g ers the exter npt organizat	group, check this
	nis application is for Forms 990-BL, 990-PF, 990-T, 47 nonrefundable credits. See instructions.	′20, or 6069, e	enter the tentative tax, less	3a	\$	0.
	<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.			3b	\$	0.
	ance due. Subtract line 3b from line 3a. Include yourng EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
	If you are going to make an electronic funds withdra			153-EO an	d Form 8879	9-EO for payment
LHA F	or Privacy Act and Paperwork Beduction Act Noti	ce. see instru	ctions.		Form 8	8868 (Rev. 1-2020)

	990 (2020) ANTI-DEFAMATION LEAGUE	13-1818723 Page
Par	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: ADL (THE "LEAGUE") IS THE LEADING ANTI-HATE	OBCANTZANTON FOUNDED IN
		ORGANIZATION. FOUNDED IN
	1913 IN RESPONSE TO AN ESCALATING CLIMATE O	
	BIGOTRY, ITS TIMELESS MISSION IS TO PROTECT	THE JEWISH PEOPLE AND TO
	SECURE JUSTICE AND FAIR TREATMENT FOR ALL.	
2	Did the organization undertake any significant program services during the year which	
	prior Form 990 or 990-EZ?	X Yes N
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conduct	s, any program services? X Yes No.
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three large	gest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of gran	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$23,664,691. including grants of \$	) (Revenue \$ 3,053,255.
та	REGIONAL OPERATIONS - SUPERVISES AND COORDI	
	COAST-TO-COAST NETWORK OF REGIONAL AND SATE	
	STATES. EACH REGIONAL OFFICE CARRIES OUT TH	
	RESPECTIVE DESIGNATED GEOGRAPHIC AREA IN TH	
	ARE CHARGED WITH COORDINATING THE WORK OF T	
	EFFECTIVELY CARRY OUT ADL'S OVERALL MISSION	
	SUPPORT THE NATIONAL DECISION-MAKING PROCES	
	PRIORITIES AND INPUT. THE FIELD STAFF AND L	
	THE LOCAL JEWISH AND OTHER COMMUNITIES THRO	UGH ADL PROGRAMS.
4b	(Code:) (Expenses \$ 7,443,390. including grants of \$	) (Revenue \$ 1,534,188.
	EDUCATION - FURTHERS THE LEAGUE'S MISSION T	HROUGH THE DESIGN AND
	DELIVERY OF EDUCATIONAL PROGRAMS AND MATERI.	ALS IN THE CORE PRIORITY
	AREAS OF ANTI-BIAS, BULLYING/CYBERBULLYING,	
	ANTI-SEMITISM. ADL EDUCATION DELIVERS THESE	
	COMMUNITIES, COLLEGE AND UNIVERSITY CAMPUSE	
	ASSOCIATIONS, RELIGIOUS ORGANIZATIONS, YOUT	
	WORKPLACES. IN 2020, ADL EDUCATION PROGRAMS	P
	OVER 91,000 CHILDREN AND ADULTS. THESE EDUC.	
	POSITIONED ADL AS A LEADER IN ANTI-BIAS PRO	
	BULLYING/CYBERBULLYING PREVENTION, DIRECTLY	
	MIDDLE, HIGH SCHOOL AND POST-SECONDARY STUD	
	MEMBERS AND WORKPLACE EMPLOYEES WITH IN-DEP	
4c	(Code:) (Expenses \$2,954,378. including grants of \$	) (Revenue \$ 25,532.
	CENTER ON EXTREMISM - IN A WORLD RIDDLED WI	•
	HARASSMENT, AND MISUSES OF TECHNOLOGY, THE	CENTER ON EXTREMISM (COE)
	SERVES AS A RESOURCE TO LEGISLATORS, JOURNA	LISTS, UNIVERSITIES,
	COMMUNITY ORGANIZATIONS, AND TECH PLATFORMS	
	TARGET OF ONLINE HATE AND HARASSMENT. COE D	
	AND ADVOCATES FOR CHANGE AT ALL LEVELS OF S	
	INNOVATION, PRODUCING CUTTING-EDGE RESEARCH	
	POPULATIONS, INFORM THE PUBLIC, AND ENGAGE	
	CENTURY OF EXPERIENCE SECURING JUSTICE AND	FAIR TREATMENT FOR ALL IN A
	DIGITAL WORLD.	
44	Other program services (Describe on Schedule O.)	
4u	(Expenses \$ 19, 181, 125. including grants of \$	) (Revenue \$ 784,959.)
<del>4</del> u		
	Total program service expenses ► 53, 243, 584.	
		Form <b>990</b> (202

Form	990	(2020)

 Form 990 (2020)
 ANTI-DEFAMATION
 LEAGUE

 Part IV
 Checklist of Required Schedules

			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	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
~	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			- -
~	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
10	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	
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			
~	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
d		11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		- 23	<u> </u>
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
r	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			<u> </u>
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
b	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			<u> </u>
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	L
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	X
032003	12-23-20	Form	990	(2020)

032003 12-23-20

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4 2020.05000 ANTI-DEFAMATION LEAGUE

Form	990	(2020)
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
C		28c		x
20	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29 20		29		- 23
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
<b>04</b>	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			77
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	<u> </u>
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u>-</u> -
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 998			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
032004	12-23-20	Form	990	(2020)
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Form	990 (2020) ANTI-DEFAMATION LEAGUE 13-1818	723	Р	_{age} 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 439			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country  AUSTRIA			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g		X
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	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 facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			37
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			37
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.	_	000	(0000)

Form	990	(2020)
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032005 12-23-20

Form	990	(2020)
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#### ANTI-DEFAMATION LEAGUE

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

		. I	_	Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	17		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	16		
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		X
3	Did the organization delegate control over management duties customarily performed by or under the	direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99	0 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?			X
6	Did the organization have members or stockholders?		6		X
7a					
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockholders, or			
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
а	The governing body?			Х	
	Each committee with authority to act on behalf of the governing body?			Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach				
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				x
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev				
		0/100 0000.)		Yes	N
0a	Did the organization have local chapters, branches, or affiliates?		10a		
	If "Yes," did the organization have written policies and procedures governing the activities of such cha				
~	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	х	
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Seren gane le			
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If " $\gamma_e$				
C	in Schedule O how this was done	,	120	x	
3	Did the organization have a written whistleblower policy?				
4	Did the organization have a written document retention and destruction policy?				
5	Did the process for determining compensation of the following persons include a review and approval				
5	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	by independent			
~	The organization's CEO, Executive Director, or top management official		15a	x	
D	Other officers or key employees of the organization		150		
60	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	opt with a			
oa			160		X
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		<u>16a</u>		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluate				
ec	exempt status with respect to such arrangements?				I
7	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ SEE SCHEDULE (	<u>ר</u>			
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and				bla
0	for public inspection. Indicate how you made these available. Check all that apply.		<i>5)</i> (3)5 OHly	) avalla	luie
~		on Schedule O)	and finan		
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	mict of interest policy	and finar	icial	
	statements available to the public during the tax year.	la anal as south 🔊			
20	State the name, address, and telephone number of the person who possesses the organization's book	ks and records 🕨 _			
	STEVEN C. SHEINBERG C/O ADL - 212-885-7700				
	605 THIRD AVENUE, NEW YORK, NY 10158-3560				

Form 990 (2020)	ANTI-DEFAMATION LEAGUE	13-1818723	Page 7					
Part VII Comper	sation of Officers, Directors, Trustees, Key Employees, Hig	ghest Compensated						
Employees, and Independent Contractors								
Check if So	chedule O contains a response or note to any line in this Part VII		X					
Section A. Officers,	Directors, Trustees, Key Employees, and Highest Compensated Employe	es						
1a Complete this table	for all persons required to be listed. Report compensation for the calendar ve	ear ending with or within the organization's	tax vear.					

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

• List all of the organization's current key employees, if any. See 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.

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)		
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated					
	hours per	box	, unles	ss per	son i	s botł	n an	compensation	compensation	amount of		
	week		cer an	ia a ai	recio	r/trus	lee)	from	from related	other		
	(list any hours for	irecto						the	organizations (W-2/1099-MISC)	compensation from the		
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(00-2/1099-00150)	organization		
	organizations	truste	al trus		yee	mpen		(W 2/1000 WIGO)		and related		
	below	Individual trustee or director	In stitutional trustee	ar	Key employee	Highest compensated employee	er			organizations		
	line)	Indivi	Instit	Officer	Key e	Highe	Former			C C		
(1) JONATHAN GREENBLATT	20.00											
CEO & NATIONAL DIRECTOR	20.00	Х		Х				453,496.	453,496.	41,388.		
(2) FREDERIC BLOCH	34.00											
SVP, GROWTH	6.00			Х				397,540.	70,154.	20,095.		
(3) AMANDA SUSSKIND	34.00											
REGIONAL DIRECTOR (THRU 07/2020)	6.00					X		361,295.	63,758.	13,643.		
(4) BETH M. KATZNELSON - DIR., NAT	34.00											
PARTNERSHIPS (ADL) (THRU 09/2020)	6.00					Х		275,659.	48,646.	32,945.		
(5) EMILY BROMBERG	40.00											
CHIEF OF STAFF	0.00				Х			297,661.	0.	26,257.		
(6) ANAT KENDAL	34.00											
SVP, FINANCE & ADMINISTRATION	6.00			Х				230,174.	40,619.	40,853.		
(7) STEVEN SHEINBERG	34.00											
SVP & GENERAL COUNSEL	6.00			Х				223,852.	39,503.	45,286.		
(8) ROBERT TRESTAN	34.00											
REGIONAL DIRECTOR	6.00					X		221,081.	39,014.	45,895.		
(9) THOMAS RUDERMAN	40.00											
SVP, TALENT & KNOWLEDGE	0.00				х			275,735.	0.	27,730.		
(10) EILEEN HERSHENOV	40.00											
SVP, POLICY	0.00					X		272,104.	0.	26,730.		
(11) SETH BRYSK	34.00											
REGIONAL DIRECTOR	6.00					x		213,387.	37,657.	44,528.		
(12) BETH NATHANSON	34.00							005 440		10 010		
VP, STRATEGIC PARTNERSHIPS	6.00				X			225,449.	39,785.	18,316.		
(13) GEORGE SELIM	40.00							220 014	0	10 500		
SVP, PROGRAMS	0.00				X			229,014.	0.	19,500.		
(14) CLIFFORD SCHECHTER	30.00						77	167 006	0			
SENIOR ADVISOR TO THE CEO	0.00						Х	167,996.	0.	26,554.		
(15) ABRAHAM FOXMAN	0.00						v	01 275	0.	0		
NATIONAL DIRECTOR EMERITUS							Х	81,275.	0.	0.		
(16) ANDY ADELSON TREASURER	2.00	v						0.	0.	n		
(17) BARRY CURTISS-LUSHER	2.00	^				-		0.	0.	0.		
DIRECTOR	0.50	v						0.	0.	0.		
	0.50	Δ				L		0.	0.	Form <b>990</b> (2020)		
032007 12-23-20				~						F0ffff <b>330</b> (2020)		

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2020.05000 ANTI-DEFAMATION LEAGUE

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Form 990 (2020) ANTI-DEFA									13-1	818	723	Page <b>8</b>
Part VII Section A. Officers, Directors, Trust		oloy	ees,			ghes	t C		, ,	—		
(A)	(B)			(C Posi	C)			(D)	(E)			(F)
Name and title	Average hours per		not c	heck ı	more	than o		Reportable	Reportable	I		mated
	week					s both pr/trust		compensation	compensatio	I		ount of
	(list any	tor						from the	from related organization			ther ensation
	hours for	direct				σ		organization	(W-2/1099-MI		•	m the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(	/		nization
	organizations	trust	al tru		oyee	ompe					and	related
	below	Individual trustee or director	Institutional trustee	cer	ƙey employee	Highest compensated employee	Former				organ	izations
	line)	Indi	Insti	Officer	Key	High emp	Forr			$ \longrightarrow $		
(18) ESTA GORDON EPSTEIN	2.00											0
CHAIR	0.50	Х						0.		0.		0.
(19) YASMIN GREEN	2.00							0				•
DIRECTOR	0.00	Х						0.		0.		0.
(20) YADIN KAUFMAN	2.00							0				•
DIRECTOR	0.00	Х						0.		0.		0.
(21) ALAN LAZOWSKI	2.00											0
DIRECTOR	0.00	Х						0.		0.		0.
(22) GLEN LEWY	2.00											•
DIRECTOR	4.50	Х					_	0.		0.		0.
(23) DANIEL LUBETZKY	2.00											•
	0.00	Х						0.		0.		0.
(24) NICOLE MUTCHNIK	2.00											•
DIRECTOR	0.00	X						0.		0.		0.
(25) ELIZABETH PRICE	2.00	v						0				٥
SECRETARY	0.00	Х						0.		0.		0.
(26) BEN SAX VICE-CHAIR	2.00	x						0.		0.		0.
th Cubtotal	1.30						_	3,925,718.	832,6		429	,720.
1b Subtotal	Section A					ا ا		0.	052,0	0.	447	0.
c Total from continuation sheets to Part VII								3,925,718.	832,6		129	,720.
<ul> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but no</li> </ul>											447	,120.
compensation from the organization		056	liste	u au	JUVE	<i>;)</i> with	, ié	ceived more than \$100,		5		139
			-								١	es No
3 Did the organization list any former officer,	director, truste	ee, k	ev e	empl	ove	e. or	hia	hest compensated emp	ovee on	ſ		
line 1a? If "Yes," complete Schedule J for su											3	x
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150											4	x
5 Did any person listed on line 1a receive or a											-	
rendered to the organization? If "Yes." com											5	x
Section B. Independent Contractors		501	51 30		5613	011 .				<u></u>	Ŭ	
1 Complete this table for your five highest cor	npensated ind	lepe	nder	nt co	ontra	actor	s tł	nat received more than \$	100,000 of com	pensat	ion from	า
the organization. Report compensation for t	•	•										
(A)	-							(B)			(C)	
Name and business	address							Description of s	ervices	C	ompens	
KAIZEN TECHNOLOGIES												
1 LINCOLN HIGHWAY, EDISON	, NJ 08	82	0					TEMP SERVICE	S		267	,157.
O'BRIEN GARRETT												
1133 19TH STREET NW, WASH	INGTON,	D	С	20	03	6		FUNDRAISING	SERVICES		209	,898.
VRP CONSULTING												
268 BUSH STEET , SAN FRANCISCO, CA 94104 IT SUPPORT 197,000.												
TRU NORTH ADVISORS												
419 BEACH ROAD, FAIRFIELD, CT 06824 FINANCIAL ADVISORY 181,875.												
ERIN MALONE					_							_
220 BONVIEW STREET, SAN F	RANCISC	Ο,	C.	A	94	11(	)	UX DESIGN/RE	SEARCH		166	<u>,696.</u>
2 Total number of independent contractors (in	-	ot lin	nited	d to f			ted	above) who received mo	ore than			
\$100,000 of compensation from the organiz					10						-	
SEE PART VII, SECTION	A CONT	IN	UΑ	TI	ON	SI	ΗE	ETS			Form <b>9</b> 9	90 (2020)

032008 12-23-20

Form 990 ANTI-DEFA									13-181	8723
Part VII Section A. Officers, Directors, Tru	1	nplo	yee			ligh	est (			
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all :	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	2				loyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the organization
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		and related
	organizations	ruste	l trus		/ee	m pen				organizations
	below	dual t	utiona	-	u plo	st co	L.			organizationo
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
(27) MILTON SCHNEIDER	2.00									
DIRECTOR	2.50	х						0.	Ο.	0.
(28) LARRY SCOTT	2.00									
VICE-CHAIR	0.00	х						0.	0.	0.
(29) ROB STAVIS	2.00									
DIRECTOR	0.00	х						0.	0.	0.
(30) CHRISTOPHER WOLF	2.00								<b>.</b>	<u>.</u>
DIRECTOR	2.50	х						0.	0.	0.
(31) SHAMINA SINGH	2.00								<b>.</b>	<u>.</u>
DIRECTOR (AS OF 01/2020)	0.00	х						0.	0.	0.
			-							
	· ·									
	1									
Total to Part VII, Section A, line 1c										

032201 04-01-20

ar	t VII	Statement of Revenue					
		Check if Schedule O contains a response or note	e to any line	<u>in this Part VIII</u> <b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue exclu from tax und sections 512 -
ts	1 a	Federated campaigns 1a					
uno	b	Membership dues 1b					
ΜΨ	с	Fundraising events 1c 3, 9	968,233.				
ar /	d	Related organizations 1d 11,8	380,987.				
Ē		Government grants (contributions)					
л Л	f	All other contributions, gifts, grants, and					
Ē			171,766.				
and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f		95 000 096			
a	h	Total. Add lines 1a-1f	ness Code	85,020,986.			
	0.0		099	3,053,255.	3,053,255.		
	2 a b		099	1,534,188.	1,534,188.		
ant	u o		099	784,959.	784,959.		
ver	с Н		099	25,532.	25,532.		
Kevenue	u e			,			
		All other program service revenue					
		Total. Add lines 2a-2f		5,397,934.			
	3	Investment income (including dividends, interest, and	b				
		other similar amounts)	►	44,887.			44,8
	4	Income from investment of tax-exempt bond proceed	ds 🕨				
	5	Royalties	🕨	36,154.			36,1
			Personal				
	6 a	Gross rents					
		Rental income or (loss) 6c 323,133.					
		Net rental income or (loss)		323,133.			323,1
	7 a		Other				
		assets other than inventory <b>7a</b>					
	D	Less: cost or other basis					
	•	and sales expenses 7b Gain or (loss)					
		Net gain or (loss)					
		Gross income from fundraising events (not					
	0 4	including \$3,968,233. of					
		contributions reported on line 1c). See					
		Part IV, line 18	158,606.				
	b	Less: direct expenses	388,992.				
	с	Net income or (loss) from fundraising events	🕨	269,614.			269,6
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities	🕨				
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold10b	<b></b>				
╈	С	Net income or (loss) from sales of inventory	ness Code				
	11 ~		099	177,775.			177,7
ant	n a h		099	43,308.			43,3
Revenue	с С						,-
Re		All other revenue					
		Total. Add lines 11a-11d		221,083.			
			····· F	91,313,791.	5,397,934.	0.	894,8

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ANTI-DEFAMATION LEAGUE Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon			(C)	L
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		0 000 000		
	trustees, and key employees	2,532,967.	2,026,373.	253,297.	253,297
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	22 626 242	26 000 074	2 262 624	2 2 2 2 2 2 2
7	Other salaries and wages	33,636,343.	26,909,074.	3,363,634.	3,363,635
3	Pension plan accruals and contributions (include	0 054 710	1 0 0 2 7 7 0	205 471	
_	section 401(k) and 403(b) employer contributions)	2,254,712.	1,803,770.	225,471.	225,471
)	Other employee benefits	6,292,852.	5,034,282.	629,285.	629,285
)	Payroll taxes	2,677,538.	2,142,030.	267,754.	267,754
1	Fees for services (nonemployees):				
a	Management	194,208.	10 401	155 266	10 401
b	Legal		19,421.	155,366.	19,421
	Accounting	163,932.	16,393.	131,146.	16,393
d	Lobbying	209,898.			200 000
e	Professional fundraising services. See Part IV, line 17	19,505.		19,505.	209,898
f	Investment management fees	19,505.		19,505.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch 0.)	222,126.	177,701.		44,425
2	Advertising and promotion	698,397.	558,716.	69,842.	69,839
3	Office expenses	2,920,831.	2,044,582.	292,083.	584,166
4	Information technology	2,920,031.	2,044,302.	292,003.	504,100
5	Royalties	6,682,460.	5,345,968.	668,246.	668,246
5	Occupancy	472,951.	331,066.	47,295.	94,590
7	Travel	472,991.	JJI,000.	47,295.	54,550
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	616,388.	431,472.	31,131.	153,785
9	Conferences, conventions, and meetings	753,400.	431,472.	753,400.	155,705
)	Interest	755,400.		/ 33,400.	
1	Payments to affiliates	1,381,276.	1,105,020.	138,128.	138,128
2 3	Depreciation, depletion, and amortization	546,193.	436,955.	54,619.	54,619
	Insurance Other expenses. Itemize expenses not covered	540,155.	430,933.	54,015.	54,01.
ł	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A)				
а	amount, list line 24e expenses on Schedule 0.) ALL OTHER EXPENSES	6,432,978.	4,326,293.	839,177.	1,267,508
a b	TRAINING FEES	592,605.	486,091.	0007177	106,514
с С	RESEARCH MATERIALS	483,768.	48,377.	387,014.	48,377
d	BANK & CREDIT CARD FEES	355,310.		177,655.	177,655
-	All other expenses			<u> </u>	111,000
	Total functional expenses. Add lines 1 through 24e	70,140,638.	53,243,584.	8,504,048.	8,393,000
; ;	Joint costs. Complete this line only if the organization	, , , , , , , , , , , , , , , , , , , ,	55,245,5040	0,001,010	0,000
,	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Fifthere if following SOP 98-2 (ASC 958-720)				

032010 12-23-20

Form 990 (2020)

10471112 153424 0168531-00010

Form **990** (2020)

I UI							
		Check if Schedule O contains a response or note	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			728,030.	1	1,762,078.
	2	Savings and temporary cash investments			18,343,331.	2	37,056,664.
	3	Pledges and grants receivable, net			18,464,619.	3	26,301,067.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifi	-				
		under section 4958(f)(1)), and persons described				6	
S	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			314,500.	8	314,500.
As	9				946,368.	9	1,187,844.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	25,658,575.			
	b	Less: accumulated depreciation	10b	19,692,687.	7,092,656.	10c	5,965,888.
	11	Investments - publicly traded securities			575,655.	11	5,128,798.
	12	Investments - other securities. See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line 1	1			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			330,090.	15	
	16	Total assets. Add lines 1 through 15 (must equa	l line 33	3)	46,795, <u>2</u> 49.	16	77,716,839.
	17	Accounts payable and accrued expenses			8,762,583.	17	8,130,925.
	18	Grants payable				18	
	19	Deferred revenue				19	1,113,463.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F	art IV o	f Schedule D		21	
Se	22	Loans and other payables to any current or forme	er office	er, director,			
Liabilities		trustee, key employee, creator or founder, substa	antial co	ontributor, or 35%			
iab		controlled entity or family member of any of these	e persoi	ns	4	22	
-	23	Secured mortgages and notes payable to unrelat			4,000,000.	23	4,000,000.
	24	Unsecured notes and loans payable to unrelated				24	7,400,615.
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24).	Complete Part X	00 001 001		
		of Schedule D			29,931,881.		40,751,874.
	26	Total liabilities. Add lines 17 through 25	<u></u>		42,694,464.	26	61,396,877.
ç		Organizations that follow FASB ASC 958, chec	ck here				
JCe		and complete lines 27, 28, 32, and 33.			20 272 005		12 206 515
alaı	27				-20,372,805. 24,473,590.	27	-13,206,515. 29,526,477.
d B	28				24,473,390.	28	29,320,477.
ů.		Organizations that do not follow FASB ASC 95	ø, cned	ck nere 🕨 🛄			
Net Assets or Fund Balances	00	and complete lines 29 through 33.					
ets	29 20	Capital stock or trust principal, or current funds		t fund		29	
SS	30 21	Paid-in or capital surplus, or land, building, or equipate account acc				30	
et A	31	Retained earnings, endowment, accumulated inc			4,100,785.	31	16,319,962.
ž	32	Total net assets or fund balances			46,795,249.	32 33	77,716,839.
	33	Total liabilities and net assets/fund balances	<u></u>		40,133,443.	აა	Eorm <b>990</b> (2020)

13-1818723 Page 11

Form 990 (2020) Part X Balance Sheet

Form	n 990 (2020) ANTI-DEFAMATION LEAGUE	13-	-1818	3723	Pa	_{ge} 12		
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>				X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		L,31:				
2	Total expenses (must equal Part IX, column (A), line 25)	2		),140	<u> </u>			
3	3 Revenue less expenses. Subtract line 2 from line 1 3 21							
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))								
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9	- 8	3,95:	3,9	76.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	10	5,319	9,9	62.		
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,						
	consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis							
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the							
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule C	).					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Auc	dit					
	Act and OMB Circular A-133?			3a		X X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	it					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>		3b				
				Form	990	(2020)		

SCHE	DUL	.E A
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Department of the Treasury Internal Revenue Service

(Form	990	or	990-EZ)
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## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

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

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

OMB No. 1545-0047
2020
Open to Public Inspection

Name of the o	organization
---------------	--------------

Nam	Name of the organization Employer identification number								
		ANTI	-DEFAMATIO	N LEAGUE				1	3-1818723
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of chu	urches, or associatio	on of churches described	l in <b>sectio</b>	on 170(b)(1	)(A)(i).		
2		A school described in section	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990 or 99	90-EZ).)			
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).		
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (Complete Part II.)							
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).							
7	X	X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in							
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	nction with a	land-grant	college
		or university or a non-land-g						-	-
		university:						-	
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	is, membersh	ip fees, and	d gross receipts from
		activities related to its exem							
		income and unrelated busir	-						-
		See section 509(a)(2). (Cor				·	, ,		
11		An organization organized a		ively to test for public sa	fety. See	section 50	9(a)(4).		
12		An organization organized a			•			rry out the	purposes of one or
		more publicly supported or		•				•	
		lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.	
а		<b>Type I.</b> A supporting orga						-	giving
		the supported organization							
		organization. You must c							
b		<b>Type II.</b> A supporting org	-		tion with it:	s supporte	d organizatio	n(s), by hav	ing
		control or management o					-		-
		organization(s). You mus					·		
с		] Type III functionally inte			in connect	tion with. a	nd functional	lv integrate	d with.
		its supported organization	-					, ,	
d		] Type III non-functionally		· ·				ted oraaniz	zation(s)
		that is not functionally int						-	
		requirement (see instructi	-		•				
е		Check this box if the orga		-				II. Type III	
		functionally integrated, or					51 5 51	, ,,	
f	Ente	er the number of supported c		, , , , , , , , , , , , , , , , , , , ,	5 5				
		vide the following informatior	•						
	(	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of	monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)
Tota	ıl								
		Paperwork Reduction Act N	lotice, see the Instru	uctions for Form 990 or	990-EZ.	032021 01-2	25-21 Sche	dule A (For	m 990 or 990-EZ) 2020

15 10471112 153424 0168531-00010

# Schedule A (Form 990 or 990-EZ) 2020 ANTI-DEFAMATION LEAGUE Part II Support Schedule for Organizations Described in Sect

13-1818723 Page 2

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	61471201.	71717381.	69833945.	78152040.	85020986.	366195553
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge $\dots$						
4	Total. Add lines 1 through 3	61471201.	71717381.	69833945.	78152040.	85020986.	366195553
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						366195553
Sec	ction B. Total Support				-		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	61471201.	71717381.	69833945.	78152040.	85020986.	366195553
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$	4,024.	9,464.	78.	326,062.	404,174.	743,802.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	9579337.	8305556.	9451458.	13830477.		43546517.
11	Total support. Add lines 7 through 10						410485872
12			, , , , , , , , , , , , , , , , , , , ,				,788,983.
13	First 5 years. If the Form 990 is for the	-			•		. —
<u> </u>	organization, check this box and sto	p here	aantaga				
	ction C. Computation of Public						00 01
	Public support percentage for 2020 (I		-			14	89.21 % 86.75 %
	Public support percentage from 2019					15	
168	<b>33 1/3% support test - 2020.</b> If the other have The experimentian exclusion						N V
h	stop here. The organization qualifies		•				······································
N.	<b>33 1/3% support test - 2019.</b> If the organization gual						
17-	10% -facts-and-circumstances test					and line 14 is 10%	
174							
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
Ь	10% -facts-and-circumstances test	-		• • • •	-	17a and line 15 is	
N.	more, and if the organization meets the	-					
	organization meets the facts-and-circl						
18	Private foundation. If the organization		•				
						edule A (Form 990	
							,

032022 01-25-21

#### Schedule A (Form 990 or 990-EZ) 2020 ANTI-DEFAMATION LEAGUE

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

13-1818723 Page 3

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						-
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	L					
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		$\mathbf{O}$				
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax y	/ear as a section 5	01(c)(3) organizati	on,
	check this box and stop here						
Se	ction C. Computation of Publi	ic Support Per	centage				
15	Public support percentage for 2020 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
	Public support percentage from 2019	1	1			16	%
Se	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20	<b>)20</b> (line 10c, colur	mn (f), divided by l	ne 13, column (f))		17	%
18	Investment income percentage from	2019 Schedule A,	Part III, line 17			18	%
19a	<b>33 1/3% support tests - 2020.</b> If the	organization did n	not check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qual	fies as a publicly s	upported organiza	tion	
b	<b>33 1/3% support tests - 2019.</b> If the						
	line 18 is not more than 33 1/3%, che	ck this box and <b>st</b>	op here. The orga	nization qualifies a	is a publicly suppo	rted organization	
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	is box and see ins	tructions	
0320	23 01-25-21				Sch	edule A (Form 99	0 or 990-EZ) 2020
			17				

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#### Schedule A (Form 990 or 990-EZ) 2020 ANTI-DEFAMATION LEAGUE

#### 13-1818723 Page 4

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

18

032024 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

2020.05000 ANTI-DEFAMATION LEAGUE

#### Schedule A (Form 990 or 990 EZ) 2020 ANTI-DEFAMATION LEAGUE

Ра	Int IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one of more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officer directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporte organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	rs, ed		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	´1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		L
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		<b></b>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		<u> </u>
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			

significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.* 

#### Section E. Type III Functionally Integrated Supporting Organizations

<b>1</b> Cł	neck the box next to the method that	he organization used	to satisfy the Integral Part	Test during the year	see instructions).
-------------	--------------------------------------	----------------------	------------------------------	----------------------	--------------------

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	

19

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

**a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.** 

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

Schedule A (Form 990 or 990-EZ) 2020

З

2a

2b

3a

3b

Yes No

 $10471112 \ 153424 \ 0168531-00010$ 

2020.05000 ANTI-DEFAMATION LEAGUE

	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations
Schedule A	(Form 990 or 990-EZ) 2020 ANTI-DEFAMATION LEAGUE

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in* **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally	v integrat	ed Type III supporting orga	anization (see

instructions).

1

Schedule A (Form 990 or 990-EZ) 2020

032026 01-25-21

#### Schedule A (Form 990 or 990 EZ) 2020 ANTI-DEFAMATION LEAGUE

Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations _{(continu}	ed)					
Secti	on D - Distributions				Current Year				
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1					
2	Amounts paid to perform activity that directly furthers exemp	Amounts paid to perform activity that directly furthers exempt purposes of supported							
	organizations, in excess of income from activity		2						
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations		3					
4	Amounts paid to acquire exempt-use assets			4					
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5					
6	Other distributions (describe in Part VI). See instructions.			6					
7	Total annual distributions. Add lines 1 through 6.			7					
8	Distributions to attentive supported organizations to which the	e organization is responsive							
	(provide details in Part VI). See instructions.			8					
9	Distributable amount for 2020 from Section C, line 6			9					
10	Line 8 amount divided by line 9 amount			10					
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	s	(iii) Distributable Amount for 2020				
1	Distributable amount for 2020 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2020 (reason-								
	able cause required - explain in Part VI). See instructions.								
3	Excess distributions carryover, if any, to 2020								
a	From 2015								
b	From 2016								
C	From 2017								
d	From 2018								
e	From 2019								
f	Total of lines 3a through 3e								
g	Applied to underdistributions of prior years								
h	Applied to 2020 distributable amount								
i	Carryover from 2015 not applied (see instructions)								
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2020 from Section D,								
	line 7: \$								
a	Applied to underdistributions of prior years								
b	Applied to 2020 distributable amount								
C	Remainder. Subtract lines 4a and 4b from line 4.								
5	Remaining underdistributions for years prior to 2020, if								
	any. Subtract lines 3g and 4a from line 2. For result greater								
	than zero, explain in Part VI. See instructions.								
6	Remaining underdistributions for 2020. Subtract lines 3h								
	and 4b from line 1. For result greater than zero, explain in								
	Part VI. See instructions.								
7	Excess distributions carryover to 2021. Add lines 3j								
	and 4c.								
8	Breakdown of line 7:								
	Excess from 2016								
	Excess from 2017								
	Excess from 2018								
	Excess from 2019								
е	Excess from 2020								

Schedule A (Form 990 or 990-EZ) 2020

032027 01-25-21

#### Schedule A (Form 990 or 990 EZ) 2020 ANTI-DEFAMATION LEAGUE

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

FUNDRAISING EVENTS	3
2016 AMOUNT: \$ 9	9,579,337.
2017 AMOUNT: \$ 8	3,305,556.
2018 AMOUNT: \$ 9	9,411,913.
2019 AMOUNT: \$ 1	13,830,477.
2020 AMOUNT: \$ 2	2,158,606.
GROSS SALES OF INV	TENTORY
2018 AMOUNT: \$ 3	39,545.
MISCELLANEOUS INCO	DME
2020 AMOUNT: \$ 1	177,775.
MARKETING AND COMM	MUNICATIONS
2020 AMOUNT: \$ 4	13,308.
032028 01-25-21	Schedule A (Form 990 or 990-EZ) 2020

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(Form	990) ent of the Treasury Revenue Service	Complete if the org Part IV, line 6, 7, 8, 9, 10	al Financial Statements Janization answered "Yes" on Form 990, J, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. 90 for instructions and the latest information	on.	OMB No. 11 200 Open to Inspect	20 Public
Name	of the organizati				r identificatio	
Devi		ANTI-DEFAMATION LE			3-18187	
Part		-	d Funds or Other Similar Funds or	Accounts.	Complete if t	he
	organizatio	n answered "Yes" on Form 990, Part IV, lir	ie 6. (a) Donor advised funds	(b) Eurodo or	nd other accou	unto
	<b>-</b>			(b) Funds an		unis
		nd of year				
		f contributions to (during year)				
		f grants from (during year)				
		t end of year	writing that the assets held in donor advised t	unde		
	-		exclusive legal control?		Yes	
			advisors in writing that grant funds can be use			
	•	•	or donor advisor, or for any other purpose con			
				•	Yes	
Part	II Conserv	ation Easements. Complete if the or	ganization answered "Yes" on Form 990, Parl	IV, line 7.		
1 F		servation easements held by the organizati				
		of land for public use (for example, recrea	· · · · ·	istorically impo	rtant land are	а
	Protection o	f natural habitat	Preservation of a c	ertified historic	structure	
	Preservation	of open space				
2 (			fied conservation contribution in the form of a	conservation e	asement on t	he last
C	day of the tax yea			Held	at the End of t	he Tax Yea
a	Total number of co	onservation easements		2a		
b T	Total acreage rest	ricted by conservation easements		2b		
c I	Number of conser	vation easements on a certified historic str	ucture included in (a)	2c		
d I	Number of conser	vation easements included in (c) acquired	after 7/25/06, and not on a historic structure			
I	isted in the Natior	nal Register		2d		
3 1	Number of conser	vation easements modified, transferred, re	leased, extinguished, or terminated by the org	anization durin	g the tax	
3	year 🕨					
4	Number of states	where property subject to conservation ear	sement is located			
<b>5</b> [	Does the organiza	tion have a written policy regarding the pe	riodic monitoring, inspection, handling of			
١	violations, and enf	orcement of the conservation easements i	t holds?		Yes	<b>N</b>
6 3	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserv	ation easement	s during the y	rear
)	•					
7 /	Amount of expens	es incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	easements du	ring the year	
)	\$					
8 [	Does each conser	vation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)(4	)(B)(i)		
	and section 170(h)				Yes	
9 I	n Part XIII, descrit	be how the organization reports conservation	on easements in its revenue and expense sta	tement and		
			note to the organization's financial statements	that describes	the	
_		ounting for conservation easements.				
Part		_	f Art, Historical Treasures, or Othe	r Similar As	sets.	
		the organization answered "Yes" on Form				
1a	f the organization	elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and	palance sheet v	vorks	
	- A state in the task state of the state					

of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

# b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1

	(ii) Assets included in Form 990, Part X		\$				
2	2 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 FASB ASC 958 relating to these items:						
а	Revenue included on Form 990, Part VIII, line 1		\$				
b	Assets included in Form 990, Part X		\$				

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.
032051	12-01-20

Schedule D (Form 990) 2020

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27 2020.05000 ANTI-DEFAMATION LEAGUE

Sche		FAMATION LE				13-1	818723	B Page <b>2</b>
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or	Other S	imilar Asse	ets _{(contin}	ued)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that i	make signi	ficant use of i	ts	,
	collection items (check all that apply):							
а	Public exhibition	d	Loan or exc	hange prograr	m			
b	Scholarly research	е	Other					
с	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	e organizatior	n's exempt	purpose in Pa	art XIII.	
5	During the year, did the organization solicit o							
	to be sold to raise funds rather than to be ma	aintained as part of th	e organization's col	lection?			Yes	No No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if the organizatio	n answered "\	Yes" on Fo	rm 990, Part I	V, line 9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contributions	s or other asse	ets not incl	uded		
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XIII							
							Amount	t
с	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Fo						Yes	No No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on P	art XIII			
Par	t V Endowment Funds. Complete i	f the organization an	swered "Yes" on Fo	rm 990, Part I	V, line 10.			
		(a) Current year	(b) Prior year	(c) Two years		Three years ba	ck (e) Four	years back
1a	Beginning of year balance	106,085,363.	86,951,696.	92,038	,956.	86,328,75	5. 88,	752,231.
b	Contributions	27,772,133.	11,096,741.	8,739	,345.	1,899,29	2. 2,	070,803.
с	Net investment earnings, gains, and losses	7,045,141.	12,431,051.	-7,056	,433.	8,123,15	7.4,	238,063.
d	Grants or scholarships			÷				
е	Other expenditures for facilities							
	and programs	8,737,734.	4,394,125.	6,770	,172.	4,312,24	8. 8,	732,342.
f	Administrative expenses							
a	End of year balance	132,164,903.	106,085,363.	86,951	,696.	92,038,95	6. 86,	328,755.
2	Provide the estimated percentage of the curr	ent vear end balance	(line 1g. column (a)	) held as:				
а	Board designated or quasi-endowment	8.0000	%					
b	Permanent endowment  62.0000	%	-					
c	20.000	%						
-	The percentages on lines 2a, 2b, and 2c sho			-				
3a	Are there endowment funds not in the posse		tion that are held ar	nd administere	ed for the a	organization		
	by:					- <b>-</b>	]	Yes No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations							X
b	If "Yes" on line 3a(ii), are the related organiza							X
4	Describe in Part XIII the intended uses of the							
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answere		. Part IV. line 11a. S	ee Form 990.	Part X. line	e 10.		
	Description of property	(a) Cost or o		or other		umulated	(d) Bool	< value
		basis (investm		(other)	• •	ciation	(4) 2001	( raide
1a	Land							
	Buildings							
	Leasehold improvements		14.72	8,093.	10.35	3,016.	4,37	5,077.
	Equipment			0,482.		9,671.		),811.
	Other			- , _ , _ , _ ,	- 100	- / • / ± •	_,	.,
	. Add lines 1a through 1e. (Column (d) must e		( column (B) line 1				5.96	5,888.
TOLD	in Add intes ta through te. (Column (d) MUSI e	<u>uuai Forni 990, Part</u> /	<u>, column (B), line 1(</u>	JU.J				n 990) 2020
						Sched		. 330) 2020

Schedule D (Form 990) 2020	ANTI-DEFAMATION	LEAGUE
Part VII Investments - C	other Securities.	

Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 000 Part IV line	11c Soc Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-vear market value
			na or your market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►			
Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	1
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		<b>\</b>
Part X Other Liabilities.	<u>= 10.)</u>		
	on Form 000 Part IV line	110 or 11f Soo Form 990 Part X line 2	15
Complete if the organization answered "Yes" (a) Description of liability	011 F0111 990, Fart IV, III	e Tre of TTI. See Form 990, Fart A, line 2	(b) Book value
(1) Federal income taxes	TONG		
(2) LONG-TERM PENSION OBLIGAT	IONS		4,273,677
(3) DEFERRED RENT			5,177,243
(4) DUE TO ANTI-DEFAMATION LEA	AGUE		
(5) FOUNDATION			3,481,437
(6) LONG-TERM DEBT			27,819,517
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	- 25 )		40,751,874
2. Liability for uncertain tax positions. In Part XIII, provide	<u> </u>		, =, = ,

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .... X

Schedule D (Form 990) 2020

032053 12-01-20

	edule D (Form 990) 2020 AN'I'L – DEF'AMA'I'LON LEAGUE				1818723 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements	s Wit	h Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	82,359,815.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-2,254,712.		
е	Add lines 2a through 2d			2e	-2,254,712.
3	Subtract line 2e from line 1			3	84,614,527.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	6,699,264.		
с	Add lines <b>4a</b> and <b>4b</b>			4c	6,699,264.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	91,313,791.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statement	is Wi	ith Expenses per R	etur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total company and the second second difference in the second s				
2	Total expenses and losses per audited financial statements			1	70,140,638.
_	Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	70,140,638.
a	Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a		1	70,140,638.
-	Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	70,140,638.
-	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a		1	70,140,638.
b	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b		1	70,140,638.
b	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d		1 2e	0.
b c d	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b>	2a 2b 2c 2d			
b c d e	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d		2e	0.
b c d e 3	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d		2e	0.
b c d e 3 4	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d		2e	0.
b c d 3 4 a	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d 4a 4b		2e	0. 70,140,638. 0.
b c d e 3 4 a b c 5	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d 4a 4b		2e 3	0. 70,140,638.

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

PART V, LINE 4:

THE ADL FOUNDATION ENDOWMENT CONSISTS OF INDIVIDUAL DONOR-RESTRICTED

ENDOWMENT FUNDS ESTABLISHED FOR A VARIETY OF PROGRAM PURPOSES (SEE ADL

FOUNDATION FORM 990 PART III FOR STATEMENT OF PROGRAM SERVICE

ACCOMPLISHMENTS). AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES,

NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED

BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS.

PART X, LINE 2:

AS REQUIRED UNDER FIN 48, "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES",

THE FOLLOWING FOOTNOTE WAS INCLUDED IN NOTE (2)(J) OF THE CONSOLIDATED

FINANCIAL STATEMENTS OF ADL AND THE ADL FOUNDATION:

032054 12-01-20

30 2020.05000 ANTI-DEFAMATION LEAGUE

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Schedule D (Form 990) 2020       ANTI-DEFAMATION       LEAGUE         Part XIII       Supplemental Information (continued)       Image: Continued (Continued)	13-1818723 Page 5
"ADL RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF	
ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. INCOME GENERAT	ED FROM
ACTIVITIES UNRELATED TO ADL'S EXEMPT PURPOSE IS SUBJECT TO	TAX UNDER
INTERNAL REVENUE CODE SECTION 511 AND IS REPORTED AND PAID	WITH THE
INTERNAL REVENUE SERVICE FORM 990-T (EXEMPT ORGANIZATION BU	SINESS INCOME
TAX RETURN)."	
PART V, LINE 3B:	
THE ENDOWMENT FUNDS DESCRIBED IN THIS SECTION ARE OWNED BY	THE
ANTI-DEFAMATION LEAGUE FOUNDATION, A SEPARATE BUT RELATED 5	01(C)(3)
CORPORATION.	
	Schedule D (Form 990) 2020

032055 12-01-20

(Form 990)	Complete if	the organizatio	n answered "Yes" on Form 990, Part	IV, line 14b, 1	5, or 16.	ΖυΖυ
Department of the Treasury Internal Revenue Service	Go to	www.irs.gov/Fc	Attach to Form 990. orm990 for instructions and the latest	information		Open to Public Inspection
Name of the organization		www.ii 3.gov/1 c			Employer i	identification number
-						
ANTI-DEFAMATIC	ON LEAGUE		aida tha United Otataa		13-181	18723
Part I General In Form 990, Pa		ctivities Out	side the United States. Compl	ete if the organ	ization answe	ered "Yes" on
		n maintain record	ds to substantiate the amount of its gra	ants and other a	assistance.	
-	•		the selection criteria used to award the		-	Yes 🗌 No
	escribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistanc	e outside the
United States. 3 Activities per Region	(The following Pad	I line 3 table cr	an be duplicated if additional space is r	( hehee		
(a) Region	(b) Number of	(c) Number of		1	vity listed in (	d) (f) Total
	offices	employees, agents, and independent	(by type) (such as, fundraising, pro-		gram service,	for and
	in the region	contractors	gram services, investments, grants to recipients located in the region)		e specific type (s) in the regi	investments
		in the region			(0)	in the region
MIDDLE EAST AND						
NORTH AFRICA	0	0	PROGRAM SERVICES	SEE PART V		99,800.
EUROPE	0	0	PROGRAM SERVICES	SEE PART V		16,056.
						,
<b>3 a</b> Subtotal		0				115,856.
b Total from continuati sheets to Part I		0				0.
c Totals (add lines 3a						
and 3b)	0	0				115,856.

Statement of Activities Outside the United States

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

Schedule F (Form 990) 2020

OMB No. 1545-0047

032071 12-03-20

SCHEDULE F

#### Schedule F (Form 990) 2020

ANTI-DEFAMATION LEAGUE

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

1 (a)	Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
			0						
2				ecognized as charities by the f					
				or counsel has provided a sect	ion 501(c)(3) equ	ivalency letter	🕨		
3	Enter total number of	other organizations o	or entities						

Schedule F (Form 990) 2020

032073 12-03-20

#### 34

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

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

Schedule F (Form 990) 2020

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

Schedule F (Form 990) 2020

032074 12-03-20

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3:

THE ACCRUAL METHOD OF ACCOUNTING IS USED TO DETERMINE THE EXPENSES BY

REGION.

PART I, LINE 3(1), COLUMN E:

MIDDLE EAST AND NORTH AFRICA: MAINTAINING RELATIONSHIPS WITH

ORGANIZATIONS AND GOVERNMENTAL BODIES IN ISRAEL IN ORDER TO PROVIDE

SUPPORT TO THE US OPERATION IN COMBATING ANTI-SEMITISM AND ADVOCATING

FOR THE JEWISH PEOPLE.

PART I, LINE 3(2), COLUMN E:

EUROPE: FUND TRAINING OF ANTI-BIAS EDUCATION PROGRAMS FOR LAW

ENFORCEMENT PROFESSIONALS, EDUCATORS, AND HUMAN RIGHTS NON-GOVERNMENTAL

ORGANIZATIONS IN AUSTRIA.

032075 12-03-20

SCHEDULE G	Supplemental Information Regarding Fundraising or Gaming Activities			ities	OMB No. 1545-0047					
(Form 990 or 990-EZ)		if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.						or if the	2020	
Department of the Treasury Attach to Form 990 or Form 990-EZ.			0-EZ.			Open to Public				
Internal Revenue Service	► Go	o to www.irs.gov/Fo	rm990 for instr	ruction	s and	the latest informati	on.		Inspection	
Name of the organization	ו								r identification number	
		FAMATION L						13-1818		
	ing Activities. complete this par	<ul> <li>Complete if the org t.</li> </ul>	anization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	I filers are not	
1 Indicate whether the	e organization rais	sed funds through an	y of the followir	ng activ	vities. (	Check all that apply.				
a X Mail solicitat	ions		e X Solicita	tion of	non-g	overnment grants				
<b>b</b> X Internet and	email solicitations	3	f X Solicita	tion of	gover	nment grants				
c X Phone solicit	tations		g X Specia	l fundra	aising e	events				
d X In-person so	licitations									
2 a Did the organization	on have a written o	or oral agreement wit	h any individual	(incluc	ling of	ficers, directors, trus	tees,	or		
key employees list	ed in Form 990, P	art VII) or entity in co	nnection with p	rofessi	onal fu	undraising services?		X Yes	s 🗌 No	
<b>b</b> If "Yes," list the 10	highest paid indiv	viduals or entities (fur	ndraisers) pursu	ant to	agreer	ments under which th	ne fur	draiser is to b	е	
compensated at le	ast \$5,000 by the	organization.								
					4		(.)			
(i) Name and address	s of individual			(III) fundr	Did aiser	(iv) Gross receipts		Amount paid or retained by)	(vi) Amount paid	
or entity (fund	Iraiser)	(ii) Activ	vity	have c or cor	ustody trol of	from activity		fundraiser	to (or retained by) organization	
				contrib	utions?		lis	ed in col. (i)		
O'BRIEN GARRETT - 1	L133 19TH			Yes	No					
STREET NW, WASHING	TON, DC	STRATEGY			X	2,131,113.		209,898.	1,921,215.	
		1		1	1					
Total						2,131,113.		209,898.	1,921,215.	
3 List all states in whi	ch the organizatio	n is registered or lies	ansed to solicit	contrib	utiona		it is a	,		
or licensing.	on the organizatio			CONTRID		or has been noulled	11 15 6		giolialion	

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990 or 990-EZ) 2020

032081 11-25-20

#### Schedule G (Form 990 or 990 EZ) 2020 ANTI-DEFAMATION LEAGUE

13-1818723 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

				(b) Event #2	(c) Other events	(d) Total events
			NEVER IS NOW			(add col. (a) through
				HATE	163	col. (c)
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	1,042,873.	523,400.	4,560,566.	6,126,839.
	2	Less: Contributions	1,028,343.	523,400.	2,416,490.	3,968,233.
_	3	Gross income (line 1 minus line 2)	14,530.		2,144,076.	2,158,606.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
ect Ex	7	Food and beverages		3,000.		3,000.
-1	8	Entertainment				
		Other direct expenses		7,033.	1,878,404.	1,885,992.
		Direct expense summary. Add lines 4 throu	-			1,888,992.
Par		Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organization		000 Dert IV/ line 10, er r		269,614.
a		\$15,000 on Form 990-EZ, line 6a.	in answered res on Form	1990, Part IV, line 19, or r	eported more than	
nue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Revenue	1	Gross revenue				
s	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
$\uparrow$		Volunteer labor	Yes%	└── Yes % └── No	└── Yes %	

9 Enter the state(s) in which the organization conducts gaming activities:

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

032082 11-25-20

Schedule G (Form 990 or 990-EZ) 2020

No

No

Sche	edule G (Form 990 or 990-EZ) 2020 ANTI-DEFAMATION LEAGUE	13-1818723 Page 3
11	Does the organization conduct gaming activities with nonmembers?	
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	
	Indicate the percentage of gaming activity conducted in:	
а	The organization's facility	<b>13a</b> %
	An outside facility	
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	ls:
	Name	
	Address	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue received by the organization <b>&gt;</b> \$	ount
	of gaming revenue retained by the third party >\$	
С	If "Yes," enter name and address of the third party:	
	Name	
	Address ►	
16	Gaming manager information:	
	Name	
	Gaming manager compensation	
	Description of services provided	
17	Director/officer Employee Independent contractor Mandatory distributions:	
	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i organization's own exempt activities during the tax year <b>&gt;</b> \$	n the
Pa	t IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	; and Part III, lines 9, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
SCI	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAI	[SERS:
(I	) NAME OF FUNDRAISER: O'BRIEN GARRETT	
<u>(I</u>	) ADDRESS OF FUNDRAISER: 1133 19TH STREET NW, WASHINGTON, I	DC 20036
02000		C (Form 990 or 990-EZ) 2020

	G (Form 990 or 990-EZ)	ANTI-DEFAMATION	LEAGUE
Part IV	Supplemental Ir	nformation (continued)	

Schedule G (Form 990 or 990-EZ)
032084 04-01-20

sc	HEDULE J	Compensation Information		OMB No.	1545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	20	<u> </u>
		Compensated Employees		20	ZU	J
Depa	tment of the Treasury	<ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 23.</li> <li>Attach to Form 990.</li> </ul>		Open to		
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	ne of the organizatio			identificatio		mber
		ANTI-DEFAMATION LEAGUE	13-1	181872	3	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	X First-class or o					
	X Travel for com					
		cation and gross-up payments				
	Discretionary	spending account Personal services (such as maid, chauffer	ir, chef)			
	If any of the h	an Ban da ang shartan da Baldan ang shartan 199 - 199 - 199 - 19				
b		on line 1a are checked, did the organization follow a written policy regarding payment or		41.	х	
~		provision of all of the expenses described above? If "No," complete Part III to explain		1b		<u> </u>
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,		2	x	
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Λ	
3	Indicate which if a	ny, of the following the organization used to establish the compensation of the organization's				
3		ector. Check all that apply. Do not check any boxes for methods used by a related organization s				
		ation of the CEO/Executive Director, but explain in Part III.	51110			
	X Compensation					
		compensation consultant X Compensation survey or study				
	X Form 990 of c		ommittee			
			ommittee			
4	During the year, di	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
-	organization or a re					
а	-	e payment or change-of-control payment?		4a	Х	
b		eive payment from a supplemental nonqualified retirement plan?			Х	
с		eive payment from an equity-based compensation arrangement?				X
		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	-					
	Only section 501(	:)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	evenues of:				
а	The organization?			5a		X
b	Any related organiz	ation?		5b		X
		or 5b, describe in Part III.				
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	net earnings of:				
а						X
b	Any related organiz	ation?		<u>6b</u>		X
		or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		nes 5 and 6? If "Yes," describe in Part III		7	X	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ne			
_				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
	Regulations section					
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forr	n 990	) 2020

032111 12-07-20

## 13-1818723

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

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

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

		(B) Breakdown of V	N-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base	(ii) Bonus &	(iii) Other	compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred
(A) Name and Title		compensation	incentive	reportable	compondation			on prior Form 990
			compensation	compensation				
(1) JONATHAN GREENBLATT	(i)	305,598.	120,450.	27,448.	3,282.	17,412.	474,190.	0.
CEO & NATIONAL DIRECTOR	(ii)	305,598.	120,450.	27,448.	3,282.	17,412.	474,190.	0.
(2) FREDERIC BLOCH	(i)	308,933.	76,500.	12,107.	2,380.	14,700.	414,620.	0.
SVP, GROWTH	(ii)	54,517.	13,500.	2,137.	420.	2,595.	73,169.	0.
(3) AMANDA SUSSKIND	(i)	127,516.	0.	233,779.	2,541.	9,056.	372,892.	0.
REGIONAL DIRECTOR (THRU 07/2020)	(ii)	22,503.	0.	41,255.	448.	1,598.	65,804.	0.
(4) BETH M. KATZNELSON - DIR., NAT	(i)	98,919.	0.	176,740.	1,360.	26,643.	303,662.	0.
PARTNERSHIPS (ADL) (THRU 09/2020)	(ii)	17,456.	0.	31,190.	240.	4,702.	53,588.	0.
(5) EMILY BROMBERG	(i)	272,661.	25,000.	0.	0.	26,257.	323,918.	0.
CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ANAT KENDAL	(i)	213,326.	12,750.	4,098.	0.	34,725.	264,899.	0.
SVP, FINANCE & ADMINISTRATION	(ii)	37,646.	2,250.	723.	0.	6,128.	46,747.	0.
(7) STEVEN SHEINBERG	(i)	203,040.	18,700.	2,112.	2,151.	36,340.	262,343.	0.
SVP & GENERAL COUNSEL	(ii)	35,831.	3,300.	372.	380.	6,415.	46,298.	0.
(8) ROBERT TRESTAN	(i)	220,865.	0.	216.	2,033.	36,978.	260,092.	0.
REGIONAL DIRECTOR	(ii)	38,976.	0.	38.	359.	6,525.	45,898.	0.
(9) THOMAS RUDERMAN	(i)	250,735.	25,000.	0.	0.	27,730.	303,465.	0.
SVP, TALENT & KNOWLEDGE	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) EILEEN HERSHENOV	(i)	265,104.	7,000.	0.	0.	26,730.	298,834.	0.
SVP, POLICY	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) SETH BRYSK	(i)	209,671.	3,595.	121.	2,061.	35,788.	251,236.	0.
REGIONAL DIRECTOR	(ii)	37,001.	634.	22.	363.	6,316.	44,336.	0.
(12) BETH NATHANSON	(i)	216,721.	8,500.	228.	2,851.	12,718.	241,018.	0.
VP, STRATEGIC PARTNERSHIPS	(ii)	38,245.	1,500.	40.	503.	2,244.	42,532.	0.
(13) GEORGE SELIM	(i)	213,014.	16,000.	0.	0.	19,500.	248,514.	0.
SVP, PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) CLIFFORD SCHECHTER	(i)	157,996.	10,000.	0.	0.	26,554.	194,550.	0.
SENIOR ADVISOR TO THE CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) ABRAHAM FOXMAN	(i)	81,275.	0.	0.	0.	0.	81,275.	0.
NATIONAL DIRECTOR EMERITUS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							

#### Part III Supplemental Information

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

## PART I, LINE 1A:

TRAVEL REIMBURSEMENT POLICY - ADL HAS A WRITTEN POLICY REGARDING TRAVEL

REIMBURSEMENT IN ACCORDANCE WITH RULES FOR AN ACCOUNTABLE PLAN. THE ADL

NATIONAL CHAIR REVIEWS A PERIODIC SUMMARY OF THE ADL CEO/NATIONAL

DIRECTOR'S EXPENSE REPORTS. IN ADDITION, ALL TRAVEL COSTS RELATED TO

COMPANIONS, ONCE APPROVED, ARE FULLY TAXABLE.

HEALTH REIMBURSEMENT - ADL PROVIDES REIMBURSEMENT TO JONATHAN GREENBLATT,

CEO AND NATIONAL DIRECTOR, FOR GYM MEMBERSHIP FEES WHICH ARE TAXABLE AND

REPORTED IN HIS W-2.

PART I, LINES 4A-B:

BETH M. KATZNELSON AND AMANDA F. SUSSKIND RECEIVED A SEVERANCE PAYMENT IN

CALENDAR YEAR 2020. THESE SEVERANCE PAYMENTS ARE DISCLOSED IN FORM 990,

SCHEDULE J, PART II, COLUMN (B)(III).

IN 2012, ADL AND THE ADL FOUNDATION FINALIZED A SUPPLEMENTAL EXECUTIVE

RETIREMENT PLAN (SERP) BENEFIT FOR ABRAHAM H. FOXMAN, ADL'S NATIONAL

DIRECTOR SINCE 1987. IT WAS IN RECOGNITION OF HIS SIGNIFICANT VALUE TO ADL

Part III Supplemental Information

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

AND THE ADL FOUNDATION AT THAT TIME AND GOING FORWARD AND HIS FIFTY YEARS

OF INVALUABLE AND TIRELESS SERVICE, INCLUDING 25 YEARS AS A NATIONAL

DIRECTOR. THE SERP IS A RETIREMENT BENEFIT THAT IS PAID OUT OVER TIME.

\$14,100 WAS TAXABLE ON THE 2020 FORM W-2. THE REMAINING BENEFIT IS INCLUDED

IN THE LONG-TERM PENSION OBLIGATIONS LIABILITY ON ADL'S BALANCE SHEET. THE

SERP WAS APPROVED BY ADL'S AND ADL FOUNDATION'S JOINT EXECUTIVE

COMPENSATION COMMITTEE. THE COMMITTEE IS A FULLY INDEPENDENT AND

DISINTERESTED BODY. IT WAS RIGOROUS IN ITS METHODOLOGY AND RELIED UPON

INDEPENDENT EXPERTS WHO ADVISED THAT THE SERP (AND THE OVERALL COMPENSATORY

PACKAGE) WAS REASONABLE IN LIGHT OF MARKET COMPARABILITY DATA.

PART I, LINE 7:

A ONE-TIME, PERFORMANCE-BASED BONUS PAYMENT WAS PAID TO INDIVIDUALS MEETING

CERTAIN METRICS. THESE ARE REPORTED IN COLUMN (B)(II). NON-FIXED PAYMENTS

ARE THE COMBINED AMOUNTS FROM THE FILING ORGANIZATION AND THE RELATED

ORGANIZATIONS. THE NAMES ARE NOT BEING DISCLOSED DUE TO CONFIDENTIALITY

AGREEMENTS SIGNED WITH THE RESPECTIVE PARTIES.

PART II:

Part III Supplemental Information

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

CLIFF SCHECHTER WAS AN OFFICER OF ADL IN PAST FIVE YEARS. AFTER HIS

RETIREMENT FROM ADL'S OFFICER POSITION, CLIFF SCHECHTER WAS STILL

EMPLOYED BY ADL AS SENIOR ADVISOR TO THE CEO. THE COMPENSATION WAS

REPORTED IN SCHEDULE J PART II.REPORTED IN SCHEDULE J PART II.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.



13-1818723

ANTI-DEFAMATION LEAGUE

GENERAL STATEMENT ABOUT THE IMPACT OF COVID-19 ON THE FOUNDATION: ADL HAS CONTINUED ITS OPERATIONS AND PROGRAMS, INCLUDING INTRODUCING NEW ONLINE VIRTUAL PROGRAMMING, WHILE WORKING REMOTELY AS A RESULT OF THE CORONAVIRUS PANDEMIC (COVID-19). THE COVID-19 PANDEMIC HAS NEGATIVELY AFFECTED NATIONAL, STATE AND LOCAL ECONOMIES AND GLOBAL FINANCIAL MARKETS. WHILE THE FINANCIAL IMPACT ON ADL CANNOT BE THE FOUNDATION DOES NOT ANTICIPATE THAT THE OUANTIFIED AT THIS TIME, PANDEMIC WILL HAVE A MATERIAL ADVERSE EFFECT ON THE CURRENT AND FUTURE FINANCIAL PROFILE AND OPERATING PERFORMANCE OF ADL. AS IT MONITORS THE COURSE OF THE PANDEMIC, ADL WILL CONTINUE TO DO EVERYTHING IT CAN CAN TO HELP ITS STAFF AND SUPPORTERS TO COPE WITH THE COMPLEXITIES OF RUNNING A NONPROFIT ORGANIZATION DURING A GLOBAL PANDEMIC. ADL IS IF NECESSARY, PREPARED TO TAKE ADDITIONAL MEASURE, TO ENSURE THE CONTINUED HEALTH AND SAFETY OF ADL'S STAFF WHILE CONTINUING TO FULFILL ITS ORGANIZATIONAL MISSION.

AS OF APRIL 28, 2020, ADL RECEIVED A \$7,400,615 LOAN FOR THE PAYCHECK PROTECTION PROGRAM (PPP). THE PROCEEDS FROM THE LOAN WERE USED TO PAY PAYROLL, RENT AND UTILITIES. ADL APPLIED FOR FORGIVENESS IN MAY 2021 IN ACCORDANCE WITH THE PROVISIONS FOR LOAN FORGIVENESS. DURING JULY 2021, THE APPLICATION FOR FORGIVENESS WAS APPROVED. AS OF DECEMBER 31, 2020, THE BALANCE IS RECORDED IN THE CONSOLIDATED STATEMENT OF FINANCIAL POSITION IN PAYROLL PROTECTION PROGRAM LOAN PAYABLE.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) 2020

 032211
 11-20-20

ANTI-DEFAMATION LEAGUE

Employer identification number 13-1818723

Page 2

DURING 2020, ADL IMPLEMENTED THE MARKETING AND COMMUNICATIONS PROGRAM

WHICH WORKS TO ADVOCATE AGAINST INJUSTICES.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

DURING 2020, ADL COMBINED THE CENTER OF TECHNOLOGY AND SOCIETY PROGRAM

INTO THE CENTER OF EXTREMISM (COE) PROGRAM. THE SUPPORT OF ISRAEL

PROGRAM COMBINED INTO THE INTERNATIONAL AFFAIRS PROGRAM.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

EMPLOYEES WITH IN-DEPTH TRAINING AND RESOURCES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

INTERNATIONAL AFFAIRS AND INTERFAITH PROGRAMS - MAINTAINS CONTACTS THROUGHOUT EUROPE, LATIN AMERICA, THE MIDEAST, AND THE UNITED STATES FROM WHICH INFORMATION IS GATHERED RELATING TO POLITICAL AND SOCIAL MOVEMENTS THAT IMPACT ANTI-SEMITISM AND BIGOTRY. OBSERVES AND ANALYZES TRENDS AROUND THE WORLD RELATED TO ANTI-SEMITISM, HATE, AND RELATED ISSUES. PREPARES AND DISSEMINATES REPORTS AND DATA REGARDING ISRAEL'S SECURITY, U.S.-ISRAEL RELATIONS, BIGOTRY AND ANTI-SEMITISM IN THE MIDDLE EAST. INITIATIVE EDUCATIONAL PROGRAMS ON THE MIDEAST AND ISRAELI ISSUES, AS WELL AS ON INTERNATIONAL BEST PRACTICES ON FIGHTING ANTI-SEMITISM AND BIGOTRY, MAINTAINS CONTACT WITH FAITH LEADERS IN THE U.S. AND OTHER COUNTRIES. DEVELOP PROGRAMS OF COOPERATION ON INTERGROUP UNDERSTANDING AND HUMAN RELATIONS WITH CATHOLIC AND PROTESTANT RELIGIOUS GROUPS AT COMMUNITY, REGIONAL, AND NATIONAL LEVELS. PARTICIPATES IN EDUCATIONAL AND ACTION PROGRAMS IN INTERFAITH EFFORTS. ORGANIZES TRAINING PROGRAMS AND CURRICULUM DEVELOPMENT FOR SEMINARS AND RELIGIOUS-ORIENTED EDUCATIONAL INSTITUTIONS. Schedule O (Form 990 or 990-EZ) 2020 032212 11-20-20

47

LEADERSHIP - THE LEADERSHIP DIVISION IS RESPONSIBLE FOR ATTRACTING,

EDUCATING AND CULTIVATING ADL LEADERS BY HOSTING SEVERAL ANNUAL

NATIONAL MEETINGS, OVERSEEING GOVERNANCE, PROVIDING PERIODIC E-MAIL AND

PRINT COMMUNICATIONS ON ADL ISSUES, RECRUITING PARTICIPANTS FOR

MISSIONS TO FOREIGN COUNTRIES, AND HOSTING PRIVATE MEETINGS WITH

NATIONAL AND WORLD LEADERS AT ADL HEADQUARTERS. THE LEADERSHIP DIVISION

PROVIDES ONGOING SUPPORT TO ADL REGIONS TO HELP ENHANCE THEIR

LEADERSHIP DEVELOPMENT PROGRAMS AND ALSO OFFERS GUIDANCE AND ASSISTANCE

TO REGIONAL LEADERS LOOKING TO EXPAND THEIR INVOLVEMENT ON THE NATIONAL

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LEVEL.
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EXPENSES \$ 19,181,125. INCLUDING GRANTS OF \$ 0. REVENUE \$ 784,959.

FORM 990, PART VI, SECTION A, LINE 1:

BEFORE 2018, ADL WAS GOVERNED BY ITS NATIONAL COMMISSION. COMMENCING IN 2018, ADL IS GOVERNED BY ITS BOARD OF DIRECTORS. THE BOARD'S EXECUTIVE

COMMITTEE IS AUTHORIZED TO ACT ON BEHALF OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

COPIES OF THE DRAFT FORM 990 WERE PROVIDED TO THE MEMBERS OF ADL'S AUDIT

COMMITTEE, WHICH REVIEWED AND APPROVED IT AT ITS FALL 2021 MEETING.

SUBSEQUENT TO THE MEETING, AN EMAIL WAS SENT TO ADL'S BOARD OF DIRECTORS

PROVIDING THEM WITH A COPY OF THE FORM 990 FOR THEIR REVIEW BEFORE IT IS

FILED WITH THE IRS ON OR ABOUT NOVEMBER 15, 2021.

FORM 990, PART VI, SECTION B, LINE 12C: ADL HAS A WRITTEN CONFLICT OF INTEREST POLICY APPROVED BY THE BOARD OF DIRECTORS THAT REQUIRES ITS OFFICERS, DIRECTORS, AND EMPLOYEES TO ANNUALLY 032212 11-20-20 Schedule O (Form 990 or 990-EZ) 2020 48

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2020.05000 ANTI-DEFAMATION LEAGUE

Schedule O (Form 990 or 990-EZ) 2020	Page <b>2</b>
Name of the organization ANTI-DEFAMATION LEAGUE	Employer identification number 13-1818723
DISCLOSE POTENTIAL CONFLICTS OF INTEREST, THOSE OF THEIR F	AMILY MEMBERS AND
OF OTHER INTERESTED PARTIES. THIS DISCLOSURE FORM IS DISTR	IBUTED BY THE
ORGANIZATION'S TALENT AND KNOWLEDGE DEPARTMENT (T&K) TO AL	L STAFF ON AN
ANNUAL BASIS. T&K ENSURES THAT ALL FORMS ARE COMPLETED. AD	L'S SVP, TALENT
OF KNOWLEDGE AND GENERAL COUNSEL REVIEW THE FORMS FOR CONF	LICTS; SENIOR
STAFF CONFLICTS ARE REPORTED TO THE AUDIT COMMITTEE. THE D	ISCLOSURE FORM IS
DISTRIBUTED BY THE LEADERSHIP DIVISION TO THE MEMBERS OF T	HE BOARD OF
DIRECTORS ON AN ANNUAL BASIS. A SUMMARY AND THE NOTED FIND	INGS ARE THEN
REVIEWED BY THE GENERAL COUNSEL AND SVP, FINANCE & ACCOUNT	ING, WHO THEN
PROVIDE ALL DISCLOSURES TO THE AUDIT COMMITTEE FOR FURTHER	REVIEW. THE
AUDIT COMMITTEE REVIEWS AND DETERMINES BY MAJORITY VOTE WH	ETHER A CONFLICT
EXISTS. IF A CONFLICT IS NOTED INVOLVING A MEMBER OF THE A	UDIT COMMITTEE,
THAT PERSON RECUSES HIM/HERSELF FROM VOTING.	

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

ADL'S PROCESS FOR DETERMINING THE COMPENSATION OF OTHER OFFICERS AND ALL KEY EMPLOYEES INCLUDES CONSULTATION WITH AN INDEPENDENT COMPENSATION CONSULTANT THAT PERFORMS A COMPENSATION MARKET STUDY AND PROVIDES SALARY STRUCTURE GRADING. THIS IS REVIEWED AND A DECISION IS MADE BY THE ADL BOARD CHAIR WHO PRESENTS A RECOMMENDATION TO THE EXECUTIVE COMPENSATION COMMITTEE. THE EXECUTIVE COMPENSATION COMMITTEE MAKES A DECISION ON THE RECOMMENDATION, AS DOCUMENTED IN THE COMMITTEE MEETING MINUTES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AK,AZ,AR,CA,CO,CT,FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,MS,MO,NV,NH,NY,NC,ND OH,OK,OR,PA,RI,SC,TN,VA,WA,WV,WI

49

	FORM 99	90, PART	VI,	SECTION	C,	LINE	19:	
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Schedule O (Form 990 or 990-EZ) 2020

032212 11-20-20

Schedule O (Form 990 or 990-EZ) 2020	Page <b>2</b>
Name of the organization ANTI-DEFAMATION LEAGUE	Employer identification number 13-1818723
THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS OF ADL AND	THE ADL FOUNDATION
AND THE ANNUAL REPORT ARE MADE AVAILABLE TO THE PUBLIC THE	ROUGH A DIRECT
LINK ON THE ADL WEBSITE, (WWW.ADL.ORG). FURTHERMORE, A FUI	L SET OF THE
AUDITED CONSOLIDATED FINANCIAL STATEMENTS OF ADL AND THE A	ADL FOUNDATION IS
AVAILABLE UPON REQUEST AS INDICATED ON THE ADL WEBSITE AND	O IN THE ANNUAL
REPORT. THE ARTICLES OF INCORPORATION ARE AVAILABLE AT THE	<u>E DEPARTMENT OF</u>
CONSUMER AND REGULATORY AFFAIRS IN WASHINGTON, DC.	
FORM 990, PART VII, SECTION A, LINE 1:	
THE BOARD LIST IS ONLY SHOWING VOTING MEMBERS.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
NET PERIODIC BENEFIT COST	-1,315,759.
PENSION CHARGE OTHER THAN NET PERIODIC BENEFIT COST	-938,953.
OTHER BOOK-TAX DIFFERENCE	-6,699,264.
TOTAL TO FORM 990, PART XI, LINE 9	-8,953,976.
032212 11-20-20 Sch	nedule O (Form 990 or 990-EZ) 2020

50 2020.05000 ANTI-DEFAMATION LEAGUE 01685311

032161 10-28-20 LHA

JERUSALEM, ISRAEL 92141

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

Part II	Identification of Related Tax-Exempt Organizatio	ons.	Complete	if the organization ans	swered "Yes" on Form 990, Par	t IV, line 34, becaus	e it had one or more	related tax-exempt
Farti	organizations during the tax year.							

# **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990.

(c)

Legal domicile (state or

foreign country)

(d)

Total income

(e)

End-of-year assets

ADL

2020 Open to Public Inspection

Employer identification number

(f)

Direct controlling

entity

13-1818723

Name of the organization

## ANTI-DEFAMATION LEAGUE

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I

ADVOCACY

	-						
Part II Identification of Related Tax-Exempt Organiz	ations. Complete if the organization	answered "Yes" on Form 990	), Part IV, line 34, I	pecause it had one	or more related tax-exer	mpt	
			1		1		
(a)	(b)	(c)	(d)	(e)	(f)	Section 5	<b>g)</b>
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	contr	rolled
of related organization		foreign country)	section	status (if section	entity	ent	ity?
				501(c)(3))		Yes	No
ANTI-DEFAMATION LEAGUE FOUNDATION -							
13-2887439, 605 THIRD AVENUE, NEW YORK, NY	SUPPORT ADL & ELIMINATE						
10158	ANTI-SEMITISM	NEW YORK	501(C)(3)	LINE 7	ADL	Х	
ADLF COMMON FUND - 13-3095748							
605 THRID AVENUE							
NEW YORK, NY 10158	ASSIST & SUPPORT ADL	NEW YORK	501(C)(3)	PF	ADL	X	
ANTI-DEFAMATION LEAGUE - ISRAEL						1	
21 JABOTINSKY STREET							

Х

ISRAEL

(b)

Primary activity

Department of the Treasury Internal Revenue Service

SCHEDULE R

(Form 990)	

(a)

Name, address, and EIN (if applicable)

of disregarded entity

# Schedule R (Form 990) 2020 ANTI-DEFAMATION LEAGUE

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate itions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	l or Percentag ^{ing} ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yesl	lo
	1										
	1										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(C) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	<b>(e)</b> Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	(i Sec 512(t contr enti	i) tion o)(13) olled ity?
		country)		0. 1.0.01/				Yes	No

# Schedule R (Form 990) 2020 ANTI-DEFAMATION LEAGUE

(4) ANTI-DEFAMATION LEAGUE FOUNDATION

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	s No
1 During the tax year, did the organization engage in any of the following transaction	ns with one or more re	lated organizations listed	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entit	ty			1a		X
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		X
c Gift, grant, or capital contribution from related organization(s)				1c	X	
d Loans or loan guarantees to or for related organization(s)				1d	X	
e Loans or loan guarantees by related organization(s)				1e	X	-
f Dividends from related organization(s)				1f		Х
g Sale of assets to related organization(s)				1g		X
h Purchase of assets from related organization(s)				1h		Х
i Exchange of assets with related organization(s)				1i		Х
j Lease of facilities, equipment, or other assets to related organization(s)				<b>1</b> j		X
k Lease of facilities, equipment, or other assets from related organization(s)				1k	x	
I Performance of services or membership or fundraising solicitations for related orga				11	X	
m Performance of services or membership or fundraising solicitations by related orga				1m	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organizat				1n	X	
				10	X	
p Reimbursement paid to related organization(s) for expenses				1p		X
q Reimbursement paid by related organization(s) for expenses				1q	X	
r Other transfer of cash or property to related organization(s)				1r		X
s Other transfer of cash or property from related organization(s)				1s		X
2 If the answer to any of the above is "Yes," see the instructions for information on v	who must complete th	is line, including covered r	elationships and transaction thresholds.			
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amount ir	volved		
(1) ANTI-DEFAMATION LEAGUE FOUNDATION	С	11,880,987.	ACTUAL			
(2) ANTI-DEFAMATION LEAGUE FOUNDATION	D	4,000,000.	ACTUAL			
(3) ANTI-DEFAMATION LEAGUE FOUNDATION	Е	4,000,000.	ACTUAL			

(5)

(6)

Κ

291,946. ACTUAL

# Schedule R (Form 990) 2020 ANTI-DEFAMATION LEAGUE

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	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e Are partner 501(c org: <b>Yes</b>	rs sec. c)(3) s.?	<b>(f)</b> Share of total income	(h Dispro tiona allocati <b>Yes</b>	) por- ate ons? <b>No</b>	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partno <b>Yes</b> I	al or F ging er? <b>NO</b>	<b>(k)</b> Percentage ownership

hedule R (Form 990)	2020 ANTI-DEFAMATION LEAGUE	13-1818723 Page 5
Provide ad	ditional information for responses to questions on Schedule R. See instructions.	
		1
5 10-28-20	55	Schedule R (Form 990) 20