Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

А Г	or the	e 2017	calendar year, or tax year beginning	, 2017,	, and ending		, 20
B c	heck if a	pplicable:	C Name of organization	OF THE HOLD THE		D Employer ident	
	Addre		AMNESTY INTERNATIONAL	OF THE USA, INC.		52-0851	555
	chang	ge	Doing business as Number and street (or P.O. box if mail is	ant delivered to atreat address)	Doom/ouito	E Telephone num	hor
	+	change	· ·	,	Room/suite	· .	
	→	return return/	5 PENN PLAZA, 16TH FLO			(212) 807	-8400
	termi	nated	City or town, state or province, country, a	nd ZIP or foreign postal code			
	Amen	n	NEW YORK, NY 10001			G Gross receipts	
	_ Applie	cation ing	F Name and address of principal officer:	MARGARET HUANG		H(a) Is this a group subordinates?	return for Yes X No
			5 PENN PLAZA 16TH FLOO	OR NEW YORK, NY 10001		H(b) Are all subordina	ates included? Yes No
<u> </u>	Tax-ex	empt st	atus: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attac	ch a list. (see instructions)
J	Websi	ite: 🕨	WWW.AMNESTYUSA.ORG			H(c) Group exempti	ion number > 9240
K	Form	of organ	nization: X Corporation Trust	Association Other >	L Year of forma	tion: 1966 M St	tate of legal domicile: NY
Pä	art I		ımmary				
	1	Briefly	y describe the organization's mission o	most significant activities: TO AC'	T IN CONCERT	WITH THE	INTERNATIONAL
e			AN RIGHTS MOVEMENT, WITH				
an		IN	WHICH EVERY PERSON ENJOY	S ALL OF THE HUMAN RI	GHTS.		
err	2	Check	this box if the organization d	scontinued its operations or dispose	ed of more than 25%	of its net assets.	
Governance	3	Numb	per of voting members of the governing	body (Part VI, line 1a)			3 16.
≪	4		per of independent voting members of t				4 16.
Activities &	5		number of individuals employed in cale				5 1,580.
Ξ	6		number of volunteers (estimate if necess				6 8,850.
Act	_		unrelated business revenue from Part V	,,, , , , , , , , , , , , , , , , , ,			7a 0.
			nrelated business taxable income from				7b 0.
		ivet ui	inclated business taxable income from	01111 330-1, III16 34		Prior Year	Current Year
	0	Contri	ibutions and grants (Part VIII line 1h)			38,723,715	
ne	8		ibutions and grants (Part VIII, line 1h)			64,009	
Revenue	9		am service revenue (Part VIII, line 2g)			370,984	
Re	10		tment income (Part VIII, column (A), line			216,255	
	11		revenue (Part VIII, column (A), lines 5,			39,374,963	
	12		revenue - add lines 8 through 11 (must	•			
	13		s and similar amounts paid (Part IX, colu			10,029,952	
	14		its paid to or for members (Part IX, colu			0.	
es	15		es, other compensation, employee bene			9,628,554	
Expenses	16 a	Profes	ssional fundraising fees (Part IX, column fundraising expenses (Part IX, column (I	(A), line 11e)		815,780	804,810.
×	b		• , ,				
	17		expenses (Part IX, column (A), lines 11			17,196,271	
	18		expenses. Add lines 13-17 (must equal			37,670,557	
	19	Rever	nue less expenses. Subtract line 18 from	line 12		1,704,406	2,213,839.
Net Assets or Fund Balances					Begir	nning of Current Ye	
set	20	Total a	assets (Part X, line 16)			27,180,560	29,106,506.
AB d B	21	Total I	liabilities (Part X, line 26)			5,758,453	4,427,732.
훒	22	Net as	ssets or fund balances. Subtract line 21	from line 20		21,422,107	24,678,774.
Pa	rt II	Sig	gnature Block				
Und	der pei	nalties c	of perjury, I declare that I have examined the	s return, including accompanying sched	ules and statements,	and to the best of r	my knowledge and belief, it is
true	e, corre	ect, and	complete. Declaration of preparer (other than	officer) is based on all information of whi	ich preparer has any k	nowleage.	
Sig			Signature of officer			Date	
He	e		MICHAEL GREENBERG	CFO			
			Type or print name and title				
		Print/	Type preparer's name	Preparer's signature	Date	Check i	f PTIN
Paic		SCO	TT THOMPSETT	Seth Stampett	6/14/201		
	oarer		name ▶GRANT THORNTON LL		1		
Use	Only		s address >757 THIRD AVENUE, 4TH FLO	Firm's EIN ▶ 36-6055558 Phone no. 212-599-0100			
May	/ the		iscuss this return with the preparer		<u> </u>		7.7
·v·u	,		Peduction Act Notice see the separat		<u> </u>		X Yes No

Form **990** (2017)

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic 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.

OMB No. 1545-1709

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

	6-Month Extension of Time. Only subr		· · · ·					
	ons required to file an income tax return oth		, -	0-C filers), partnerships,	RE	MICs, and tru	usts	
nust use Fo	orm 7004 to request an extension of time to	file income	tax returns.					
	In the second second			Enter filer's identifyin			uctions	
Гуре or	Name of exempt organization or other filer, see	instructions.		Employer identification nu	ımbe	r (EIN) or		
orint	AMNIECEN TATERDALATIONAL OF THE	TICA TAT	7	E2 00E1EE				
ile by the	AMNESTY INTERNATIONAL OF THE			52-085155				
lue date for	Number, street, and room or suite no. If a P.O. b	oox, see instru	ctions.	Social security number (S	SN)			
ling your eturn. See	5 PENN PLAZA, 16TH FLOOR	or a faraign ad	draga aga instructions					
nstructions.	City, town or post office, state, and ZIP code. For NEW YORK, NY 10001							
	NEW TORK, NI 10001						0 1	
Inter the Re	eturn Code for the return that this application	n is for (file	a separate application for	or each return)		L	0 1	
Application		Return	Application			Re	turn	
s For		Code	Is For				ode	
	r Form 990-EZ	01	Form 990-T (corporat	tion)			07	
orm 990-B		02	Form 1041-A				08	
orm 4720		03	Form 4720 (other tha	ın individual)			09	
orm 990-P	,	04	Form 5227	,			10	
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069						1	11	
Form 990-T (trust other than above) 06 Form 8870						1	12	
If the orgoing of the whole	e No. ► 212 633-4233 anization does not have an office or place of or a Group Return, enter the organization's for a group, check this box e names and EINs of all members the exten	f business ir our digit Gro If it is for pa	oup Exemption Number	(GEN) 9240			•	
	est an automatic 6-month extension of time of		11/15 20	18 to file the exempt	orc	nanization re	turn	
	organization named above. The extension is			, to me the exempt	. 01 &	jarnzation ro	tuiii	
101 1110	organization named above. The extension to	o for the org	anization o rotam for.					
\triangleright X	calendar year 20 17_ or							
	tax year beginning	. 20	. and ending		20			
· —	3		,		-	. – –		
	ax year entered in line 1 is for less than 12 i	months, ched	ck reason: Initial r	eturn Final returi	n			
3a If this	application is for Forms 990-BL, 990-PF,	990-T, 4720	o, or 6069, enter the	tentative tax, less any				
nonrefundable credits. See instructions.								
b If this	application is for Forms 990-PF, 990-7	Г, 4720, о	r 6069, enter any re	efundable credits and				
estima	ted tax payments made. Include any prior ye	ear overpayn	nent allowed as a credit	t.	3b	\$	0.	
c Balanc	e due. Subtract line 3b from line 3a. Include	e your paym	ent with this form, if re	quired, by using EFTPS				
(Electr	onic Federal Tax Payment System). See instr	uctions.			3с	\$	0.	
Caution. If yo	u are going to make an electronic funds withdraw	al (direct deb	it) with this Form 8868, se	ee Form 8453-EO and Form	1 88°	79-EO for pay	ment	
nstructions.								
or Privacy	Act and Paperwork Reduction Act Notice, see ins	tructions.			Forr	n 8868 (Rev.	1-2017)	

E-FILED COPY

Form 990 (2017) Page 2 Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: 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? 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?..... 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 \$ 10,526,821. including grants of \$ 10,526,821.) (Revenue \$ INTERNATIONAL PROGRAM -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 HUMAN RIGHTS. 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. **4b** (Code:) (Expenses \$ 8,923,269. including grants of \$ ATTACHMENT 4c (Code:) (Expenses \$ 6,047,518. including grants of \$ ATTACHMENT 3 ATTACHMENT 4 **4d** Other program services (Describe in Schedule O.) (Expenses \$ 4,321,331. including grants of \$ 56,742.) (Revenue \$

JSA 7E1020 1.000

7256MC 700J

4e Total program service expenses ▶

29,818,939.

Form 990 (2017) Page **3**

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			37
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		3.5	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		Х	
L	complete Schedule D, Part VI	11a		
D	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	446		Х
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>	11c		Х
٦	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		- 21
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>			
u	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If</i>			
_	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	_	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X

Form **990** (2017)

Form 990 (2017) Page **4**

Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		37	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		37	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated		Х	
	employees? If "Yes," complete Schedule J	23	Λ	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24-		Х
	through 24d and complete Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
الم	to defease any tax-exempt bonds?	24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
25 a		25a		Х
h	transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	ZJa		
b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	200		
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i>			
-	Schedule L. Part IV.	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	$\textbf{Section 501(c)(3) organizations.} \ \ \textbf{Did the organization make any transfers to an exempt non-charitable}$			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	_	7.7	
	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	

Form 990 (2017) Page 5

Part V Statements Regarding Other IRS Filings and Tax Compliance Yes Nο 50 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0. **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. <u>1b</u> c Did the organization comply with backup withholding rules for reportable payments to vendors and X 1c reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. . 2a Χ 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X **b** If "Yes," enter the name of the foreign country: ▶ _ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts Χ **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?...... Χ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Χ 6a organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Χ 7a **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Χ 7с X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Χ 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.. Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 Sponsoring organizations maintaining donor advised funds. 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?..... Section 501(c)(7) organizations. Enter: 10 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b Section 501(c)(12) organizations. Enter: b Gross income from other sources (Do not net amounts due or paid to other sources 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which

JSA 7E1040 1.000

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Х

Page 6

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	•					
	Check if Schedule O contains a response or note to any line in this Part VI				X		
Sect	ion A. Governing Body and Management						
				Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 16					
	If there are material differences in voting rights among members of the governing body, or						
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b 16					
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	•			Х		
	any other officer, director, trustee, or key employee?		2				
3 Did the organization delegate control over management duties customarily performed by or under the direct							
4	supervision of officers, directors, or trustees, or key employees to a management company or other		4		X		
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was f Did the organization become aware during the year of a significant diversion of the organization's		5		X		
6	Did the organization become aware during the year of a significant diversion of the organizations.		6	Х			
7a	Did the organization have members of stockholders, or other persons who had the power to e						
	one or more members of the governing body?		7a	Х			
b	Are any governance decisions of the organization reserved to (or subject to approval						
	stockholders, or persons other than the governing body?		7b		X		
8	Did the organization contemporaneously document the meetings held or written actions und	ertaken during					
	the year by the following:						
а	The governing body?		8a	X			
b	Each committee with authority to act on behalf of the governing body?		8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot		9		Х		
Secti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O on B. Policies (This Section B requests information about policies not required by the Inte		_	<u> </u>	71		
OCCL	on b. I oncies (This occuon b requests information about policies not required by the thic	omai revenue	Oode	Yes	No		
102	Did the organization have local chapters, branches, or affiliates?		10a	Х			
	If "Yes," did the organization have written policies and procedures governing the activities of						
~	affiliates, and branches to ensure their operations are consistent with the organization's exempt p	-	10b	Х			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before f	-	11a	Х			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	3					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests	that could give					
	rise to conflicts?		12b	Х			
С	Did the organization regularly and consistently monitor and enforce compliance with the p			77			
	describe in Schedule O how this was done		12c	X			
13	Did the organization have a written whistleblower policy?		13	X	-		
14 15	Did the organization have a written document retention and destruction policy?		14				
15	Did the process for determining compensation of the following persons include a review are independent persons, comparability data, and contemporaneous substantiation of the deliberation						
а	The organization's CEO, Executive Director, or top management official		15a	Х			
b	Other officers or key employees of the organization		15b	Х			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arrangement					
	with a taxable entity during the year?		16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization						
	participation in joint venture arrangements under applicable federal tax law, and take steps to	safeguard the	40.				
Scati	organization's exempt status with respect to such arrangements?		16b		<u> </u>		
	On C. Disclosure	<u> </u>					
17	List the states with which a copy of this Form 990 is required to be filed ATTACHMENT !	7 000 T (0+!	E04/	-\/2\-	لانامه		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Other (explain in Sci.)	•	501(0	<i>း</i>)(ဒ)S	oniy)		
19	Describe in Schedule O whether (and if so, how) the organization made its governing document	ts, conflict of int	erest	policy	, and		

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 NEW YORK, NY 10001 212-633-4233 JSA 7E1042 1.000

financial statements available to the public during the tax year.

20

7256MC 700J V 17-5.2F 0195515-00003 PAGE 6

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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							(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	1 1	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)ANIKET SHAH	10.00									
BOARD CHAIR	0.	Х		Х				0.	0.	0.
(2)BECKY FARRAR	10.00									
VICE CHAIR	0.	Х		Х				0.	0.	0.
(3)ANN BURROUGHS	10.00									
TREASURER	0.	Х		Х				0.	0.	0.
(4)S. ILGU OZLER	10.00									
SECRETARY	0.	Х		Х				0.	0.	0.
(5)ADRIANA SANFORD	2.00									
BOARD MEMBER	0.	X						0.	0.	0.
(6)ALI ARAB	2.00									
BOARD MEMBER	0.	X						0.	0.	0.
(7)ANGIE HOUGAS	2.00									
BOARD MEMBER	0.	X						0.	0.	0.
(8)DAVID STAMPS	2.00									
BOARD MEMBER (THROUGH 9/17)	0.	Х						0.	0.	0.
(9)DIANA JONES WILSON	2.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(10)DONALD BIERER	2.00									
BOARD MEMBER	0.	X						0.	0.	0.
(11)ELIZABETH JENNINGS	2.00									
BOARD MEMBER	0.	X						0.	0.	0.
(12)GOVIND ACHARYA	2.00									_
BOARD MEMBER	0.	X						0.	0.	0.
(13)HADAR HARRIS	2.00									
BOARD MEMBER	0.	X						0.	0.	0.
(14)JAN KNIPPERS BLACK	2.00								_	
BOARD MEMBER (THROUGH 9/17)	0.	X						0.	0.	0.

JSA 7E1041 1.000

Form **990** (2017)

7256MC 700J V 17-5.2F 0195515-00003 PAGE 7 Form 990 (2017)

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)	box,	unle	Pos heck ss pe	erson	e that tor/trust Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	com fro orga	(F) timated nount of other pensation om the anization d related anizations	ı
15) JANET E. LORD	2.00											
BOARD MEMBER	0.	X						0.	0.			0.
16) MATTHEW KENNIS BOARD MEMBER (THROUGH 9/17)	2.00	Х						0.	0.			0.
17) PRATAP CHATTERJEE	2.00											
BOARD MEMBER (THROUGH 9/17)	0.	Х						0.	0.			0.
18) RANA ABDELHAMID	2.00											
BOARD MEMBER	0.	Х						0.	0.			0.
19) REZA FAKHARI	2.00											
BOARD MEMBER	0.	Х						0.	0.			0.
20) TERRY KAY ROCKEFELLER	2.00											
MEMBER AT LARGE	0.	Х						0.	0.			0.
21) DANIEL MCGREGOR	35.00											
CHIEF DEVELOPMENT OFFICER	0.			Х				204,402.	0.		34,5	41.
22) MARGARET HUANG	35.00											
EXECUTIVE DIRECTOR	0.			Х				249,227.	0.		35,8	37.
23) MICHAEL GREENBERG	35.00											
CHIEF FINANCIAL OFFICER	0.			Х				207,329.	0.		16,58	88.
24) ANNISE VALDEZ-GODEK	35.00											
NAT'L DIR., HUMAN RESOURCES	0.					Х		160,869.	0.		32,4	55.
25) BRUCE TEMKIN	35.00											
NATIONAL DIRECTOR, MAJOR GIFTS	0.					Х		170,207.	0.		24,5	06.
1b Sub-total	•							0.	0.			0.
c Total from continuation sheets to Part VII, S	ection A						>	1,541,708.	0.	2	05,73	33.
d Total (add lines 1b and 1c)							>	1,541,708.	0.	2	05,73	33.
Total number of individuals (including but not reportable compensation from the organization)		hose 24		ed a	bov	e) who	o re	eceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former offic	er, directo	or. or	trı	ıste	e.	kev e	emn	lovee, or highes	t compensated			
employee on line 1a? If "Yes," complete Schedu										3		Х
4 For any individual listed on line 1a, is the												
organization and related organizations gre											37	

for services rendered to the organization? *If "Yes," complete Schedule J for such person*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.

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 6		

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 ▶ 25

Form **990** (2017)

JSA 7E1055 1.000

Part VII Section A. Officers, Directors, Tro	istops Ko	En	nlo	W04	06	and L	-lia	hest Component	ed Employe	000 (00	ntinuo		Page 8
Section A. Officers, Directors, 176 (A)	(B)	y ⊏n	ibio		es, C)	and F	ug	(D)	ea Employe (E)	es (co		a) (F)	
Name and title	Average hours per week (list any hours for	box,	unles	Pos heck ss pe	ition more	e than o is both or/trust	an	Reportable compensation from the	Reportable compensation from related organizations	from	Est am	imated ount of other ensation	f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-N		fro orga and	m the nizatio related nization	n d
26) ERIC FERRERO (THRU 11/2017) DEP. ED, PUBLIC AFFAIRS	35.00					Х		199,130.		0.		13,4	27.
27) MICHAEL P. O'REILLY CHIEF STRATEGY & GOV. OFF.	35.00					Х		177,617.		0.		33,6	516.
28) PARTICIA HART ND, DIR. RESPONSE & DEV. OPS.	35.00					Х		172,927.		0.		14,7	
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A						* * *						
Total number of individuals (including but not reportable compensation from the organization)		hose 24		d al	bov	e) who	o re	eceived more than	\$100,000 of				
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched											3	Yes	No X
4 For any individual listed on line 1a, is the organization and related organizations graindividual	eater than	\$15	50,0	00?	. If	"Yes	5, "	complete Schedu	ile J for su	ıch	4	X	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	sati	on 1	fron	n any	un	related organization	on or individ	ual	5		Х
Complete this table for your five highest compensation from the organization. Report of year.													
(A)	draga							(B)			(C)	n4! s :-	

(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 ►

Form **990** (2017)

Page 9

Part VIII Statement of Revenue

		Check if Schedule O contains a resp	onse or note to ar	ny line in this Part V	<u>III</u>		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Revenue and Other Similar Amounts	1a b c d e f g h 2a b c d e	Federated campaigns	39,538,843. 1,090,430. Business Code	39,538,843.	33,340.		
Prog	f g	All other program service revenue Total. Add lines 2a-2f		33,340.			
	3 4 5 6a b	Investment income (including divided and other similar amounts)	ends, interest, nd proceeds (ii) Personal	439,702. 0. 94,116.			94,116
	c d 7a b	Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses (i) Securities 16,766,294	(ii) Other	0.			
er Revenue	c d 8a	Gain or (loss)	a	1,029,705.			1,029,705
Other		Less: direct expenses		0.			
	9a	Gross income from gaming activities. See Part IV, line 19		0.1			
	b c 10a	Less: direct expenses Net income or (loss) from gaming activitie Gross sales of inventory, less returns and allowances	s >	0.			
		Less: cost of goods sold Net income or (loss) from sales of inventory	b 10,852.	90,046.			90,046
		Miscellaneous Revenue	Business Code				
	11a b c	MISCELLANEOUS		8,332.			8,332
	d	All other revenue					
	e 12	Total. Add lines 11a-11d		8,332. 41,234,084.	33,340.		1,661,901

AMNESTY INTERNATIONAL OF THE USA, INC.

JSA 7E1051 1.000

Form **990** (2017)

7256MC 700J V 17-5.2F 0195515-00003 PAGE 10

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

Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising				
			expenses	general expenses	expenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	153,946.	153,946.						
2	Grants and other assistance to domestic individuals. See Part IV, line 22	76,842.	76,842.						
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	10,526,821.	10,526,821.						
4	Benefits paid to or for members	0.							
5	Compensation of current officers, directors, trustees, and key employees	747,924.	285,064.	223,917.	238,943.				
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.			<u> </u>				
7	Other salaries and wages	8,056,828.	5,718,423.	1,051,915.	1,286,490.				
8	Pension plan accruals and contributions (include								
Ü	section 401(k) and 403(b) employer contributions)	167,313.	117,098.	25,587.	24,628.				
a	Other employee benefits	1,153,306.	626,248.	368,446.	158,612.				
10	Payroll taxes	626,063.	426,553.	98,134.	101,376.				
11	Fees for services (non-employees):								
	Management	40,204.	22 007	4 012	2 204				
	Legal		32,907.	4,013.	3,284.				
	Accounting	121,700.		121,700.					
d	Lobbying	0.			0.04 0.10				
	Professional fundraising services. See Part IV, line 17.	804,810.		F2 222	804,810.				
1	Investment management fees	53,333.		53,333.					
g	Other. (If line 11g amount exceeds 10% of line 25, column	1 410 612	000 036	22 070	407 007				
	(A) amount, list line 11g expenses on Schedule O.)	1,410,613.	889,936.	22,870.	497,807.				
12	Advertising and promotion	296,732.	237,572.	5,953.	53,207.				
13	Office expenses	1,756,463.	622,903.	110,375.	1,023,185.				
14	Information technology	995,873.	494,933.	24,946.	475,994.				
15	Royalties	0.	1 451 622	176 200	156 240				
16	Occupancy	1,784,295.	1,451,633.	176,320.	156,342.				
17	Travel	990,281.	889,884.	16,287.	84,110.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.							
19	Conferences, conventions, and meetings	203,537.	192,289.	5,017.	6,231.				
20	Interest	0.							
21	Payments to affiliates	0.							
22	Depreciation, depletion, and amortization	145,859.	119,604.	14,586.	11,669.				
23	Insurance	101,600.	83,312.	10,160.	8,128.				
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.)								
а	DIRECT COMMUNICATIONS	8,234,874.	6,437,403.	122,316.	1,675,155.				
b	DUES AND SUBSCRIPTIONS	439,673.	327,608.	9,141.	102,924.				
c	EQUIPMENT REPAIR/MAINTENANCE	131,355.	107,960.	12,923.	10,472.				
d	·								
е	All other expenses								
	Total functional expenses. Add lines 1 through 24e	39,020,245.	29,818,939.	2,477,939.	6,723,367.				
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								
	following SOP 98-2 (ASC 958-720)	8,025,369.	5,662,736.		2,362,633.				
JSA			<u></u> -	<u> </u>	Form 990 (2017)				

JSA 7E1052 1.000 Form **990** (2017)

7256MC 700J V 17-5.2F 0195515-00003 PAGE 11

Form 990 (2017) Page **11**

Part X Balance Sheet

ı e	ILA				
		Check if Schedule O contains a response or note to any line in this F	Part X		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	6,187,493.	1	7,193,053.
	2	Savings and temporary cash investments	559,329.	2	264,010.
	3	Pledges and grants receivable, net	4,140,600.	3	3,794,850.
	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.			
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0.	5	0.
		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	0		0
ξ		organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
Assets	7	Notes and loans receivable, net	0.	7	0.
As	8	Inventories for sale or use	8,319.	8	4,491.
	9	Prepaid expenses and deferred charges	432,865.	9	474,176.
	10 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D less: accumulated depreciation	251 277		542,763.
			351,277. 15,500,677.		16,833,163.
	11	Investments - publicly traded securities			0.
	12	Investments - other securities. See Part IV, line 11			0.
	13	Investments - program-related. See Part IV, line 11			0.
	14	Intangible assets		1.7	0.
	15	Other assets. See Part IV, line 11	27,180,560.	16	29,106,506.
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,298,384.	17	1,310,309.
	17 18	Accounts payable and accrued expenses.	1,172,301.	18	685,449.
	19	Grants payable	_		0.
	20	Deferred revenue			0.
	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D	0.		0.
s	22	Loans and other payables to current and former officers, directors,		21	
Liabilities		trustees, key employees, highest compensated employees, and			
ig		disqualified persons. Complete Part II of Schedule L	0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelated third parties			0.
	24	Unsecured notes and loans payable to unrelated third parties		_	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	3,287,768.	25	2,431,974.
	26	Total liabilities. Add lines 17 through 25	5,758,453.	26	4,427,732.
es –		Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	17,264,458.	27	19,898,461.
Fund Balances	28	Temporarily restricted net assets	1,914,700.	28	2,537,264.
둳	29	Permanently restricted net assets	2,242,949.	29	2,243,049.
or Fui		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	21,422,107.	33	24,678,774.
_	34	Total liabilities and net assets/fund balances	27,180,560.	34	29,106,506.
_			•		Form 990 (2017)

Form **990** (2017)

Page **12** Form 990 (2017)

Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI					X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		41,2 39,0			
2	2 Total expenses (must equal Part IX, column (A), line 25)						
3							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		21,4	22,1	.07.	
5	Net unrealized gains (losses) on investments	5		5	09,8	867.	
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		5	32,9	61.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		24,6	78,7	74.	
Part	·						
	Check if Schedule O contains a response or note to any line in this Part XII					X	
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplair	ı in				
	Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or				
	reviewed on a separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis				3.7		
b	Were the organization's financial statements audited by an independent accountant?			2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a				
	separate basis, consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for		•		х		
	of the audit, review, or compilation of its financial statements and selection of an independent acc			2c	Λ		
	If the organization changed either its oversight process or selection process during the tax year, e	xplair	n in				
	Schedule O.						
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	n in	20		Х	
	the Single Audit Act and OMB Circular A-133?			3a			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		the	2 L			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	uits.		3b			

Form **990** (2017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

AMNESTY INTERNATIONAL OF THE USA, INC. 52-0851555 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(y). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3 % 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 331/3 % 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.) 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Typ functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations..... Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of (iv) Is the organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) instructions) instructions) document? 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) 2017

Page 2 Schedule A (Form 990 or 990-EZ) 2017

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	34,144,311.	31,785,589.	37,447,820.	38,723,715.	39,538,843.	181,640,278.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	34,144,311.	31,785,589.	37,447,820.	38,723,715.	39,538,843.	181,640,278.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4						0. 181,640,278.
	tion B. Total Support						101,040,270.
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
		34,144,311.	31,785,589.	37,447,820.	38,723,715.	39,538,843.	181,640,278.
7 8	Amounts from line 4. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	679,642.	748,863.	1,079,469.	1,281,526.	1,323,273.	5,112,773.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 1	26,398.	70,339.	17,073.	135,742.	109,230.	358,782.
11	Total support. Add lines 7 through 10						187,111,833.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	940,098.
13	First five years. If the Form 990 is forganization, check this box and stop here	<u> </u>					
Sec	tion C. Computation of Public Sup		_				
14	Public support percentage for 2017 (li	. ,	•			14	97.08%
15	Public support percentage from 2016					15	97.30 %
16a	331/3% support test - 2017. If the org	=					
	box and stop here. The organization q						
b	331/3% support test - 2016. If the org						
47-	this box and stop here. The organization			-			
1 <i>1</i> a	10%-facts-and-circumstances test - 2						
b	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.						
18	Private foundation. If the organization instructions						▶□

Schedule A (Form 990 or 990-EZ) 2017 Page 3

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

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

Sec	tion A. Public Support			· 1	'	,	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
. u	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
_	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
Ŭ	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6	., -	` ,	., -	., -	.,	
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
~	section 511 taxes) from businesses						
	acquired after June 30, 1975						
r	Add lines 10a and 10b						
11	Net income from unrelated business						
••	activities not included in line 10b,						
	whether or not the business is regularly						
40	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
13	(Explain in Part VI.) Total support. (Add lines 9, 10c, 11,						
13	and 12.)						
14	First five years. If the Form 990 is for	or the organiza	tion's first socs	nd third fourth	or fifth toy w	ear as a cootion	501(a)(3)
14	organization, check this box and stop here .	· ·	·		•		` ` ` `
Sec	tion C. Computation of Public Supp						
<u>3ec</u> 15	Public support percentage for 2017 (line 8,			nn (f))		15	%
16	Public support percentage for 2017 (fine 6,					16	
	tion D. Computation of Investment					10	70
	•			3 column (f))		17	%
17 10	Investment income percentage for 2017 (lin						
18	Investment income percentage from 2016 S					18	%
туа	331/3% support tests - 2017. If the org						
L	17 is not more than 331/3%, check this	-	_	•	• •		
D	331/3% support tests - 2016. If the orga				•		
20	line 18 is not more than 331/3 %, check Private foundation. If the organization of		-	•			
20	Titrate Touridation. If the Organization (aid HOL CHECK	a box on mile	ı -, , ıəa, uı 190	, UIICUN IIIIS DI	on and see mist	uotions -

PAGE 16

Yes No

Schedule A (Form 990 or 990-EZ) 2017 Page **4**

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
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?	5b	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с	
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</i> "Yes," <i>provide detail in Part VI.</i>	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	6	
	Dia the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor		

- Identified 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10 a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2017

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2017 Page **5**

				- 3
Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	110		
h	A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ion B. Type I Supporting Organizations	110		
	on 2. Type i oupperung organizatione		Yes	No
4	Did the directors tructors or membership of one or more supported organizations have the newer to			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	_		
2 o o ti	ion C. Type II Supporting Organizations	2		
secti	on C. Type ii Supporting Organizations		Yes	No
	Many and the first of the construction to the Province of the character of the Construction of the Province		162	INO
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</i>			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on 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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	_		
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on 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 ins	structi	ions).	
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
•	Activities Test Anguay (a) and (b) below		Yes	No
2	Activities Test. <i>Answer (a) and (b) below.</i> Did substantially all of the arganization's activities during the tax year directly further the example purposes of			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	01		
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	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	Ja		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2017

Page 6 Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	5	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	Nov. 20, 1970 (expla	in in Part VI). See
instructions. All other Type III non-functionally integrated supporting organization	zations n	nust complete Sectio	ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
		(A) I Hol Teal	(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 Voor	(B) Current Year
Section B - William Asset Amount		(A) Prior 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-functionall	y integra	ted Type III supporting	organization (see
instructions).	, - 5	21	

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	
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 resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
c	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i_	Carryover from 2012 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			

Schedule A (Form 990 or 990-EZ) 2017

Part VI. See instructions.

Breakdown of line 7: Excess from 2013 Excess from 2014 Excess from 2015 d Excess from 2016 Excess from 2017

and 4c.

Excess distributions carryover to 2018. Add lines 3j

Schedule A (Form 990 or 990-EZ) 2017 Page **8**

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

					ATTACHMENT 1	
SCHEDULE A, PART II	- OTHER INCOME	C				
DESCRIPTION	2013	2014	2015	2016	2017	TOTAL
MISCELLANEOUS	26,398.	70,339.	17,073.	7,335.	8,332.	129,477.
				100 405	400.000	000 005
MERCHANDISE SALES				128,407.	100,898.	229,305.
TOTALS	26,398.	70,339.	17,073.	135,742.	109,230.	358,782.

Schedule A (Form 990 or 990-EZ) 2017

7256MC 700J V 17-5.2F 0195515-00003 PAGE 21

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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.

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

Open to Public Inspection

 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 Employer identification number AMNESTY INTERNATIONAL OF THE USA, INC. 52-0851555 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. (see instructions for definition of "political campaign activities") Volunteer hours for political campaign activities (see instructions).......... Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ Enter the amount of any excise tax incurred by organization managers under section 4955 ... > \$ If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes Nο Yes No b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities.....▶\$ Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? 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 (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. 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) 2017

301	ledule C (Form 990 or 990-EZ) 2017	ZIMINDOIT INTER	WILLOWIE OF III	H OBII, INC.	32 0	ODIDDD Fage
Ρ	complete if the org section 501(h)).	ganization is exe	mpt under section	n 501(c)(3) and	filed Form 5768 (elec	ction under
Α			n affiliated group (and fexcess lobbying exp		ach affiliated group mem	ber's name,
В	Check ▶ if the filing organiz	zation checked box	A and "limited control	ol" provisions app	oly.	
	Limits (The term "expendit	on Lobbying Experures" means amou		.)	(a) Filing organization's totals	(b) Affiliated group totals
1	Total lobbying expenditures to i	nfluence public opii	nion (grass roots lob	bying)	30,712.	
ı	Total lobbying expenditures to i	nfluence a legislativ	ve body (direct lobby	ing) [451,883.	
(Total lobbying expenditures (ad	d lines 1a and 1b) .		[482,595.	
(d Other exempt purpose expendit	tures		[38,537,650.	
•	Total exempt purpose expendit	ures (add lines 1c a	nd 1d)	[39,020,245.	
1	Lobbying nontaxable amount. columns.	Enter the amount	from the following	table in both	1,000,000.	
	If the amount on line 1e, column (a) or (b) is: The lobby	ing nontaxable amount	is:		
	Not over \$500,000	20% of the	amount on line 1e.			
	Over \$500,000 but not over \$1,000	0,000 \$100,000	olus 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,5	00,000 \$175,000	olus 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,	000,000 \$225,000	olus 5% of the excess of	over \$1,500,000.		
	Over \$17,000,000	\$1,000,00	0.			
9	g Grassroots nontaxable amount	(enter 25% of line 1	f)		250,000.	
I	Subtract line 1g from line 1a. If	zero or less, enter -	0		0.	0
i	Subtract line 1f from line 1c. If a	zero or less, enter -0)		0.	0
j	If there is an amount other th	an zero on either	line 1h or line 1i,	did the organiza	ition file Form 4720	
	reporting section 4911 tax for t	his year?				Yes No
			eraging Period Unde	` ,		
	(Some organizations tha	t made a section 5	01(h) election do no	t have to compl	ete all of the five colum	ns below.
		See the separa	ate instructions for	lines 2a through	2f.)	
		Lobbying Expe	enditures During 4-Y	ear Averaging Pe	eriod	
	Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(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	290,734.	382,700.	488,964.	482,595.	1,644,993.				
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	19,500.	32,400.	39,271.	30,712.	121,883.				

Schedule C (Form 990 or 990-EZ) 2017

JSA

7E1265 1.000 7256MC 700J 0195515-00003 V 17-5.2F PAGE 23

	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO	T file	d For	m 576	68		age 3
	(election under section 501(h)).	(a	a)		(b)		
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No		Amoui	nt	
1 a b c d e f	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?						
g h i j 2a b c	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?						
d Pa	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	(c)(5)	, or s	ectio	า		
1 2 3 Pai	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	m the (c)(5)	prior , or s	year? section	1 2 3	res , is	No
Prov 2 (se	answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year	es of th	of	2a 2b 2c 3 4 5	II-A, line	es 1	and

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017

Part IV Supplemental Information (continued)

FORM 990, SCHEDULE C, PART II-A

THE ORGANIZATION UNDERTAKES ACTIVITIES TO INFLUENCE LEGISLATION AND GOVERNMENT POLICY ON THE FEDERAL LEVEL AND FILES QUARTERLY LOBBYING REPORTS WITH CONGRESS. EMPLOYEES WHO ARE INVOLVED IN LOBBYING ARE REGISTERED WITH CONGRESS AS LOBBYISTS AND TRACK THE TIME THEY SPEND ON LOBBYING ACTIVITIES BROKEN DOWN BY THE SPECIFIC TOPIC OR LEGISLATIVE AREA. THE COMPENSATED VALUE OF THEIR TIME, PLUS AN ALLOCATION OF OVERHEADS AND OTHER DIRECT COSTS, ARE INCLUDED IN THE LOBBYING EXPENDITURE. OUR REPORTING FOR CONGRESSIONAL LOBBYING MATCHES WITH WHAT WE REPORT ON SCHEDULE C.

THE ORGANIZATION ALSO UNDERTAKES GRASSROOTS LOBBYING DESIGNED TO
ENCOURAGE OUR MEMBERS AND DONORS TO TAKE ACTIONS TO INFLUENCE
GOVERNMENTAL LEGISLATION AND POLICY. THE PROPORTIONATE COSTS OF ONLINE
MEDIA AND MESSAGING ARE REFLECTED IN THESE EXPENDITURES.

Schedule C (Form 990 or 990-EZ) 2017

SCHEDULE D (Form 990)

Supplemental Financial Statements ▶ Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	e of the organization	Employer identification number
AMN	IESTY INTERNATIONAL OF THE USA, INC.	52-0851555
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	
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	n donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fun	ds can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any	
	conferring impermissible private benefit?	
Pa	rt II Conservation Easements.	
1 6	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		for biotonically, increase to at least one
		f a historically important land area
		f a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in t	
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С		2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
u		2d
_		
3	Number of conservation easements modified, transferred, released, extinguished, or termina	ted 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	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conse	ervation easements during the year
	>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing cor	nservation 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		
9	In Part XIII, describe how the organization reports conservation easements in its revenue and obligance sheet, and include, if applicable, the text of the footnote to the organization's financial	= -
		i statements that describes the
В	organization's accounting for conservation easements.	Cimilar Assats
Ρa	organizations Maintaining Collections of Art, Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educate public service, provide, in Part XIII, the text of the footnote to its financial statements that described in the control of the public service.	venue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education public service provide in Part XIII the text of the footnote to its financial statements that described the control of the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements.	ation, or research in furtherance of these these items
h		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenues of art, historical treasures, or other similar assets held for public exhibition, educations of art, historical treasures, or other similar assets held for public exhibition, educations of art, historical treasures, or other similar assets held for public exhibition, educations of the public exhibition of the public exhibitio	
	public service, provide the following amounts relating to these items:	ation, or research in futile ance of
	(i) Revenue included on 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 as	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
a	Revenue included on 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) 2017

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)		Craspizations Maintaining	Collections of	Λrt ∐ict	orical T	roseuroe	or Oth	or Simila	r Acco	te (conti	Page Z		
a Public exhibition de Loan or exchange programs Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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?										•			
a Public exhibition de	3			iller recor	us, crieci	t ally of the	ie ioliow	iliy iliat al	e a sigi	illicant us	e oi its		
b Scholarly research e Other Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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?	2		•	4 <u></u>	Loan	or ovehana	o program	me					
c		<u> </u>		_		or excitating	e prograi	113					
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?		<u> </u>	tione	<u> </u>									
XIII. 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?													
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?	-		ation's collections	and expid	alli ilow t	iley fulfile	i tile oig	gariization s	exemp	. purpose	miant		
## Reserve 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 St he organization an apent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a St he organization an apent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a St he organization an apent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a St he organization and the arrangement in Part XIII and complete the following table: 2	5		solicit or receive d	onations o	fart hist	orical treas	ures or a	other simila	ır				
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? 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X.	Ū								_	Yes	□ No		
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, 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?	Par												
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes	ı aı	Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form											
included on Form 990, Part X?			tPth		Ľ (() (*	0						
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance	та												
to Beginning balance d Additions during the year e Distributions during the year 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial □ te ft 2b		Included on Form 990, Part X?							L	Yes	NO		
C Beginning balance 1d	b	it "Yes," explain the arrangement in i	Part XIII and comp	lete the fo	llowing tar	oie:		Δ.					
d Additions during the year		Designing halance						Ar	nount				
e Distributions during the year 16 15 Ending balance 16 16 Ending balance 17 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 16 Part X Part X Part X Part X No 17 Yes, explain the arrangement in Part X No 18 Part X Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 19 Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years	_												
f Ending balance													
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?													
Description of property Endowment Funds. Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.								account liak	sility?	Voc	No		
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.		=											
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 b	$\overline{}$		rait Alli. Check he	ere ii tile e.	хріанаціон	nas been p	Jiovided	UII Fait Aiii					
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 2,702,979 2,214,859	rai		n answered "Yes	" on Form	990 P	art IV line	10						
1a Beginning of year balance 2,702,979 2,214,859 2,214,859 2,214,859 2,194,859 b Contributions 100 523,467 20,000 c Net investment earnings, gains, and losses 336,709 33,440 336,709 33,440 d Grants or scholarships 92,162 68,787 92,162 68,787 92,162 68,787 92,14,859 2,214,859		Complete ii the organization				1		(d) Three ve	are hack	(e) Four v	ears hack		
b Contributions													
c Net investment earnings, gains, and losses	_					2,21	1,035.	2,211	7000.				
and losses			100.		3,107.								
d Grants or scholarships	С		336.709	3	3.440								
e Other expenditures for facilities and programs			3307.031		- , - <u></u>								
and programs													
f Administrative expenses	е	-	92.162.	6	8.787.								
g End of year balance.			72,1021										
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶		·	2.947.626.	2.70	2.979.	2.214	1.859.	2.214	.859.	2.2	14.859		
a Board designated or quasi-endowment ▶	•	-	L						70071				
b Permanent endowment ▶ 76.0000 % c Temporarily restricted endowment ▶ 24.0000 % 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: (i) unrelated organizations					e (line 1g,	column (a)) neid as	•					
c Temporarily restricted endowment ▶24.0000 % 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: (i) unrelated organizations	_												
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: (i) unrelated organizations .	c												
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (b) Cost or other basis (c) Accumulated depreciation (d) Book value 1a Land b Buildings c Leasehold improvements f Equipment 868,550. 386,952. 481,598.				00%.									
organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (b) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements 938,427. 879,852. 58,575. d Equipment 868,550. 386,952. 481,598.	3a		•		ation that	are held a	nd admir	istered for t	:he				
(i) unrelated organizations			'	J						Y	es No		
(ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (b) Cost or other basis (other) (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value to Buildings c Leasehold improvements 938,427. 879,852. 58,575. d Equipment 868,550. 386,952. 481,598.		•								3a(i)	X		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (other) (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (a) Book value (b) Buildings (c) Leasehold improvements (d) Book value (a) Book value (b) Buildings (c) Accumulated depreciation (d) Book value (e) Buildings (f) Accumulated depreciation (g) Book value (g) Book valu										3a(ii)	X		
Describe in Part XIII the intended uses of the organization's endowment funds. 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 (other) (investment) (investment) (c) Accumulated depreciation (d) Book value (d) Book value (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (a) Cost or other basis (other) (b) Cost or other basis (other) (a) Accumulated depreciation (b) Book value (c) Accumulated depreciation (d) Book value (e) Cost or other basis (other) (other)	b									3b			
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 (other) (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (e) Buildings c Leasehold improvements 938,427. 879,852. 58,575. d Equipment 868,550. 386,952. 481,598.	4	• • •	•	•									
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation	Par	rt VI Land, Buildings, and Equip	ment.										
tall Land (investment) (other) depreciation b Buildings Use a sehold improvements 938,427. 879,852. 58,575. d Equipment 868,550. 386,952. 481,598.													
b Buildings 938,427. 879,852. 58,575. c Leasehold improvements 938,427. 879,852. 58,575. d Equipment 868,550. 386,952. 481,598.		, , , ,	(invest						(0) Book value	9		
b Buildings 938,427. 879,852. 58,575. c Leasehold improvements 938,427. 879,852. 58,575. d Equipment 868,550. 386,952. 481,598.	1 a	Land											
c Leasehold improvements 938,427. 879,852. 58,575. d Equipment 868,550. 386,952. 481,598.	b	Buildings											
	С	Leasehold improvements			9	38,427.							
e Other 313.868. 311.278. 2.590.	d	Equipment											
	е	Other				313,868.		11,278.			2,590.		
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.). ▶ 542,763.	Tota			n 990, Part	X, columi	n (B), line 1	0c.)			542	2,763.		

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

Concadio D (1 onii 330) 2017		i age
Part VII Investments - Other Securities.	"Voc" on Form 000	Part IV line 11h See Form 000 Part V line 12
(a) Description of security or category	(b) Book value	Part IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation:
(including name of security)	(b) Book value	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.		
	"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) Desc	cription	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
<u>(7)</u> (8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.).	
Part X Other Liabilities.		
	"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) CHARITABLE GIFT ANNUITY PAYABLE	2,431,9	774.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9) Tetal (Column (b) must equal Form 000. Part Y and (P) line 25.)	2,431,9	7.4
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	2,431,9	/ ፲ .

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 7E1270 1.000 7256MC 700J

0195515-00003 V 17-5.2F PAGE 28

	e D (Form 990) 2017		Page 4
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	42,268,404.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	-	
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Fait Alli.)	20	1,087,653.
е	Add lines 2a through 2d	2e 3	41,180,751.
3	Subtract line 2e from line 1		11/100//011
4 a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 53,333.		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b	4c	53,333.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	41,234,084.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	39,011,737.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	-	
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)	20	44,825.
e	Add lines 2a through 2d	2e 3	38,966,912.
3 4	Subtract line 2e from line 1		
4 a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 53,333.		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	53,333.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	39,020,245.
	XIII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Patt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
	PAGE 5	· iatioii	•
255	PAGE 3		

Schedule D (Form 990) 2017

Part XIII Supplemental Information (continued)

ENDOWMENT FUNDS

SCHEDULE D, 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 INVESTMENT COMMITTEE OF THE BOARD OF DIRECTORS THE ENDOWMENT FUNDS ARE INVESTED IN VEHICLES SUCH AS MONEY MARKET FUNDS, STOCK MUTUAL FUNDS, AND BONDS.

ASC 740 FOOTNOTE

SCHEDULE D, PART X, LINE 2

AIUSA WAS INCORPORATED IN THE STATE OF NEW YORK AND IS EXEMPT FROM

FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL

REVENUE CODE ("IRC") AND, THEREFORE, HAS MADE NO PROVISION FOR INCOME

TAXES IN THE ACCOMPANYING FINANCIAL STATEMENTS. IN ADDITION, AIUSA HAS

BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE ("IRS") NOT TO BE A

"PRIVATE FOUNDATION" WITHIN THE MEANING OF SECTION 509(A) OF THE IRC.

THERE WAS NO UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31,

2017 AND 2016.

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 UPON EXAMINATION BY A TAXING AUTHORITY.

Schedule D (Form 990) 2017

JSA 7E1226 1.000

Part XIII Supplemental Information (continued)

AIUSA DOES NOT BELIEVE IT HAS ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT HAS NOT RECOGNIZED ANY LIABILITY FOR UNCERTAIN TAX BENEFITS. AIUSA HAS FILED IRS FORM 990 TAX RETURNS, AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHERE REQUIRED. FOR THE YEARS ENDED DECEMBER 31, 2017 AND 2016, THERE WAS NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN THE FINANCIAL STATEMENTS. AS OF DECEMBER 31, 2017 AND 2016, THE YEARS STILL SUBJECT TO EXAMINATION BY A TAXING AUTHORITY ARE 2014 THROUGH 2016.

RECONCILIATION OF REVENUE PER AFS WITH FORM 990

SCHEDULE D, PART XI, LINE 2D

DECREASE IN VALUE OF CHARITABLE GIFT ANNUITY OBLIGATIONS

\$532,961

Schedule D (Form 990) 2017

JSA 7E1226 1.000

> 7256MC 700J V 17-5.2F 0195515-00003 PAGE 31

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

OMB No. 1545-0047 **Open to Public** Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Part I

52-0851555 AMNESTY INTERNATIONAL OF THE USA, INC. 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 orga	nization mainta	in records to s	ubstantiate the amount of	fits grants and other							
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the											
	grants or assistance? X Yes No											
2	For grantmakers. Describe in	xers. Describe in Part V the organization's procedures for monitoring the use of its grants and other side the United States.										
	assistance outside the United Sta											
_												
3		Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) Region (b) Number of (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total										
	(a) Region	offices in the	employees,	region (by type) (such as,	a program service,	expenditures for						
		region	agents, and independent	fundraising, program services, investments, grants to recipients	describe specific type of service(s) in the region	and investments in the region						
			contractors in the region	located in the region)								
			iii tile legion									
(1)	EUROPE			GRANTMAKING		10,489,821.						
(- /												
(2)	NORTH AMERICA			GRANTMAKING		37,000.						
` '												
(3)												
(4)												
(5)												
رم،												
(6)												
(7)												
(7)												
(8)												
(-)												
(9)												
(10)												
(11)												
(12)												
(4.0)												
(13)												
(14)												
(17)												
(15)												
/												
(16)												
(17)												
3a	Sub-total					10,526,821.						
b	Total from continuation											
	sheets to Part I											
С	Totals (add lines 3a and 3b)					10,526,821.						

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

7E1274 1.000 7256MC 700J

Schedule F (Form 990) 2017

0195515-00003

Schedule F (Form 990) 2017

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other
(1)			NORTH AMERICA	RELIEF AID	25,000.	WIRE			
(2)			NORTH AMERICA	RELIEF AID	12,000.	WIRE			
(3)			EUROPE/ICELAND/GREENLAND	ANNUAL ASSESSMENT	10,489,821.	WIRE			
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
			ove that are recognized as						
by 3 Ent	the IRS, or for which the gr	antee or counsel has pro	ovided a section 501(c)(3) e	quivalency letter					3.

Schedule F (Form 990) 2017

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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
_(1)							
_(2)							
(3)							
_(4)							
_(5)							
(6)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
440							
(15)							
(16)							
(17)							
<u>(18)</u>							adula E (Earm 990) 2017

Schedule F (Form 990) 2017

Schedule F (Form 990) 2017

Page 4

Part IV Foreign Forms

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

Schedule F (Form 990) 2017

Page 5 Schedule F (Form 990) 2017

Supplemental Information Part V

> 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).

SCHEDULE F, 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. AMNESTY INTERNATIONAL OF THE USA IS ONE OF THE MANY AFFILIATED NATIONAL ORGANIZATIONS, WHICH CONTRIBUTES FUNDS FOR THE SUPPORT OF PROGRAM ACTIVITIES OF AMNESTY INTERNATIONAL LIMITED THROUGH AN ANNUAL ASSESSMENT. FOR THE YEAR ENDED DECEMBER 31, 2017, THIS ASSESSMENT WAS \$10,526,821.

AMNESTY INTERNATIONAL OF THE USA IS NOT REQUIRED TO FURTHER MONITOR THE MANAGEMENT OF THESE FUNDS AS THE TWO ORGANIZATIONS HAVE A COMMON MISSION OF PREVENTING HUMAN RIGHTS VIOLATIONS WORLDWIDE. BOTH ORGANIZATIONS COORDINATE THEIR EFFORTS TO PREVENT AND END GRAVE ABUSES OF THE RIGHTS TO PHYSICAL AND MENTAL INTEGRITY, FREEDOM OF CONSCIENCE AND EXPRESSION, AND FREEDOM FROM DISCRIMINATION.

IN ADDITION TO THE ANNUAL FUNDING TO AMNESTY INTERNATIONAL, LTD., FOREIGN GRANTS WERE MADE TO AMNESTY INTERNATIONAL MEXICO AND AMNESTY INTERNATIONAL PUERTO RICO FOR RELIEF AID TO ASSIST IN THE REBUILDING EFFORTS AFTER THE DEVASTATION WROUGHT BY NATURAL DISASTERS IN 2017. GRANT FUNDS WERE SPENT TO PURCHASE EQUIPMENT/GOODS FOR RESIDENTS IMPACTED BY A NATURAL DISASTER AND SO NO ADDITIONAL MONITORING OF THESE GRANTS WAS REQUIRED.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ. ➤ Go to www.irs.gov/Form990 for the latest instructions.

Employer identification number

Open to Public Inspection

AMNESTY INTERNATIONAL OF THE	USA, INC.				52-0851555	
Part I Fundraising Activities. Co	mplete if the orga	anization	answered	l "Yes" on Form 9	990, Part IV, line	17.
Form 990-EZ filers are no	t required to comp	lete this p	part.			
1 Indicate whether the organization ra	aised funds through	any of the	following	activities. Check a	II that apply.	
a X Mail solicitations	е	X Solid	citation of	non-government g	rants	
b X Internet and email solicitations	f	Solid	citation of	government grants	S	
c X Phone solicitations	g	Spe	cial fundra	ising events		
d X In-person solicitations						
2a Did the organization have a written	or oral agreement v	vith any in	dividual (in	ncluding officers, d	irectors, trustees, _	
or key employees listed in Form 99						X Yes No
b If "Yes," list the 10 highest paid inc	dividuals or entities	(fundraise	ers) pursua	ant to agreements	under which the	fundraiser is to be
compensated at least \$5,000 by the	e organization.					
(2) None and address of individual		(iii) Did fur	ndraiser have	(in) Cross reseives	(v) Amount paid to (or retained by)	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(ii) Activity		or control of	(iv) Gross receipts from activity	fundraiser listed in	(or retained by)
			butions?		col. (i)	organization
1	DIR. MAIL	Yes	No			
AB DATA	FUNDRAISING		X	22,541,208.	390,000.	22,151,208.
2	DOOR-DOOR		71	22,311,200.	370,000.	22,131,200.
THE OUTREACH TEAM	MARKETING		X	66,000.	258,415.	-192,415.
3	ONLINE		71	00,000.	230,113.	1,72,113.
SEA CHANGE STRATEGIES	FUNDRAISING		X	1,894,780.	90,000.	1,804,780.
4	TELE -			2707177001	20,000.	
DONOR SERVICES GROUP	MARKETING		X	137,425.	66,395.	71,030.
5				, - ,	,	,,,,,,
6						
7						
8						
0						
9						
-						
10						
	'					
Total				24,639,413.	804,810.	23,834,603.
3 List all states in which the organiz	ation is registered of	or license	d to solicit	contributions or	has been notified	it is exempt from
registration or licensing.						
AL, AK, AZ, AR, CA, CO, CT, DE, FL, G	A,HI,ID,IL,IN,	,				
IA, KS, KY, LA, ME, MD, MA, MI, MN, M			NM,NY,N	C,ND,OH,		
OK, OR, PA, RI, SC, SD, TN, TX, UT, V	T,VA,WA,WV,WI,	WY,				

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

Schedule G (Form 990 or 990-EZ) 2017

Page 2 Schedule G (Form 990 or 990-EZ) 2017

Pa	rt I	Fundraising Events. Complete than \$15,000 of fundraising even gross receipts greater than \$5,000.	t contributions and gro			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
4			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts				
Вè	2	Local Contributions				
		Less: Contributions Gross income (line 1 minus line 2)				
	4	Cash prizes				
nses	5	Noncash prizes				
	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direct	8	Entertainment				
	9	Other direct expenses				
	10 11	Direct expense summary. Add lines 4 Net income summary. Subtract line 1				
	rt I		anization answered "Y			orted more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Ř	1	Gross revenue				
es	2	Cash prizes				
xbeuses	3	Noncash prizes				
Direct E		Rent/facility costs				
亩		Other direct expenses				
			Yes%	Yes%	Yes%	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2	through 5 in column (d)	▶	
	8	Net gaming income summary. Subtra	ct line 7 from line 1, co	lumn (d)	>	
9	Е	nter the state(s) in which the organizati	ion conducts gaming ac	ctivities:		
a b		the organization licensed to conduct g "No," explain:	aming activities in each			Yes No
	_					
		/ere any of the organization's gaming li "Yes," explain:	icenses revoked, suspe	ended, or terminated duri	ng the tax year?	Yes No
I,	' 11	1 co, expiairi.				

Schedule G (Form 990 or 990-EZ) 2017

Sched	ule G (Form 990 or 990-EZ) 2017
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?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Name ▶
	Address >
45.	Describe and destruction to the second of
15 a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
L	revenue? Yes No If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
b	amount of gaming revenue retained by the third party \blacktriangleright \$
С	If "Yes," enter name and address of the third party:
·	The Foot, which have and address of the time party.
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ▶
	Coming manager companed in N C
	Gaming manager compensation ► \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
_	or spent in the organization's own exempt activities during the tax year \$\bigs\\$
Par	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).
PRO	FESSIONAL FUNDRAISING SERVICES
SCH	EDULE G, PART I, LINE 2
THE	ORGANIZATION PAID AB DATA A TOTAL OF \$3,191,798 DURING THE TAX YEAR,
WHI	CH INCLUDES \$390,000 IN FEES FOR PROFESSIONAL FUNDRAISING SERVICES.
THE	REMAINING AMOUNT OF \$2,801,798 WAS EXPENDITURES IN RELATION TO
PRO:	DUCTION COSTS THAT HAVE BEEN REPORTED ON FORM 990, PART IX, LINE 24A
70.	DIDECT COMMINICATIONS EVDENSES
AS .	DIRECT COMMUNICATIONS EXPENSES.

Schedule G (Form 990 or 990-EZ) 2017

7E1503 1.000

SCHEDULE I (Form 990)

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

OMB No. 1545-0047
2017

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.

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

Open to Public Inspection

Name of the organization						Employer identific	ation number
AMNESTY INTERNATIONAL OF THE USA,	INC.					52-08515	55
Part I General Information on Grants ar	nd Assistanc	е					
 Does the organization maintain records to set the selection criteria used to award the grant in Part IV the organization's process. 	nts or assistand edures for mor	ce?	of grant funds in th	e United States.			X Yes No
Part II Grants and Other Assistance to 990, Part IV, line 21, for any recip		•					es" on Form
(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 noncash assistance	(h) Purpose of grant or assistance
(1) PROVIDENCE YOUTH STUDENT MOVEMENT							
669 ELMWOOD AVENUE PROVIDENCE, RI 02907	65-1224536	501(C)(3)	20,000.				ENDING GUN VIOLENCE
(2) THE GATHERING FOR JUSTICE							
310 W. 43RD STREET 14FL NY, NY 10036	47-2966777	501(C)(3)	20,000.				ENDING GUN VIOLENCE
(3) THE PRAXIS PROJECT							
1001 CONNECTICUT AVE WASHINGTON, DC 20036	30-0044814	501(C)(3)	20,000.				ENDING GUN VIOLENCE
(4) LAW CENTER TO PREVENT GUN VIOLENCE							
268 BUSH ST #555 SAN FRANCISCO, CA 94104	94-3324402	501(C)(3)	20,000.				ENDING GUN VIOLENCE
(5) CENTER FOR TRANSFORMATIVE ACTION							SECURITY AND HUMAN
119 ANABEL TAYLOR HALL ITHACA, NY 14853	16-0990318	501(C)(3)	53,946.				RIGHTS
(6) EDUCATIONAL FUND TO STOP GUN VIOLENCE							
805 15TH STREET WASHINGTON, DC 20005	52-1114375	501(C)(3)	20,000.				ENDING GUN VIOLENCE
_(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and	•	•					6.
3 Enter total number of other organizations list	sted in the line	1 table				<u> </u>	

JSA 7E1288 1.000

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

7256MC 700J V 17-5.2F 0195515-00003 PAGE 40

Schedule I (Form 990) (2017) Page 2

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III 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.	76,842.			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SCHEDULE I, PART I LINE 2

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE U.S. TO OTHER

ORGANIZATIONS

THE ORGANIZATION OCCASIONALLY PARTNERS WITH OTHER NONPROFIT ORGANIZATIONS

TO ADVANCE ITS WORK WHEN THERE IS MUTUAL GOAL CONGRUENCY ON PROGRAM WORK.

THESE PARTNERSHIPS MAY INCLUDE THE SHARING OF DONOR RESTRICTED

CONTRIBUTIONS EAR-MARKED FOR THESE UNDERTAKINGS. IN THESE CASES, THE

ORGANIZATION RE-GRANTS A PORTION OF ITS RESOURCES TO THESE PARTNERS UNDER

WRITTEN AGREEMENTS THAT DESCRIBE PRECISELY THE TERMS OF THE

COLLABORATION, DELIVERABLES, TIMING AND ELEMENTS OF COOPERATION. THE

Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017) Page 2

art III	Grants and Other Assistance to Domestic Individuals. 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					
_2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SUB-GRANTEES WILL BE REQUIRED TO MEET BENCHMARKS AND PROVIDE WRITTEN

REPORTS ON A PERIODIC AND TIMELY BASIS. HITTING THE PREDETERMINED

MILESTONES IS A PREREQUISITE FOR RECEIVING STAGED TRANCHES.

POCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE U.S. TO

INDIVIDUALS

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

Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017)

art III	Grants and Other Assistance to Domestic Individuals. 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					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

AND THE QUALITY OF THEIR SUBMISSIONS. PART OF THE FUNDING FOR THESE

GRANTS COMES FROM AN ALLOTMENT DESIGNATED AS THE HANNA GRUNWALD FUND AND

THE SPECIAL INCENTIVE FUND.

7256MC 700J V 17-5.2F

0195515-00003

SCHEDULE J (Form 990)

Compensation InformationFor 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.

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AMNESTY INTERNATIONAL OF THE USA, INC.

Part I Questions Regarding Compensation

Employer identification number 52-0851555

			Yes	No
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.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, 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	1b		
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 on line			
	1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
3	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.			
	Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on 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:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	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 nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		X
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	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
DANIEL MCGREGOR	(i)	204,402.	0.	0.	6,414.	28,127.	238,943.	0.	
1 CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
MARGARET HUANG	(i)	249,227.	0.	0.	7,710.	28,127.	285,064.	0.	
2 ^{EXECUTIVE} DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
MICHAEL GREENBERG	(i)	207,329.	0.	0.	6,242.	10,346.	223,917.	0.	
3 ^{CHIEF} FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
ANNISE VALDEZ-GODEK	(i)	160,869.	0.	0.	4,364.	28,091.	193,324.	0.	
4NAT'L DIR., HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.	
BRUCE TEMKIN	(i)	170,207.	0.	0.	4,803.	19,703.	194,713.	0.	
NATIONAL DIRECTOR, MAJOR GIFTS	(ii)	0.	0.	0.	0.	0.	0.	0.	
ERIC FERRERO (THRU 11/2	(i)	199,130.	0.	0.	3,902.	9,525.	212,557.	0.	
6 DEP. ED, PUBLIC AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.	
MICHAEL P. O'REILLY	(i)	177,617.	0.	0.	5,489.	28,127.	211,233.	0.	
7 ^{CHIEF} STRATEGY & GOV. OFF.	(ii)	0.	0.	0.	0.	0.	0.	0.	
PARTICIA HART	(i)	172,927.	0.	0.	5,240.	9,523.	187,690.	0.	
8 ^{ND, DIR. RESPONSE & DEV. OPS.}	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
9	(ii)								
	(i)								
10	(ii)								
	(i)								
11	(ii)								
	(i)								
_12	(ii)								
	(i)								
13	(ii)								
	(i)								
_14	(ii)								
	(i)								
_15	(ii)								
	(i)								
16	(ii)								

AMNESTY INTERNATIONAL OF THE USA, INC. 52-0851555

Schedule J (Form 990) 2017 Page 3

Part | Supplemental Information

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

Schedule J (Form 990) 2017

JSA 7E1505 1.000

7256MC 700J V 17-5.2F 0195515-00003 PAGE 46

SCHEDULE M (Form 990)

Noncash Contributions

2017

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

► Attach to Form 990.

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

Open to Public
Inspection

OMB No. 1545-0047

AMNESTY INTERNATIONAL OF THE USA, INC.

52-0851555

Employer identification number

Par	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	Method of noncash conti		_	•
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	94.	1,090,430.	MARKET QU	OTAT	ION	
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 26	Other ►()							
20 27	Other ►()							
28	Other ►() Other ►()							
	Other ►() Number of Forms 8283 received	by the org	anization during the tax w	ear for contributions for				
29	which the organization completed f	-			29			
	which the organization completed i	01111 0203,	rait iv, boliee Ackilowiedg	ement		,	Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I. line	s 1 through			
	28, that it must hold for at least the				- 1			
	to be used for exempt purposes for					30a		Х
b	If "Yes," describe the arrangement i		51					
31	Does the organization have a		ance policy that require	es the review of anv	nonstandard			
	contributions?					31	Х	
32a	Does the organization hire or use							
	contributions?	-	-	· · · · · · · · · · · · · · · · · · ·		32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an	amount in c	olumn (c) for a type of pro	perty 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) (2017)

Schedule M (Form 990) (2017) Page **2**

Part II Suppleme

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

JSA Schedule M (Form 990) (2017)

7256MC 700J V 17-5.2F 0195515-00003 PAGE 48

SCHEDULE O (Form 990 or 990-EZ)

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 Open to Public Inspection

52-0851555

Department of the Treasury Internal Revenue Service

Name of the organization

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

MEMBERS OR STOCKHOLDERS

FORM 990, PART VI, SECTION A, LINES 6 & 7A

AMNESTY INTERNATIONAL OF THE USA, INC.

AMNESTY INTERNATIONAL HAS A LARGE MEMBERSHIP BASE INCLUDING THOSE INDIVIDUALS WHO ARE DONORS, ACTIVISTS, AND PARTICIPANTS IN OUR WORK. THESE INDIVIDUAL MEMBERS MAY NOMINATE OTHER MEMBERS TO RUN FOR THE BOARD OF DIRECTORS. THE MEMBERSHIP AS A WHOLE IS THEN ENTITLED TO ELECT THE BOARD OF DIRECTORS IN A COMPREHENSIVE SECRET BALLOT AND VOTING PROCESS ADMINISTERED BY A THIRD PARTY. THE MEMBERSHIP MAY ALSO PROPOSE RESOLUTIONS AND ACTIONS AT REGIONAL LEVELS THAT ARE VOTED ON AT THE ANNUAL GENERAL MEETING. MEMBERS ARE NOT AUTHORIZED TO VOTE ON DECISIONS THAT ARE THE PURVIEW OF THE BOARD.

FORM 990 REVIEW PROCESS

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

FORM 990 WAS PREPARED BY A NATIONAL 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.

CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT FORM 990, PART VI, SECTION B, LINE 12

AMNESTY INTERNATIONAL HAS A ROBUST CONFLICTS OF INTEREST POLICY IN PLACE THAT ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE EXPECTED TO OBSERVE

AND BE IN COMPLIANCE WITH. THE ORGANIZATION'S POLICY REQUIRES THAT EACH BOARD OF DIRECTORS MEMBER, UPON ELECTION, MUST SIGN A CONFLICT OF INTEREST FORM THAT REQUIRES THEM TO DISCLOSE ALL POTENTIAL CONFLICTS (IF ANY). THEREAFTER, THE CONFLICT OF INTEREST FORM MUST BE COMPLETED ON AN ANNUAL BASIS, NOT ONLY BY BOARD MEMBERS, BUT BY ALL OFFICERS AND KEY EMPLOYEES. THE CONFLICTS OF INTEREST FORMS ARE REVIEWED AND MONITORED BY THE CHAIRMAN OF THE BOARD IN CONJUNCTION WITH THE REST OF THE BOARD. ANY CONFLICTS ARE IMMEDIATELY INVESTIGATED AND RESOLVED AND ALL DECISIONS DOCUMENTED IN THE BOARD OF DIRECTORS MINUTES.

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

THE COMPENSATION OF THE EXECUTIVE DIRECTOR WAS ESTABLISHED AT THE TIME OF HER HIRING AND MEMORIALIZED IN A WRITTEN EMPLOYMENT CONTRACT WITH FIXED TERM OVER A THREE YEAR PERIOD. COMPENSATION WAS APPROVED BY THE BOARD OF

PROCESS FOR DETERMINING COMPENSATION OF CEO & EXECUTIVE DIRECTOR

TERM OVER A THREE YEAR PERIOD. COMPENSATION WAS APPROVED BY THE BOARD OF DIRECTORS AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATIONS ARE DOCUMENTED IN THE BOARD OF DIRECTORS' MINUTES. THE BOARD ENSURED THAT COMPENSATION WAS COMMENSURATE WITH HER LEVEL AND WITH WHAT IS PAID IN THE INDUSTRY. A FORMAL COMPENSATION STUDY WILL BE COMMISSIONED UPON THE

PROCESS FOR DETERMINING COMPENSATION OF OFFICERS & KEY EMPLOYEES FORM 990, PART VI, SECTION B, LINE 15B

COMPLETION OF HER INITIAL CONTRACT.

COMPENSATION FOR THE OFFICERS AND KEY EMPLOYEES REPORTED ON THE FORM 990 IS DETERMINED BY THE EXECUTIVE DIRECTOR. TO BENCHMARK COMPENSATION FOR CERTAIN POSITIONS, THE EXECUTIVE DIRECTOR REVIEWS COMPENSATION PAID TO

Name of the organization $\mbox{AMNESTY INTERNATIONAL OF THE USA, INC.}$

Employer identification number 52-0851555

SIMILAR POSITIONS AT COMPARABLE NON-PROFITS IN THE INDUSTRY. IN 2017,

AMNESTY INTERNATIONAL COMMISSIONED A FORMAL BENCHMARKING SURVEY FROM AN

INDEPENDENT COMPENSATION CONSULTANT TO ENSURE THAT THE WAGES IT PAYS ARE

COMMENSURATE WITH THE MARKET.

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

FORM 990, PART VI, SECTION C, LINE 19

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING

A COPY AT ITS PLACE OF BUSINESS. THE FORM 990 IS LIKEWISE PUBLISHED ON

THE INTERNET AT WWW.GUIDESTAR.ORG. THE AUDITED FINANCIAL STATEMENTS AND

FORM 990 ARE MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE. THE GOVERNING

DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT ORDINARILY MADE

AVAILABLE TO THE PUBLIC, BUT, IF REQUESTED, WILL BE PROVIDED AT

MANAGEMENT'S DISCRETION.

OTHER CHANGES IN NET ASSETS AND FUND BALANCES

FORM 990, PART XI, LINE 9

DECREASE IN VALUE OF CHARITABLE GIFT ANNUITY OBLIGATIONS \$ 532,961

.

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 UNDERTAKE RESEARCH AND ACTION FOCUSED ON PREVENTING AND

ENDING GRAVE ABUSES OF THESE RIGHTS.

Name of the organization $\mbox{AMNESTY INTERNATIONAL OF THE USA, INC.}$

Employer identification number 52-0851555

ATTACHMENT 2

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

CAMPAIGNS & MEMBERSHIP

THE CAMPAIGNS AND MEMBERSHIP PROGRAM DIVIDES ITS WORK INTO FIVE UNITS: 1) CAMPAIGNS, 2) PROGRAMS, 3) RESEARCH, 4) MEMBER LEADERSHIP & TRAINING, AND 5) ORGANIZING & ACTIVISM.

THE CAMPAIGNS AND MEMBERSHIP PROGRAM FOLLOWING VARIOUS THEORIES OF CHANGE CREATES STRATEGIES, PROJECT MANAGEMENT, ON-THE-GROUND MOBILIZATION, ACTIVIST TRAINING, CASE IDENTIFICATION, AND UNITED STATES-BASED RESEARCH INITIATIVES IN PURSUIT OF THE END GOAL TO EFFECT CHANGE ON THE FOLLOWING PROGRAMMATIC GOALS: 1) PROTECTING THE RIGHTS OF REFUGEES AND ASYLUM-SEEKERS, 2) PROTECTING HUMAN RIGHTS DEFENDERS, 3) RESPONDING TO URGENT HUMAN RIGHTS CRISES, 4) ABOLISHING THE DEATH PENALTY, 5) PURSUING POLICE ACCOUNTABILITY AND ENDING GUN VIOLENCE, 6) ENDING DISCRIMINATION BASED ON GENDER, SEXUALITY, AND IDENTITY, AND 7) ENDING HUMAN RIGHTS VIOLATIONS IN THE NAME OF NATIONAL SECURITY.

THE ORGANIZING & ACTIVISM UNIT CULTIVATES RELATIONSHIPS ON BEHALF OF AIUSA ACROSS ISSUES AND BORDERS THROUGHOUT THE HUMAN RIGHTS MOVEMENT AND BUILDS AIUSA'S PRESENCE IN LOCAL COMMUNITIES AND WITHIN COALITIONS. THE MEMBER LEADERSHIP & TRAINING UNIT BUILDS ORGANIZING CAPACITY BY TRAINING ON CORE COMPETENCIES AND FACILITATES AIUSA'S GRASSROOTS EFFORTS. AIUSA STAFF AND MEMBERS ADVOCATE FOR WORLDWIDE HUMAN RIGHTS ISSUES TO U.S. GOVERNMENT OFFICIALS AND FOREIGN AMBASSADORS. ACTIVISTS PARTICIPATE IN

Name of the organization

AMNESTY INTERNATIONAL OF THE USA, INC.

Employer identification number 52-0851555

ATTACHMENT 2 (CONT'D)

LOBBYING AND DEMONSTRATIONS, WHILE STAFF AND VOLUNTEER EXPERTS

TESTIFY BEFORE KEY STAKEHOLDERS TO ENSURE THAT THESE IMPORTANT

ISSUES ARE BROUGHT TO LIGHT. VOLUNTEER 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 2017 SOME OF OUR ACCOMPLISHMENTS INCLUDE HAVING 15 PRO-REFUGEE RESOLUTIONS PASSED IN CITIES, STATES, AND SCHOOLS ACROSS THE UNITED STATES. AIUSA HELPED TO SECURE THE RELEASE OF FOUR CHILDREN AND THEIR MOTHERS FROM THE BERKS DETENTION CENTER IN PENNSYLVANIA AFTER BEING HELD FOR NEARLY 700 DAYS. ANTI-PROTEST BILLS, WHICH THREATENED HUMAN RIGHTS DEFENDERS, WERE DEFEATED IN SIX STATES, PARTLY AS A RESULT OF AIUSA'S MOBILIZATION AND ADVOCACY EFFORTS. IN 2017, 11 DEATH-PENALTY EXECUTIONS ON WHICH AIUSA CAMPAIGNED WERE STOPPED. AIUSA HELPED TO SECURE THE RELEASE OF 82 PRISONERS OF CONSCIENCE IN 2017 AND HELPED SECURE OTHER FAVORABLE RESULTS ON THE CASES OF 175 INDIVIDUALS AT RISK.

Name of the organization $\mbox{AMNESTY INTERNATIONAL OF THE USA, INC.}$

Employer identification number 52-0851555

ATTACHMENT 3

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

PUBLIC AFFAIRS

THE PURPOSE OF THIS PROGRAM AREA IS TO SHAPE PUBLIC OPINION BY TELLING AIUSA'S STORY, DEVELOPING RELATIONSHIPS, AND LEVERAGING THOSE RELATIONSHIPS TO CREATE MEASURABLE HUMAN RIGHTS IMPACT. THE PUBLIC AFFAIRS GROUP WORKS CLOSELY WITH THE CAMPAIGNS & MEMBERSHIP PROGRAM TO IDENTIFY KEY MOMENTS FOR PUBLIC ENGAGEMENT. THE PUBLIC AFFAIRS PROGRAM SEGMENTS ITS WORK INTO SIX AREAS: 1) MEDIA RELATIONS, 2) DIGITAL OR ONLINE ENGAGEMENT, 3) EVENTS, 4) ARTIST RELATIONS, 5) TECHNOLOGY, AND 6) GOVERNMENT RELATIONS. 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 MEDIA RELATIONS UNIT'S EFFORTS SECURED PLACEMENTS IN TOP OUTLETS SUCH AS TIME, USA TODAY, THE HILL, CNN, AND NY DAILY NEWS. THE EVENTS UNIT PLANS AND EXECUTES FIVE REGIONAL CONFERENCES, AIUSA'S ANNUAL GENERAL MEETING, AND OTHER CONVENINGS TO EDUCATE, MOBILIZE, AND PROVIDE RESOURCES TO AIUSA MEMBERS AND ACTIVISTS. THE DIGITAL UNIT MANAGES ONLINE ASSETS SUCH AS SOCIAL MEDIA PAGES, CONTENT CREATION, ONLINE ADVOCACY, AND ONLINE FUNDRAISING, AND IN 2017 LAUNCHED AN INNOVATIVE SMS TEXT MESSAGING PROGRAM TO EMPOWER INDIVIDUALS TO TAKE MEANINGFUL GRASSROOTS ADVOCACY ACTIONS ON AMNESTY'S PROGRAMMATIC ISSUES. AMNESTY ACTIVISTS TOOK PART IN 874,316 ONLINE ACTIONS IN 2017. THE ARTIST RELATIONS UNIT CULTIVATES RELATIONSHIPS WITH ARTISTS, CELEBRITIES, AND ENTERTAINMENT

Name of the organization $\mbox{AMNESTY INTERNATIONAL OF THE USA, INC.}$

Employer identification number 52-0851555

ATTACHMENT 3 (CONT'D)

INDUSTRY PROFESSIONALS IN ORDER TO ADVANCE AIUSA'S PROGRAMMATIC
GOALS AND TO INCREASE AIUSA'S VISIBILITY. IN 2017 THE FLAGSHIP
PROGRAM FOR THIS UNIT WAS THE "GIVE A HOME CONCERT SERIES"
PRODUCING 103 CONCERTS WITH OVER 300 ARTISTS SUPPORTING HUMAN
RIGHTS. THE TECHNOLOGY UNIT MANAGES DIGITAL TECHNOLOGY TOOLS AND
AIUSA'S WEBSITE.

FORM 990, PART III - PROGRAM SERVICE, LINE 4D ADVOCACY & STRATEGIC INITIATIVES THE ADVOCACY AND STRATEGIC INITIATIVES PROGRAM INCLUDES 1) THE OFFICE OF THE EXECUTIVE DIRECTOR, 2) STRATEGY AND GOVERNANCE, AND 3) GOVERNMENT RELATIONS. THE OFFICE OF THE EXECUTIVE DIRECTOR IS TASKED BY THE BOARD OF DIRECTORS WITH ADVANCING THE VISION AND MISSION OF THE ORGANIZATION, MANAGING THE ORGANIZATION'S DAY-TO-DAY OPERATIONS AND ACTIVITIES, SERVING AS THE LEAD SPOKESPERSON FOR THE ORGANIZATION, AND ENSURING THE ORGANIZATION'S FINANCIAL HEALTH. THE STRATEGY AND GOVERNANCE UNIT CENTRALIZES ALIGNMENT BETWEEN THE STRATEGIES AND THE POLICIES OF THE INTERNATIONAL PROGRAM AND AMNESTY INTERNATIONAL USA'S OTHER PROGRAMS, AND OVERSEES MONITORING AND EVALUATION OF HUMAN RIGHTS IMPACT. THE GOVERNMENT RELATIONS UNIT OWNS COMMUNICATION WITH UNITED STATES GOVERNMENT OFFICIALS AND PROVIDES EXPERT TESTIMONY ON REGIONAL HUMAN RIGHTS ISSUES IN CONGRESSIONAL BRIEFINGS AND HEARINGS.

Name of the organization	Employer identification number
AMNESTY INTERNATIONAL OF THE USA, INC.	52-0851555
	ATTACHMENT 4

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

DESCRIPTION		GRANTS	EXPENSES	REVENUE
ADVOCACY & STRATEGIC INITIATIVES		56,742.	4,321,331.	0.
	TOTALS	56,742.	4,321,331.	0.

ATTACHMENT 5

FORM 990, PART VI, LINE 17 - STATES

 ${\tt AL}$, ${\tt AK}$, ${\tt AZ}$, ${\tt AR}$, ${\tt CA}$, ${\tt CO}$, ${\tt CT}$, ${\tt DE}$,

FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI,

 ${\tt MN}$, ${\tt MS}$, ${\tt MO}$, ${\tt MT}$, ${\tt NE}$, ${\tt NV}$, ${\tt NH}$, ${\tt NJ}$, ${\tt NM}$, ${\tt NY}$, ${\tt NC}$, ${\tt ND}$, ${\tt OH}$, ${\tt OK}$, ${\tt OR}$, ${\tt PA}$,

RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

ATTACHMENT 6

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
AB DATA 600 AB DATA DRIVE MILWAUKEE, WI 53217	PROF. FUNDRAISER	390,000.
ROI SOLUTIONS, INC. 1 ALEWIFE CENTER #220 CAMBRIDGE, MA 02140	DATABASE MGMT. SVC.	301,860.
MERKLE RESPONSE SERVICES, INC. 100 JAMISON COURT HAGERSTOWN, MD 21740	LOCKBOX SERVICES	263,034.
THE OUTREACH TEAM LLC 407 COLLEGE AVENUE, SUITE 349 ITHACA, NY 14850	PROF. FUNDRAISER	258,415.
1-TEAM TECHNOLOGY ASSOCIATES, LLC. 147 W. 26TH STREET NEW YORK, NY 10001	IT SERVICES	180,884.

JSA 7E1228 1.000

7256MC 700J V 17-5.2F 0195515-00003 PAGE 56