

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.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2015 calendar year, or tax year beginning **2015**, and ending **20**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization AMNESTY INTERNATIONAL USA, INC.		D Employer identification number 52-0851555
	Doing business as		E Telephone number (212) 807-8400
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	5 PENN PLAZA, 16TH FLOOR		
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10001		G Gross receipts \$ 43,456,062.	
F Name and address of principal officer: MARGARET HUANG AIUSA, 5 PENN PLAZA, 16TH FL, NEW YORK, NY 10001		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶ 9240	
J Website: ▶ WWW.AMNESTYUSA.ORG		L Year of formation: 1966 M State of legal domicile: NY	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>TO ACT IN CONCERT WITH THE INTERNATIONAL HUMAN RIGHTS MOVEMENT, WITHIN THE CONTEXT OF ITS WORK TO PROMOTE ALL PROVISIONS IN THE UNIVERSAL DECLARATION OF HUMAN RIGHTS.</u>	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	17.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	17.
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	424.
	6 Total number of volunteers (estimate if necessary)	9,735.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b Net unrelated business taxable income from Form 990-T, line 34	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 31,785,589. Current Year: 37,447,820.
	9 Program service revenue (Part VIII, line 2g)	192,982. 298,011.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,032,767. 525,757.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	512,683. 725,763.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33,524,021. 38,997,351.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,554,778. 8,922,520.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	8,867,508. 10,056,850.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	3,556,834. 707,650.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,340,577.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	11,006,417. 15,921,135.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	31,985,537. 35,608,155.	
19 Revenue less expenses. Subtract line 18 from line 12	1,538,484. 3,389,196.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 23,610,089. End of Year: 24,885,388.
	21 Total liabilities (Part X, line 26)	5,906,429. 4,217,270.
	22 Net assets or fund balances. Subtract line 21 from line 20	17,703,660. 20,668,118.

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		Date
	Michael Greenberg, CFO		
Type or print name and title			
Paid Preparer Use Only	Print/type preparer's name	Preparer's signature	Date
	PAUL HAMMERSCHMIDT	<i>[Signature]</i>	7/12/16
	Firm's name ▶ BDO USA, LLP	Check <input type="checkbox"/> if self-employed	PTIN P01384178
Firm's address ▶ 100 PARK AVENUE, NEW YORK, NY 10017-5001		Firm's EIN ▶ 13-5381590	Phone no. 212-885-8000

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2015)

Application for Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**
► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

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

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

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

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

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See Instructions.	Name of exempt organization or other filer, see instructions. AMNESTY INTERNATIONAL USA, INC.	Employer identification number (EIN) or 52-0851555
	Number, street, and room or suite no. If a P.O. box, see instructions. 5 PENN PLAZA, 16TH FLOOR	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10001	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	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 4720 (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
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► MICHAEL GREENBERG

Telephone No. ► 212 633-4233 FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 9240. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2016, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ► calendar year 2015 or
 ► tax year beginning _____, 20____, and ending _____, 20____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$	0.
b If this application is for Form 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.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Part 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:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

[] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

[] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,672,127. including grants of \$ 43,520.) (Revenue \$ 41,104.)

ATTACHMENT 2

4b (Code:) (Expenses \$ 8,879,000. including grants of \$ 8,879,000.) (Revenue \$ 0.)

INTERNATIONAL - SUPPORTS RESEARCH INTO HUMAN RIGHTS VIOLATIONS WORLDWIDE AND THE COORDINATION OF INTERNATIONAL EFFORTS TO STOP THEM. THE LARGEST COMPONENT OF THIS PROGRAM IS THE ANNUAL ASSESSMENT PAID TO THE INTERNATIONAL SECRETARIAT TO FUND ITS RESEARCH AND ACTIONS. FUNDS GO TO PREVENT AND END GRAVE ABUSES OF THE RIGHTS TO PHYSICAL AND MENTAL INTEGRITY, FREEDOM OF CONSCIENCE AND EXPRESSION, AND FREEDOM FROM DISCRIMINATION. ALSO INCLUDED ARE SUPPORT FOR INTERNATIONAL MEMBERSHIP AND PROGRAM DEVELOPMENT IN THE GLOBAL SOUTH AND PARTICIPATION IN INTERNATIONAL MEETINGS FURTHERING THE GOALS OF THE COLLECTIVE MOVEMENT.

4c (Code:) (Expenses \$ 5,438,429. including grants of \$ 0.) (Revenue \$ 256,907.)

ATTACHMENT 3

4d Other program services (Describe in Schedule O.)

(Expenses \$ 7,947,154. including grants of \$ 0.) (Revenue \$ 0.)

4e Total program service expenses 27,936,710.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows 1-19 with various questions about organizational activities and financial reporting.

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III.</i>	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? <i>If "Yes," complete Schedule J.</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		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.	X	

Part 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

Table with columns for question numbers (1a-14b), Yes, and No. Contains various tax compliance questions and their corresponding responses.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (17), 1b (17), 2, 3, 4, 5, 6, 7a, 7b, 8, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 4
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: MICHAEL GREENBERG, AIUSA, 5 PENN PLAZA, 16TH FL, NY, NY 10001 212-633-4233

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANN BURROUGHS BOARD CHAIR	10.00 0.	X		X				0.	0.	0.
(2) REZA FAKHARI VICE-CHAIR	10.00 0.	X		X				0.	0.	0.
(3) ANIKET SHAH (FROM 9/15) TREASURER	10.00 0.	X		X				0.	0.	0.
(4) GOVIND ACHARYA SECRETARY	10.00 0.	X		X				0.	0.	0.
(5) JAN KNIPPERS BLACK BOARD MEMBER	10.00 0.	X						0.	0.	0.
(6) KRISTINA BRADY (THRU 12/15) BOARD MEMBER	10.00 0.	X						0.	0.	0.
(7) KATHLEEN CAVANAUGH (THRU 9/15) BOARD MEMBER	10.00 0.	X						0.	0.	0.
(8) PRATAP CHATTERJEE BOARD MEMBER	10.00 0.	X						0.	0.	0.
(9) BECKY FARRAR BOARD MEMBER	10.00 0.	X						0.	0.	0.
(10) MOLLY GOLDBERG (FROM 9/15) BOARD MEMBER	10.00 0.	X						0.	0.	0.
(11) EMILY HONG (THRU 9/15) BOARD MEMBER	10.00 0.	X						0.	0.	0.
(12) ANGIE HOUGAS (FROM 9/15) BOARD MEMBER	10.00 0.	X						0.	0.	0.
(13) GERRY HUDSON (FROM 9/15) BOARD MEMBER	10.00 0.	X						0.	0.	0.
(14) NATALIE JESIONKA BOARD MEMBER	10.00 0.	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) MATTHEW KENNIS BOARD MEMBER	10.00 0.	X					0.	0.	0.	
(16) MARCEL KITISSOU (THRU 9/15) BOARD MEMBER	10.00 0.	X					0.	0.	0.	
(17) JANET E. LORD BOARD MEMBER	10.00 0.	X					0.	0.	0.	
(18) THOMAS PEREIRA BOARD MEMBER	10.00 0.	X					0.	0.	0.	
(19) TERRY KAY ROCKEFELLER BOARD MEMBER	10.00 0.	X					0.	0.	0.	
(20) DAVID STAMPS BOARD MEMBER	10.00 0.	X					0.	0.	0.	
(21) LINDA VEAZEY BOARD MEMBER	10.00 0.	X					0.	0.	0.	
(22) RAFIA ZAKARIA (THRU 9/15) BOARD MEMBER	10.00 0.	X					0.	0.	0.	
(23) MARGARET HUANG INTERIM EXECUTIVE DIRECTOR	35.00 0.			X			202,897.	0.	36,553.	
(24) STEVEN HAWKINS (THRU 12/15) EXECUTIVE DIRECTOR	35.00 0.			X			274,603.	0.	38,973.	
(25) YOMARA HERNANDEZ (THRU 6/15) CHIEF FINANCIAL OFFICER	35.00 0.			X			142,659.	0.	9,044.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							1,758,872.	0.	230,379.	
d Total (add lines 1b and 1c)							1,758,872.	0.	230,379.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 19

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 5		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶** 21

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) MICHAEL GREENBERG (FROM 6/15) CHIEF FINANCIAL OFFICER	35.00 0.			X				105,346.	0.	5,057.
(27) DANIEL JAMES MCGREGOR CHIEF DEVELOPMENT OFFICER	35.00 0.				X			199,300.	0.	34,818.
(28) MICHAEL P. O'REILLY D.E.D. OF MEMBER ADVOCACY	35.00 0.					X		173,358.	0.	35,978.
(29) RACHEL O'LEARY DEP. EXEC. DIR. OF MEMBERSHIP	35.00 0.					X		174,916.	0.	15,337.
(30) MARVIN BING NAT'L DIR., ART FOR AMNESTY	35.00 0.					X		173,813.	0.	21,748.
(31) CAMMIE CROFT (THRU 11/15) CHIEF DIGITAL COMM. OFFICER	35.00 0.					X		159,654.	0.	27,843.
(32) ADOTEI AKWEI MANAGING DIRECTOR, ADVOCACY	35.00 0.					X		152,326.	0.	5,028.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 19

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions) . .	1e						
	f All other contributions, gifts, grants, and similar amounts not included above .	1f	37,447,820.					
	g Noncash contributions included in lines 1a-1f: \$		901,472.					
	h Total. Add lines 1a-1f ▶			37,447,820.				
Program Service Revenue	2a <u>LITERATURE AND MERCHANDISE SALES</u>			Business Code				
			452000	175,018.	175,018.			
	b <u>MEDIA AND MERCHANDISE SALES</u>		452000	81,889.	81,889.			
	c <u>CONFERENCE FEES</u>		900099	41,104.	41,104.			
	d _____							
	e _____							
	f All other program service revenue							
	g Total. Add lines 2a-2f ▶			298,011.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). ▶			370,779.			370,779.	
	4 Income from investment of tax-exempt bond proceeds . ▶			0.				
	5 Royalties ▶			88,371.			88,371.	
	6a Gross rents	(i) Real	620,319.					
		(ii) Personal						
		b Less: rental expenses						
		c Rental income or (loss)	620,319.					
	d Net rental income or (loss) ▶			620,319.			620,319.	
	7a Gross amount from sales of assets other than inventory	(i) Securities	4,613,689.					
		(ii) Other						
		b Less: cost or other basis and sales expenses	4,458,711.					
		c Gain or (loss)	154,978.					
	d Net gain or (loss) ▶			154,978.			154,978.	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 a							
		b Less: direct expenses b						
c Net income or (loss) from fundraising events ▶				0.				
9a Gross income from gaming activities. See Part IV, line 19 a								
	b Less: direct expenses b							
	c Net income or (loss) from gaming activities ▶			0.				
10a Gross sales of inventory, less returns and allowances a								
	b Less: cost of goods sold b							
	c Net income or (loss) from sales of inventory ▶			0.				
Miscellaneous Revenue			Business Code					
11a <u>MISCELLANEOUS</u>		900099	17,073.			17,073.		
b _____								
c _____								
d All other revenue								
e Total. Add lines 11a-11d ▶			17,073.					
12 Total revenue. See instructions. ▶			38,997,351.	298,011.		1,251,520.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	43,520.	43,520.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	8,879,000.	8,879,000.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	1,049,250.	797,430.	125,910.	125,910.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	7,582,444.	5,332,805.	1,182,998.	1,066,641.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	114,401.	80,246.	17,984.	16,171.
9 Other employee benefits	685,752.	481,152.	107,716.	96,884.
10 Payroll taxes	625,003.	443,422.	95,065.	86,516.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	53,462.	41,786.	2,016.	9,660.
c Accounting	172,188.	134,582.	6,494.	31,112.
d Lobbying	382,700.	382,700.		
e Professional fundraising services. See Part IV, line 17.	707,650.			707,650.
f Investment management fees	96,253.	78,567.	9,519.	8,167.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	2,092,939.	1,552,255.	93,367.	447,317.
12 Advertising and promotion	374,223.	136,162.	14,244.	223,817.
13 Office expenses	2,095,588.	1,075,587.	126,004.	893,997.
14 Information technology	235,466.	185,781.	18,206.	31,479.
15 Royalties	0.			
16 Occupancy	2,543,042.	2,079,706.	253,042.	210,294.
17 Travel	1,719,410.	1,546,385.	71,468.	101,557.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	34,043.	12,386.	1,296.	20,361.
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	149,822.	122,854.	14,982.	11,986.
23 Insurance	102,226.	83,444.	10,110.	8,672.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>DIRECT COMMUNICATIONS</u>	5,425,231.	4,067,593.	156,766.	1,200,872.
b <u>DUES AND SUBSCRIPTIONS</u>	291,108.	252,944.	8,735.	29,429.
c <u>EQUIPMENT REPAIR/MAINTENANCE</u>	153,434.	126,403.	14,946.	12,085.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	35,608,155.	27,936,710.	2,330,868.	5,340,577.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	4,826,501.	3,074,744.		1,751,757.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	4,837,409.	1	4,601,087.
	2 Savings and temporary cash investments	895,233.	2	1,646,410.
	3 Pledges and grants receivable, net	287,713.	3	747,336.
	4 Accounts receivable, net	0.	4	0.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	54,116.	8	14,717.
	9 Prepaid expenses and deferred charges	3,026,981.	9	3,145,563.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,955,443.		
	b Less: accumulated depreciation	10b 1,627,875.	372,890.	10c 327,568.
	11 Investments - publicly traded securities	14,105,279.	11	14,373,422.
	12 Investments - other securities. See Part IV, line 11	0.	12	0.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	30,468.	15	29,285.
16 Total assets. Add lines 1 through 15 (must equal line 34)	23,610,089.	16	24,885,388.	
Liabilities	17 Accounts payable and accrued expenses	3,059,165.	17	1,541,849.
	18 Grants payable	0.	18	0.
	19 Deferred revenue	0.	19	0.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,847,264.	25	2,675,421.
	26 Total liabilities. Add lines 17 through 25	5,906,429.	26	4,217,270.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	14,203,082.	27	16,883,310.
	28 Temporarily restricted net assets	1,285,719.	28	1,569,949.
	29 Permanently restricted net assets	2,214,859.	29	2,214,859.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	17,703,660.	33	20,668,118.
34 Total liabilities and net assets/fund balances	23,610,089.	34	24,885,388.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	38,997,351.
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,608,155.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,389,196.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	17,703,660.
5	Net unrealized gains (losses) on investments	5	-424,738.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	20,668,118.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 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?
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2015

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization AMNESTY INTERNATIONAL USA, INC.	Employer identification number 52-0851555
-------------------------------------------------------------	----------------------------------------------

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described 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 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)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990 or 990-EZ) 2015

Part II 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.)

Section A. Public Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2015 (97.63%); 15 Public support percentage from 2014 Schedule A, Part II, line 14 (97.93%); 16a 33 1/3% support test - 2015; 16b 33 1/3% support test - 2014; 17a 10%-facts-and-circumstances test - 2015; 17b 10%-facts-and-circumstances test - 2014; 18 Private foundation.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support; 14 First five years.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2015, 2014. Row 15: Public support percentage for 2015; Row 16: Public support percentage from 2014 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2015, 2014. Row 17: Investment income percentage for 2015; Row 18: Investment income percentage from 2014 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

19b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11 a	
b	A family member of a person described in (a) above?	11 b	
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	11 c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	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? <i>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.</i>	2	

Section 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)? <i>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).</i>	1	

Section 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	
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2	Activities Test. Answer (a) and (b) below.		Yes	No
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? <i>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.</i>	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>	2b		
3	Parent of Supported Organizations. Answer (a) and (b) 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? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

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 1-1/2% 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 .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 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-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2011	2012	2013	2014	2015	TOTAL
MISCELLANEOUS INCOME	58,532.	619,112.	26,398.	70,339.	17,073.	791,454.
TOTALS	<u>58,532.</u>	<u>619,112.</u>	<u>26,398.</u>	<u>70,339.</u>	<u>17,073.</u>	<u>791,454.</u>

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization AMNESTY INTERNATIONAL USA, INC.	Employer identification number 52-0851555
---------------------------------------------------------	----------------------------------------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2015

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		32,400.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		350,300.	
c Total lobbying expenditures (add lines 1a and 1b)		382,700.	
d Other exempt purpose expenditures		27,967,364.	
e Total exempt purpose expenditures (add lines 1c and 1d)		28,350,064.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.	
If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:			
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.	
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.	0.
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.	0.
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	460,889.	276,575.	290,734.	382,700.	1,410,898.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	3,852.		19,500.	32,400.	55,752.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

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

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as required by the instructions.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

AMNESTY INTERNATIONAL USA, INC.

52-0851555

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (a) Total number of conservation easements, (b) Total acreage restricted by conservation easements, (c) Number of conservation easements on a certified historic structure included in (a), (d) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

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

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (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 in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2015

JSA 5E1268 1.000

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,214,859.	2,214,859.	2,194,859.	2,130,252.	2,139,501.
b Contributions			20,000.	65,058.	
c Net investment earnings, gains, and losses					-9,249.
d Grants or scholarships					
e Other expenditures for facilities and programs				451.	
f Administrative expenses					
g End of year balance	2,214,859.	2,214,859.	2,214,859.	2,194,859.	2,130,252.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 100.0000 %
 - c Temporarily restricted endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	X
(ii) related organizations	3a(ii)	X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		932,629.	810,469.	122,160.
d Equipment		485,666.	285,437.	200,229.
e Other		537,148.	531,969.	5,179.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				327,568.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(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.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GIFT ANNUITY PAYABLE	2,675,421.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 38,997,351.

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 35,608,155.

Part XIII Supplemental Information.

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.

SEE PAGE 5

Part XIII Supplemental Information (continued)

PART V, LINE 4:

THE ORGANIZATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A STREAM OF RETURNS THAT WOULD BE UTILIZED TO FUND VARIOUS PROGRAMS WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS. ENDOWMENT ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED FUNDS THAT THE ORGANIZATION MUST HOLD IN PERPETUITY, AND AS DIRECTED BY THE DONORS. THE ENDOWMENT FUNDS ARE INVESTED IN VEHICLES SUCH AS MONEY MARKET FUNDS, MUTUAL FUNDS, BONDS AND EQUITY SECURITIES, AS WELL AS CERTIFICATES OF DEPOSIT.

PART X, LINE 2:

UNDER ASC 740-10 (FORMERLY FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") INTERPRETATION NO.48), "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES", AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL NOT BE SUSTAINED. AMNESTY INTERNATIONAL USA, INC. DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, THEY HAVE NOT RECOGNIZED ANY LIABILITY FOR UNCERTAIN TAX BENEFITS. THE ORGANIZATION HAS FILED INTERNAL REVENUE SERVICE FORM 990 TAX RETURNS, AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHEN IT IS REQUIRED. FOR THE YEAR ENDED DECEMBER 31, 2015, THERE WAS NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN THE FINANCIAL STATEMENTS. AS OF DECEMBER 31, 2015, THE YEARS STILL SUBJECT TO EXAMINATION BY A TAXING AUTHORITY ARE 2012 THROUGH 2014.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

AMNESTY INTERNATIONAL USA, INC.

Employer identification number

52-0851555

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EUROPE			GRANTMAKING		8,879,000.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					8,879,000.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					8,879,000.

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

Schedule F (Form 990) 2015

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	ANNUAL ASSESSMENT	8,600,000.	WIRE			
(2)			EUROPE/ICELAND/GREENLAND	REGRANT TO I.S.	279,000.	WIRE			
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. 2.

3 Enter total number of other organizations or entities.

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Part V Supplemental Information

Complete this part to 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 2:

ASSISTANCE TO ORGANIZATIONS: AMNESTY INTERNATIONAL LIMITED IS A NOT-FOR-PROFIT UNITED KINGDOM CORPORATION, WHICH PERFORMS RESEARCH AND OTHER FUNCTIONS IN SUPPORT OF ITS AFFILIATED ORGANIZATIONS WORLDWIDE. THE ORGANIZATION IS ONE OF MANY AFFILIATED NATIONAL ORGANIZATIONS, WHICH CONTRIBUTE FUNDS FOR THE SUPPORT OF THE PROGRAM ACTIVITIES OF AMNESTY INTERNATIONAL LIMITED THROUGH AN ANNUAL ASSESSMENT. FOR THE YEAR ENDED DECEMBER 31, 2015, THIS ASSESSMENT WAS \$8,879,000.

ASSISTANCE TO INDIVIDUALS: A COMMITTEE OF VOLUNTEER ADVISORS AND ORGANIZATION STAFF MEMBERS MEET YEARLY AND SELECT THE RECIPIENT OF AN ANNUAL LIFETIME ACHIEVEMENT AWARD FOR INDIVIDUALS WORKING IN THE HUMAN RIGHTS FIELD. THIS AWARD IS IN HONOR OF GINETTA SAGAN AND RECOGNIZES THE NEEDS OF WOMEN AND CHILDREN IN AREAS OF HUMAN RIGHTS EDUCATION AND THE ERADICATION OF TORTURE.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization

AMNESTY INTERNATIONAL USA, INC.

Employer identification number

52-0851555

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 AB DATA	DIRECT MAIL FUNDRAISING		X	10,205,738.	336,000.	9,869,738.
2 HARRIS MARKETING	TELE-MARKETING		X	28,554.	56,480.	-27,926.
3 SEA CHANGE STRATEGIES	ONLINE FUNDRAISING		X	1,278,892.	78,589.	1,200,303.
4 DONOR SERVICES GROUP	TELE-MARKETING		X	229,513.	236,581.	-7,068.
5						
6						
7						
8						
9						
10						
Total				11,742,697.	707,650.	11,035,047.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(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				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 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? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a 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 ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation 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).

PART I, LINE 2:

THE ORGANIZATION PAID AB DATA A TOTAL OF \$3,454,386 DURING THE TAX YEAR, WHICH INCLUDES \$336,000 IN FEES FOR PROFESSIONAL FUNDRAISING SERVICES. THE REMAINING AMOUNT OF \$3,118,386 WERE EXPENDITURES IN RELATION TO PRODUCTION COSTS, REPORTED ON FORM 990, PART IX, LINE 24A AS DIRECT COMMUNICATIONS.

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

AMNESTY INTERNATIONAL USA, INC.

Employer identification number

52-0851555

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____

3 Enter total number of other organizations listed in the line 1 table ▶ _____

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

Schedule I (Form 990) (2015)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 INDIVIDUALS IN NEED	30.	43,520.			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

A COMMITTEE COMPOSED OF VOLUNTEER MEMBERS, AUGMENTED BY INPUT FROM THE ORGANIZATION'S STAFF, RECEIVE AND REVIEW APPLICATIONS FOR SMALL GRANTS IN THE RANGE OF \$500 TO \$4,000 FOR WORK IN PROJECTS CENTERED ON HUMAN RIGHTS ISSUES. RECIPIENTS ARE SELECTED BASED UPON THE MERITS OF THEIR PROPOSALS AND THE QUALITY OF THEIR SUBMISSIONS. PART OF THE FUNDING FOR THESE GRANTS COMES FROM AN ALLOTMENT DESIGNATED AS THE HANNA GRUNWALD FUND, SIF, AND THE LADIS KRISTOFF FELLOWSHIP.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

AMNESTY INTERNATIONAL USA, INC.

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

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Employer identification number

52-0851555

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

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

- | | |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization?
 - b** Any related organization?
- If "Yes" to line 5a 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 compensation contingent on the net earnings of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8	X	
9	X	

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

Schedule J (Form 990) 2015

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

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

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MARGARET HUANG INTERIM EXECUTIVE DIRECTOR	(i)	202,897.	0.	0.	5,825.	30,728.	239,450.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 STEVEN HAWKINS (THRU 12) EXECUTIVE DIRECTOR	(i)	257,270.	0.	17,333.	8,245.	30,728.	313,576.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 YOMARA HERNANDEZ (THRU) CHIEF FINANCIAL OFFICER	(i)	142,659.	0.	0.	0.	9,044.	151,703.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 DANIEL JAMES MCGREGOR CHIEF DEVELOPMENT OFFICER	(i)	199,300.	0.	0.	4,090.	30,728.	234,118.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 MICHAEL P. O'REILLY D.E.D. OF MEMBER ADVOCACY	(i)	173,358.	0.	0.	5,250.	30,728.	209,336.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 RACHEL O'LEARY DEP. EXEC. DIR. OF MEMBERSHIP	(i)	174,916.	0.	0.	5,250.	10,087.	190,253.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 MARVIN BING NAT'L DIR., ART FOR AMNESTY	(i)	173,813.	0.	0.	3,063.	18,685.	195,561.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 CAMMIE CROFT (THRU 11/1) CHIEF DIGITAL COMM. OFFICER	(i)	159,654.	0.	0.	4,790.	23,053.	187,497.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 ADOTEI AKWEI MANAGING DIRECTOR, ADVOCACY	(i)	152,326.	0.	0.	4,600.	428.	157,354.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to 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 8:

STEVEN HAWKINS - EXECUTIVE DIRECTOR:

A) TERM OF EMPLOYMENT: FOUR YEARS - 9/25/2013 THROUGH 12/5/2015

B) COMPENSATION: \$250,000 PER YEAR SUBJECT TO UPWARD ADJUSTMENTS BASED ON THE SAME CRITERIA THAT AIUSA APPLIES IN ITS DISCRETION TO OTHER EXECUTIVE-LEVEL MANAGERS.

C) BENEFITS: THE SAME BENEFITS APPLICABLE TO OTHER EMPLOYEES OF AIUSA, EXCEPT FOR HIS VACATION ACCRUAL WHICH IS 4 WEEKS PER YEAR.

D) TERMINATION: BOARD WILL INFORM HIM 4 MONTHS BEFORE THE AGREEMENT END DATE IF HIS CONTRACT WILL BE RENEWED.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

AMNESTY INTERNATIONAL USA, INC.

Employer identification number

52-0851555

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	147.	901,472.	MARKET QUOTATION
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2015)

JSA

5E1298 1.000

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization

AMNESTY INTERNATIONAL USA, INC.

Employer identification number

52-0851555

FORM 990, PART III, LINE 4D:

1) POLICY, ADVOCACY, AND MEMBERSHIP MOBILIZATION - FIELD ACTIVISM, MEMBER ENGAGEMENT, AND EVENTS DRIVE HUMAN RIGHTS IMPACT BY PROVIDING PUBLIC VALUE, GROW THE MOVEMENT BY PROVIDING LEGITIMACY AND SUPPORT, AND DEVELOPS MEMBER LEADERS AND OPERATIONAL CAPACITY. WHILE THE EFFORTS OF THIS PROGRAM AREA ARE GUIDED BY THE PRIORITY CAMPAIGNS OF AIUSA, THE WORK OF THE DEPARTMENT ENCOMPASSES ALL OF THE HUMAN RIGHTS ISSUES ON WHICH AIUSA FOCUSES. THE POLICY, ADVOCACY, AND MEMBERSHIP MOBILIZATION PROGRAM DIVIDES ITS WORK INTO: 1) FIELD ACTIVISM, 2) MEMBER ENGAGEMENT, 3) EVENTS, 4) POLICY, 5) MEMBER ADVOCACY, 6) GOVERNMENT RELATIONS, AND 7) INTERNATIONAL COORDINATION.

THE FIELD ACTIVISM UNIT CULTIVATES RELATIONSHIPS ACROSS ISSUES AND BORDERS THROUGHOUT THE HUMAN RIGHTS MOVEMENT AND BRIDGES THE GAP BETWEEN LOCAL GRASSROOTS ACTIVISTS AND THE GLOBAL MOVEMENT. THE MEMBER ENGAGEMENT UNIT BUILDS ORGANIZING CAPACITY BY TRAINING CORE COMPETENCIES AND DEVELOPS MEMBER COMMUNICATION STRATEGIES TO CULTIVATE AN ONLINE TO OFFLINE ENGAGEMENT LADDER. THE EVENTS UNIT PLANS AND EXECUTES FIVE REGIONAL CONFERENCES, AIUSA'S ANNUAL GENERAL MEETING, AND THE HUMAN RIGHTS LEADERSHIP INSTITUTE TO EDUCATE, MOBILIZE, AND PROVIDE RESOURCES TO AIUSA MEMBERS AND ACTIVISTS. THE 2015 AGM IN BROOKLYN, NEW YORK WAS ONE OF THE BEST-ATTENDED ANNUAL GENERAL MEETINGS IN AIUSA'S HISTORY.

AIUSA STAFF AND MEMBERS ADVOCATE FOR HUMAN RIGHTS ISSUES AROUND THE WORLD

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TO U.S. GOVERNMENT OFFICIALS AND FOREIGN AMBASSADORS. ACTIVISTS PARTICIPATE IN LOBBYING AND DEMONSTRATIONS, WHILE STAFF AND VOLUNTEER EXPERTS TESTIFY BEFORE KEY STAKEHOLDERS TO ENSURE THAT THESE IMPORTANT ISSUES ARE BROUGHT TO LIGHT. MEMBERS AND ACTIVISTS DRIVE FORWARD AIUSA'S PROGRAMMATIC WORK AT BOTH THE GRASSROOTS AND HIGH-LEVEL THROUGH THE ACTIVITIES OF STUDENT ACTIVIST COORDINATORS, AREA COORDINATORS, STATE LEGISLATIVE COORDINATORS, THE NATIONAL YOUTH ACTION COMMITTEE, THE YOUNG PROFESSIONALS AMNESTY INTERNATIONAL NETWORKS, STATE DEATH PENALTY ABOLITION COORDINATORS, AND COUNTRY/THEMATIC SPECIALISTS (AMONG MANY OTHERS).

IN 2015 AIUSA WORKED WITH KEY OFFICIALS TO HELP ENSURE THE RELEASE OF PRISONER OF CONSCIENCE DR. TUN AUNG WHO HAD BEEN DETAINED IN MYANMAR SINCE 2012. THE ASIA ADVOCACY DIRECTOR MET WITH SENIOR STATE DEPARTMENT OFFICIALS, BRIEFED SENATE STAFF AHEAD OF THE ANNUAL SECURITY AND ECONOMIC DIALOGUE WITH CHINA, RAISED KEY AMNESTY CONCERNS WITH THE VISITING AFGHANI CHIEF EXECUTIVE, ABDULLAH ABDULLAH, AND TESTIFIED BEFORE CONGRESS'S TOM LANTOS HUMAN RIGHTS COMMISSION ON CAMBODIA AND LAOS. AIUSA STAFF ALSO GAVE A BRIEFING TO DEPUTY NATIONAL SECURITY ADVISOR BEN RHODES AHEAD OF HIS TRIP TO MYANMAR.

UPON PUBLICATION OF A STOP TORTURE REPORT ON UZBEKISTAN, AIUSA REPRESENTATIVES TESTIFIED BEFORE THE LANTOS HUMAN RIGHTS COMMISSION AND WERE INVITED TO MEETINGS WITH WHITE HOUSE, STATE DEPARTMENT, AND CONGRESSIONAL STAFF. AIUSA STAFF HELD CONGRESSIONAL MEETINGS ON THE

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DETERIORATING HUMAN RIGHTS SITUATION IN AZERBAIJAN AND BRIEFED U.S.
OFFICIALS ON MEDIA FREEDOM IN TURKEY.

AMNESTY'S RESEARCH EFFECTIVELY KEPT THE SPOTLIGHT ON HUMAN RIGHTS ABUSES
BY THE NIGERIAN MILITARY IN THE COUNTER INSURGENCY EFFORT AGAINST THE
ARMED GROUP BOKO HARAM DURING NIGERIA'S NEWLY INAUGURATED PRESIDENT
MUHAMADU BUHARI'S VISIT TO THE UNITED STATES. AMNESTY'S REPORT WAS CITED
AS A KEY FACTOR PREVENTING THE RESUMPTION OF SECURITY ASSISTANCE BY THE
UNITED STATES. AIUSA URGED PRESIDENT OBAMA TO PRESS FOR REFORMS, WHICH
LED TO THE RELEASE OF CERTAIN PRISONERS OF CONSCIENCE, BEFORE THE
PRESIDENT ARRIVED IN ADDIS ABABA, ETHIOPIA FOR THE START OF HIS 2015
AFRICAN VISIT.

AIUSA ADVOCACY OPPOSING THE U.S. ECONOMIC EMBARGO AGAINST CUBA GAINED
TRACTION WITH THE ANNOUNCEMENT OF U.S.-CUBA TALKS TO NORMALIZE RELATIONS.
ALL PRISONERS OF CONSCIENCE IN CUBA THAT RECEIVED THE FOCUS OF AMNESTY'S
EFFORTS WERE RELEASED IN 2015. AIUSA ADVOCACY CONTRIBUTED TO THE
SUSPENSION OF A PORTION OF U.S. FOREIGN ASSISTANCE TO MEXICO FOR THE
FIRST TIME. AIUSA REPRESENTATIVES MET WITH THE MEXICAN AMBASSADOR TO THE
U.S. TO DELIVER 24,219 ACTIONS FROM AIUSA MEMBERS REQUESTING AN OVERHAUL
OF FORENSIC EXAMINATION OF TORTURE SURVIVORS TO ALIGN WITH THE ISTANBUL
PROTOCOL AND DELIVERED 520 PENCILS MADE BY AIUSA MEMBERS IN SOLIDARITY
WITH DISAPPEARED MEXICAN STUDENTS. AIUSA ADVOCACY AND CAMPAIGNING BROUGHT
THE PLIGHT OF MORE THAN 130,000 STATELESS INDIVIDUALS IN THE DOMINICAN
REPUBLIC INTO THE PUBLIC SPOTLIGHT. AFTER YEARS OF INACTION, THE

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DOMINICAN REPUBLIC ANNOUNCED IN 2015 THAT 55,000 INDIVIDUALS WOULD BE ABLE TO REGAIN ACCESS TO THEIR IDENTITY DOCUMENTS AND NATIONALITY. AIUSA ADVOCACY AND CAMPAIGNING AROUND THE MY BODY, MY RIGHTS GLOBAL CAMPAIGN ON THE TOTAL ABORTION BAN IN EL SALVADOR, WHICH GARNERED 24,682 SIGNATURES AND OVER 25,000 ONLINE ACTIONS, HELPED FREE TWO WOMEN WHO HAD BEEN JAILED FOR MISCARRIAGES.

IN 2015, AIUSA CONVINCED 67 MEMBERS OF CONGRESS TO SIGN A BIPARTISAN LETTER TO THE NEW KING OF SAUDI ARABIA CALLING FOR HUMAN RIGHTS REFORMS AND AN END TO THE IMPRISONMENT OF PRISONERS OF CONSCIENCE; AND WORKED WITH 19 MEMBERS OF CONGRESS TO URGE THE U.S. SECRETARY OF STATE TO ADDRESS ISRAELI VIOLATIONS OF PALESTINIAN CHILDREN'S HUMAN RIGHTS IN ITS MILITARY DETENTION SYSTEM. AIUSA'S ADVOCACY DIRECTOR FOR THE MIDDLE EAST AND NORTH AFRICA PARTICIPATED IN A NINE-DAY MISSION TO ISRAEL AND THE OCCUPIED PALESTINIAN TERRITORIES IN OCTOBER 2015.

AIUSA BROADER MEMBERSHIP PARTICIPATED IN SPRING AND FALL LOBBY WEEKS, CALLING ON THEIR MEMBERS OF CONGRESS TO SUPPORT KEY LEGISLATIVE PRIORITIES. HUNDREDS OF ACTIVISTS FROM ACROSS THE COUNTRY SIGNED UP TO URGE THEIR ELECTED OFFICIALS TO SPONSOR THE INTERNATIONAL VIOLENCE AGAINST WOMEN ACT, CLOSE THE GUANTANAMO DETENTION FACILITY, HELP BRING TRANSPARENCY AND ACCOUNTABILITY TO POLICE DEPARTMENTS NATIONWIDE, REFORM THE USE OF SOLITARY CONFINEMENT IN U.S. PRISONS, AND TO SUPPORT HUMAN RIGHTS IN BAHRAIN. AIUSA STAFF AND LEGISLATIVE COORDINATORS LED VARIOUS TRAININGS AND ISSUE BRIEFINGS, INCLUDING AT THE ANNUAL GENERAL MEETING IN

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BROOKLYN AND THE REGIONAL CONFERENCES.

TOTAL EXPENSES: \$7,947,154.

FORM 990, PART VI, SECTION A, LINES 6 AND 7:

THE MEMBERS OF THE ORGANIZATION ELECT THE BOARD OF DIRECTORS. THE MEMBERS PROPOSE RESOLUTIONS AND ACTIONS AT A LOCAL AND REGIONAL LEVEL THAT ARE VOTED ON AT THE ANNUAL MEETING. BOARD DECISIONS ARE NOT VOTED ON BY MEMBERS.

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

FORM 990 WAS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCE DEPARTMENT. DRAFT FORM 990 WAS REVIEWED BY THE ORGANIZATION'S FINANCE DEPARTMENT AND THEN PROVIDED TO ALL BOARD MEMBERS VIA ELECTRONIC MAIL, WITH AN OPPORTUNITY FOR THEM TO COMMENT OR MAKE INQUIRY BEFORE IT WAS FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

IT IS A POLICY OF THE BOARD THAT UPON ELECTION AND ANNUALLY EACH MEMBER OF THE BOARD SIGNS A CONFLICT OF INTEREST FORM WHICH REQUIRES THEM TO DISCLOSE AND LIST CONFLICTS, IF ANY. THE FORMS ARE KEPT IN THE BOARD FILES BY THE STAFF MEMBER WHO IS THE BOARD LIAISON, AND REVIEWED BY THE CHAIRMAN.

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

COMPENSATION FOR THE EXECUTIVE DIRECTOR IS DETERMINED BY USING

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COMPARABILITY DATA, REVIEW AND APPROVAL BY THE BOARD. THE CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION IS DOCUMENTED IN THE BOARD OF DIRECTORS' MINUTES.

FORM 990, PART VI, SECTION B, LINE 15B:
COMPENSATION FOR OFFICERS AND KEY EMPLOYEES IS DETERMINED BY USING COMPARABILITY DATA, REVIEW AND APPROVAL BY THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS OWN WEBSITE AND UPON REQUEST.

FORM 990, PART VIII, LINE 6A:
GROSS RENTS OF \$620,319 REPRESENTS SUBLET RENTAL INCOME FROM NEW YORK, WASHINGTON DC, AND BOSTON OFFICES.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

AMNESTY INTERNATIONAL USA, INC. IS THE U.S. SECTION OF AMNESTY INTERNATIONAL LIMITED, A WORLDWIDE MOVEMENT OF PEOPLE WHO CAMPAIGN FOR INTERNATIONALLY RECOGNIZED HUMAN RIGHTS. THE ORGANIZATION'S MISSION IS TO ACT IN CONCERT WITH THE INTERNATIONAL HUMAN RIGHTS MOVEMENT, WITHIN THE CONTEXT OF ITS WORK TO PROMOTE ALL PROVISIONS IN THE UNIVERSAL DECLARATION OF HUMAN RIGHTS.

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ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

CAMPAIGNS, PROGRAMS, AND RESEARCH - AMNESTY INTERNATIONAL USA'S CAMPAIGNS, PROGRAMS, AND RESEARCH SERVICES COVER: 1) INDIVIDUALS AT RISK, 2) IDENTITY AND DISCRIMINATION, 3) DEATH PENALTY ABOLITION, 4) SECURITY WITH HUMAN RIGHTS, 5) POLICE ACCOUNTABILITY, 6) END GUN VIOLENCE, AND 7) MASS INCARCERATION. THIS GROUP WORKS IN COLLABORATION WITH OTHER AREAS OF THE ORGANIZATION.

AIUSA'S INDIVIDUALS AT RISK TEAM WORKS TO GENERATE PRESSURE ON LOCAL AND INTERNATIONAL GOVERNMENT OFFICIALS AND OTHER DECISION MAKERS THROUGH A STRATEGIC MIX OF RESEARCH, LOBBYING, MEDIA ATTENTION, COALITION BUILDING, AND GRASSROOTS ACTIVISM INCLUDING THE ANNUAL WRITE FOR RIGHTS CAMPAIGN, THE URGENT ACTION NETWORK, THE CASE COMMITMENT INITIATIVE, AND FOCUS CASE CAMPAIGNS. IN 2015 MEMBER PARTICIPATION GENERATED OVER ONE MILLION INDIVIDUAL ACTIONS ON CASES FROM AIUSA. 2015'S WRITE FOR RIGHTS BROKE RECORDS DOMESTICALLY AND GLOBALLY, WITH AIUSA GENERATING OVER 300,000 ACTIONS ON 12 FOCUS CASES. THE 2015 YEAR SAW THE RELEASE OF 144 PRISONERS OF CONSCIENCE WHO ARE PEOPLE JAILED FOR THE PEACEFUL EXPRESSION OF THEIR BELIEFS OR IDENTITY.

AIUSA'S ABOLISH THE DEATH PENALTY CAMPAIGN IS CONDUCTED IN THE USA ON A STATE-BY-STATE BASIS. IN 2015, THE NEBRASKA STATE LEGISLATURE PASSED A BILL TO ABOLISH THE DEATH PENALTY AND OVERTURNED THE GOVERNOR'S VETO, A VICTORY IN WHICH AMNESTY MEMBERS PLAYED A

Name of the organization AMNESTY INTERNATIONAL USA, INC.	Employer identification number 52-0851555
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ATTACHMENT 2 (CONT'D)

CRUCIAL ROLE. OTHER SIGNIFICANT VICTORIES INCLUDE THE VACATING OF REGGIE CLEMONS' DEATH SENTENCE AND STAYS OF EXECUTION BY PENNSYLVANIA GOVERNOR TOM WOLF FOR RODNEY REED AND RICHARD GLOSSIP.

AIUSA'S SECURITY WITH HUMAN RIGHTS PROGRAM WORKS TO END HUMAN RIGHTS ABUSES COMMITTED IN THE NAME OF NATIONAL SECURITY. SECURITY WITH HUMAN RIGHTS FOCUS AREAS INCLUDE 1) TORTURE AND GUANTANAMO, 2) U.S. DRONE AND OTHER AIR STRIKES, AND 3) SURVEILLANCE. AIUSA CAMPAIGNED ON THE CASES OF GUANTANAMO BAY FACILITY PRISONERS SHAKER AAMER AND AHMED ABDULAZIZ; THE TWO MEN WERE RELEASED IN 2015. IN 2015, CONGRESS VOTED TO STRENGTHEN THE BAN ON TORTURE AND ENSURE IT APPLIES TO THE CIA; AIUSA ACTIVISTS SENT MORE THAN 44,000 EMAILS TO SENATORS IN KEY STATES ON THIS ISSUE. AIUSA ALSO PARTNERED WITH THE AMERICAN CIVIL LIBERTIES UNION AND HUMAN RIGHTS WATCH TO DELIVER AN 110,000 SIGNATURE PETITION TO THE DEPARTMENT OF JUSTICE CALLING FOR AN INVESTIGATION OF TORTURE AUTHORIZED BY THE CIA. AIUSA REPRESENTATIVES MET WITH THE MEXICAN AMBASSADOR TO THE U.S. TO DELIVER 24,219 ACTIONS FROM AIUSA MEMBERS REQUESTING AN OVERHAUL OF FORENSIC EXAMINATION OF TORTURE SURVIVORS TO ALIGN WITH THE ISTANBUL PROTOCOL AND DELIVERED 520 PENCILS MADE BY AIUSA MEMBERS IN SOLIDARITY WITH DISAPPEARED MEXICAN STUDENTS.

AIUSA'S POLICE ACCOUNTABILITY CAMPAIGN SAW SIGNIFICANT PROGRESS IN 2015. IN A LANDMARK DECISION IN MAY 2015, SURVIVORS OF TORTURE BY

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ATTACHMENT 2 (CONT'D)

CHICAGO POLICE DURING THE 1970S, 1980S AND EARLY 1990S WERE AWARDED A REPARATIONS PACKAGE INCLUDING RESTITUTION, COMPENSATION AND REHABILITATION. LEGISLATION WAS ENCOURAGED ADDRESSING THE USE OF LETHAL FORCE BY POLICE OFFICERS IN MISSOURI. AIUSA FIELD STAFF AND LEGISLATIVE COORDINATORS CAMPAIGNED TO PRESSURE THE ST. LOUIS BOARD OF ALDERMAN TO CREATE A CIVILIAN OVERSIGHT BOARD; THE BILL WAS SIGNED BY THE MAYOR IN MAY 2015. AIUSA'S RESEARCH UNIT RELEASED A NEW REPORT IN JUNE 2015 ENTITLED "DEADLY FORCE: POLICE USE OF LETHAL FORCE IN THE UNITED STATES" WHICH HIGHLIGHTED A COUNTRY-WIDE LACK OF OVERSIGHT AND REPORTING FOR POLICE USE OF LETHAL FORCE. THE REPORT GAVE RECOMMENDATIONS FOR LOCAL, STATE, AND NATIONAL REGULATION.

AIUSA'S IDENTITY AND DISCRIMINATION UNIT IS DEDICATED TO ENDING HUMAN RIGHTS VIOLATIONS BASED ON IDENTIFYING FEATURES SUCH AS GENDER, ORIENTATION, RACE, RELIGION, AND NATIONALITY. THE PRIORITY IN 2015 WAS THE CONTINUATION OF THE MY BODY/MY RIGHTS CAMPAIGN TO HELP ENSURE THAT EVERYONE HAS ACCESS TO THEIR SEXUAL AND REPRODUCTIVE RIGHTS. REPRESENTATIVES FROM AIUSA'S IDENTITY AND DISCRIMINATION UNIT MET WITH PARAGUAYAN EMBASSY STAFF TO DELIVER OVER 66,000 SIGNATURES REGARDING THE CASE OF A 10-YEAR-OLD RAPE SURVIVOR WHO WAS DENIED AN ABORTION. DURING 2015'S WRITE FOR RIGHTS CAMPAIGN, AIUSA ACTIVISTS WROTE 11,617 LETTERS TO THE EL SALVADORAN GOVERNMENT AND TOOK 25,465 ONLINE ACTIONS TO URGE THE RELEASE OF A WOMAN IMPRISONED ON ABORTION-RELATED CHARGES AFTER

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ATTACHMENT 2 (CONT'D)

SUFFERING A MISCARRIAGE-TEODORA DEL CARMEN VASQUEZ-AND TO ADVOCATE FOR A CHANGE IN THE COUNTRY'S ABORTION LAWS.

IN 2015 AIUSA'S RESEARCH UNIT RELEASED THE WIDELY READ REPORT ON LETHAL FORCE BY POLICE "DEADLY FORCE: POLICE USE OF LETHAL FORCE IN THE UNITED STATES". THIS WORK HAS LED TO LEGISLATION ON LETHAL FORCE IN MISSOURI AND PENDING LEGISLATION IN MARYLAND, AS WELL AS DRAFT FEDERAL LEGISLATION. THE UNIT DEVELOPED CASE STUDIES ON POLICE USE OF DEADLY FORCE TO BE USED IN STATE-BASED CAMPAIGNING. EARLIER RESEARCH ON THE SURVIVORS OF CHICAGO POLICE TORTURE ACHIEVED RESULTS AS THE CHICAGO CITY COUNCIL PASSED AN ORDINANCE TO PROVIDE REPARATIONS TO THE MEN AND WOMEN OF COLOR WHO WERE SYSTEMATICALLY TORTURED BY OFFICERS FROM THE CHICAGO POLICE DEPARTMENT DECADES PRIOR. AIUSA RESEARCHERS ALSO RELEASED A TOOLKIT DEMONSTRATING THE DRIVERS OF MASS INCARCERATION IN THE UNITED STATES THROUGH INDIVIDUAL CASE STUDIES. ONE CASE STUDY HIGHLIGHTED THE EXPANSION OF IMMIGRATION DETENTION IN THE U.S. AND FEATURED AN ACTION ON TWO GUATEMALAN REFUGEES. A SECOND CASE STUDY ILLUSTRATED THE ISSUE OF CHARGING JUVENILES AS ADULTS IN CRIMINAL CASES IN NEW YORK STATE.

ATTACHMENT 3

FORM 990, PART III - PROGRAM SERVICE, LINE 4C

DIGITAL AND STRATEGIC COMMUNICATIONS AND CREATIVE PARTNERSHIPS PROGRAM - THE PURPOSE OF THIS PROGRAM IS TO SHAPE PUBLIC OPINION

Name of the organization AMNESTY INTERNATIONAL USA, INC.	Employer identification number 52-0851555
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 ATTACHMENT 3 (CONT'D)

BY TELLING AIUSA'S STORY, DEVELOP RELATIONSHIPS, AND LEVERAGE THOSE RELATIONSHIPS TO CREATE MEASURABLE HUMAN RIGHTS IMPACT. THE DIGITAL AND STRATEGIC COMMUNICATIONS PROGRAM AREA WORKS CLOSELY WITH AIUSA CAMPAIGNS TO IDENTIFY KEY MOMENTS FOR PUBLIC ENGAGEMENT. THE STRATEGIC COMMUNICATIONS AND DIGITAL INITIATIVES PROGRAM CHANNELS ITS WORK INTO 1) MEDIA RELATIONS, 2) ONLINE EDITORIAL CAMPAIGNS, AND 3) ONLINE GROWTH AND CULTIVATION. EACH UNIT IS RESPONSIBLE FOR MESSAGE DEVELOPMENT AND DISTRIBUTION THROUGH ITS RESPECTIVE CHANNELS. THE MEDIA RELATIONS UNIT IS RESPONSIBLE FOR PRESS RELEASES, PRESS CONFERENCES, EDITORIAL BOARD OUTREACH, OP-ED SUBMISSIONS, AND TARGETED MEDIA PITCHES. THE ONLINE EDITORIAL CAMPAIGNS UNIT MANAGES ONLINE ASSETS SUCH AS MOBILE APPLICATIONS, SOCIAL MEDIA PAGES, AND CREATION OF VIDEO, INFOGRAPHICS, AND OTHER SHAREABLE CONTENT. THE ONLINE GROWTH & CULTIVATION UNIT SENDS ONLINE ADVOCACY, ONLINE FUNDRAISING, AND LIST-BUILDING MESSAGES TO AIUSA ACTIVISTS, SUPPORTERS, AND MEMBERS. OVER 350,000 INDIVIDUALS TOOK ACTION ONLINE IN 2015. THE MEDIA RELATIONS UNIT IN PARTICULAR HELPED TO SHAPE THE NARRATIVE AND PUBLIC PERCEPTION OF AMNESTY'S PROPOSED GLOBAL POLICY TO PROTECT THE RIGHTS OF SEX WORKERS IN 2015. THE ISSUES WHICH RECEIVED THE HIGHEST MEDIA COVERAGE IN 2015 WERE BOKO HARAM, RAIF BADAWI, CHICAGO TORTURE, CIA TORTURE, DEATH SENTENCES AND EXECUTIONS REPORT, NSA SURVEILLANCE, AND ALBERT WOODFOX. THE ONLINE EDITORIAL CAMPAIGNS UNIT LAUNCHED AN AIUSA CHANNEL ON SPOTIFY, CO-HOSTED A LIVE TWITTER CHAT TO PUSH THE PASSAGE OF INTERNATIONAL VIOLENCE AGAINST WOMEN ACT, PRODUCED THE LIVE-STREAM

Name of the organization AMNESTY INTERNATIONAL USA, INC.	Employer identification number 52-0851555
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ATTACHMENT 3 (CONT'D)

OF AIUSA'S ANNUAL GENERAL MEETING IN PARTNERSHIP WITH THE EVENTS TEAM, SUCCESSFULLY SUPPORTED THE GLOBAL LAUNCH OF THE #UNFOLLOWME CAMPAIGN ON MASS SURVEILLANCE, AND PRODUCED VARIOUS MULTIMEDIA ASSETS. IN 2015 AIUSA SURPASSED ONE MILLION FOLLOWERS ON TWITTER. AIUSA SOCIAL MEDIA EDUCATION AND ACTIONS AROUND THE GLOBAL REFUGEE CRISIS HAD HIGH LEVELS OF ENGAGEMENT; POSTS WERE SHARED WIDELY ACROSS AIUSA'S EXISTING AUDIENCE AND DREW IN NEW AUDIENCE MEMBERS TO AIUSA'S PLATFORM.

THE CREATIVE PARTNERSHIPS PROGRAM SAW IN 2015 THE RELAUNCH OF ART FOR AMNESTY IN THE UNITED STATES. ART FOR AMNESTY ENGAGED ARTISTS THROUGH A STRATEGIC COMBINATION OF CELEBRITY PARTNERSHIPS AND ARTS-FOCUSED EVENTS. CREATIVE PARTNERSHIPS SEEKS TO MAXIMIZE HUMAN RIGHTS IMPACT THROUGH AFFILIATIONS IN THE ARTS COMMUNITY TO 1) INCREASE BRAND VISIBILITY AND CREDIBILITY WITHIN MEDIA, 2) GENERATE FRESH CULTURAL CAPITAL AND RELEVANCE, 3) IDENTIFY NEW OPPORTUNITIES AND RELATIONSHIPS, 4) BUILD GROWTH AND DIVERSITY, AND 5) INCREASE MEMBERSHIP AND ACTIVISTS. IN 2015 CREATIVE PARTNERSHIPS PUT ON MANIFEST JUSTICE IN LOS ANGELES, CALIFORNIA, A TWO-WEEK CONVENING ATTENDED BY MORE THAN 7,500 INDIVIDUALS INCLUDING A LONG LIST OF ARTISTS, TASTEMAKERS, AND PUBLIC FIGURES. THEY WORKED IN COLLABORATION WITH THE INDIVIDUALS AT RISK TEAM AND ARTIST BRANDAN ODUMS TO PRODUCE A 25-FOOT MURAL OF ALBERT WOODFOX, GENERATING STORIES ON THE REGIONALLY SIGNIFICANT NOLA.COM AND IN SAN FRANCISCO BAY VIEW. ART FOR AMNESTY SECURED A 2015 ROLE FOR AIUSA WITH SXSW SOUTH BY SOUTHWEST, A SET OF FILM, INTERACTIVE,

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ATTACHMENT 3 (CONT'D)

AND MUSIC FESTIVALS IN AUSTIN, TEXAS ATTENDED BY NEARLY 100,000 INDIVIDUALS EACH YEAR. CREATIVE PARTNERSHIPS ALSO SECURED A HIGH-PROFILE PARTNERSHIP FOR AIUSA WITH MTV'S REBEL MUSIC SERIES, FEATURING ARTISTS WHO ADVANCE HUMAN RIGHTS THROUGH THEIR MUSIC IN COUNTRIES AROUND THE WORLD. ART FOR AMNESTY ALSO WORKED WITH THE INDIVIDUALS AT RISK AND EVENTS TEAMS TO PUT ON ART FOR RIGHTS IN NEW ORLEANS, LOUISIANA AN EVENT FOCUSED ON AIUSA'S CORE WRITE FOR RIGHTS INITIATIVE.

ATTACHMENT 4FORM 990, PART VI, LINE 17 - STATES

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

ATTACHMENT 5990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
AB DATA 600 A.B. DATA DRIVE MILWAUKEE, WI 53217	MAIL, PRINT & PRODU.	3,454,386.
AB DATA CLIENT TRUST 600 A.B. DATA DRIVE MILWAUKEE, WI 53217	POSTAGE-MAILINGS	1,937,705.
ROI SOLUTIONS, INC. 1 ALEWIFE CENTER, #220 CAMBRIDGE, MA 02140	DATABASE HOSTING	318,273.

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ATTACHMENT 5 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
SOZE PRODUCTIONS 159 CARLTON AVENUE, APT #4B BROOKLYN, NY 11205	EVENT MANAGEMENT	282,873.
I-TEAM TECHNOLOGY ASSOCIATES, LLC 147 W. 26TH STREET NEW YORK, NY 10001	OUTSOURCE TECHNOLOGY	254,108.

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service (99)

Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Attachment Sequence No. 179

Name(s) shown on return

Identifying number

AMNESTY INTERNATIONAL USA, INC.

52-0851555

Business or activity to which this form relates

GENERAL DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 main rows for general depreciation calculations and 13 rows for detailed property information including description, cost, and elected cost.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

Table with 3 rows for special depreciation allowance, section 168(f)(1) election, and other depreciation.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

Table with 2 rows for MACRS deductions for assets placed in service before 2015 and general asset accounts.

Section B - Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

Table with 7 columns: Classification of property, Month and year placed in service, Basis for depreciation, Recovery period, Convention, Method, and Depreciation deduction.

Section C - Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

Table with 7 columns: Class life, Month and year placed in service, Basis for depreciation, Recovery period, Convention, Method, and Depreciation deduction.

Part IV Summary (See instructions.)

Table with 3 rows for summary calculations: listed property amount, total depreciation, and section 263A costs.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes rows 25-29.

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table with 6 columns: (a) Vehicle 1, (b) Vehicle 2, (c) Vehicle 3, (d) Vehicle 4, (e) Vehicle 5, (f) Vehicle 6. Includes rows 30-36.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table with 2 columns: Yes, No. Includes rows 37-41.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44.

