990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2013

Open to Public

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public.

Internal Revenue Service Inspection ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2013 calendar year, or tax year beginning 07/01 2013, and ending 06/30 20 14 C Name of organization AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SC D Employer identification number В Check if applicable: Address change Doing Business As 13-1623886 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Initial return 633 3RD AVENUE 20TH FLOOR 212-895-7900 City or town, state or province, country, and ZIP or foreign postal code Terminated NEW YORK, NY, 10017 G Gross receipts \$ 125 989 000 Amended return Application pending F Name and address of principal officer: MARSHALL LEVIN H(a) Is this a group return for subordinates? Yes No 633 THIRD AVENUE 20TH FL, NEW YORK, NY 10017 **H(b)** Are all subordinates included? Yes No If "No," attach a list. (see instructions) 501(c)(3) 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or Tax-exempt status: Website: ▶ WWW.WEIZMANN-USA.ORG **H(c)** Group exemption number ▶ Form of organization: Corporation Trust Association L Year of formation: M State of legal domicile: NY Part I 1 Briefly describe the organization's mission or most significant activities: THE AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE ORCHESTRATES SUPPORT IN THE UNITED STATES FOR THE VIBRANT Activities & Governance WORLD-RENOWNED SCIENTIFIC RESEARCH CENTER AND GRADUATE UNIVERSITY IN ISRAEL. 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 126 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 126 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 76 6 6 Total number of volunteers (estimate if necessary) 40 Total unrelated business revenue from Part VIII, column (C), line 12 7a -131,000 Net unrelated business taxable income from Form 990-T, line 34 7b -167,000 **Current Year** 8 Contributions and grants (Part VIII, line 1h) 58,566,000 73,987,000 Revenue 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 13.051.000 24,865,000 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . -194,000 -26,000 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 71,423,000 98.826.000 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 56,040,000 58,923,000 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 8,968,000 8,530,000 Professional fundraising fees (Part IX, column (A), line 11e) 16a 93,000 78,000 Total fundraising expenses (Part IX, column (D), line 25) ► 11,268,000 b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 6,915,000 7,290,000 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 72,016,000 74,821,000 19 Revenue less expenses. Subtract line 18 from line 12 24,005,000 -593,000 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 629,438,000 702,306,000 21 Total liabilities (Part X, line 26) . 26.811.000 26,892,000 22 Net assets or fund balances. Subtract line 21 from line 20 602,627,000 675,414,000 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here Michele Willner, CFO and Senior Vice President Type or print name and title Print/Type preparer's name Date Preparer's signature **Paid** Check if self-employed **Preparer** Firm's EIN ▶ Firm's name **Use Only** May the IRS discuss this return with the preparer shown above? (see instructions) . Yes No

Part	·
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO RAISE FUNDS TO TRANSMIT TO THE WEIZMANN INSTITUTE OF SCIENCE A WORLD RENOWNED SCIENTIFIC
	RESEARCH CENTER. BASIC RESEARCH BY WEIZMANN INSTITUTE SCIENTISTS BENEFITS PEOPLE EVERYWHERE,
	NOTABLY IN THE FIGHT AGAINST DISEASE AND HUNGER, PROTECTION OF THE ENVIRONMENT AND DEVELOPMENT OF
	NEW TECHNOLOGIES FOR ECONOMIC GROWTH.
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 \$ 51,558,000 including grants of \$ 51,457,000) (Revenue \$ 0)
··u	FUNDS WERE TRANSMITTED TO THE WEIZMANN INSTITUTE OF SCIENCE A WORLD RENOWNED SCIENTIFIC RESEARCH
	CENTER. BASIC RESEARCH BY WEIZMANN SCIENTISTS BENEFITS PEOPLE EVERYWHERE, NOTABLY IN THE FIGHT
	AGAINST DISEASE AND HUNGER, PROTECTION OF THE ENVIRONMENT AND DEVELOPMENT OF NEW TECHNOLOGIES
	FOR ECONOMIC GROWTH.
4b	(Code:) (Expenses \$ 7,466,000 including grants of \$ 7,466,000) (Revenue \$ 0)
	FUNDS WERE TRANSMITTED TO THE FEINBERG GRADUATE SCHOOL AT THE WEIZMANN INSTITUTE OF SCIENCE FOR
	SCIENTIFIC AND EDUCATIONAL PURPOSES. THE FEINBERG GRADUATE SCHOOL'S PURPOSE IS TO CONDUCT,
	OPERATE AND MAINTAIN A GRADUATE SCHOOL FOR THE STUDY OF NATURAL SCIENCES AND MATHEMATICS.
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4 -1	Other and average and item (Describes in Calculute O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
40	
4e	Total program service expenses ► 59,024,000

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			
9	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	V	+
2 3	Did the organization required to complete <i>scriedule b</i> , <i>scriedule of Contributors</i> (see instructions)?			+
	candidates for public office? If "Yes," complete Schedule C, Part I	3		~
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	~	
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,	_		~
6		5		+
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		~
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>		١.	
•	complete Schedule D, Part III	8	~	+
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		~
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	~	$oxed{oxed}$
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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а	complete Schedule D, Part VI	11a	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	114		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	~	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		~
_	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	~	-
f	the organization's separate of consolidated infancial statements for the tax year include a roomote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f	~	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	-	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14 a		14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	~	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	~	L
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		,
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	~	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	~	-
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		_
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

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Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 22			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	~	
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 76			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	~	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	~	
b	If "Yes," enter the name of the foreign country: ► Germany, Israel See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	~	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	1	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
•	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any tayable distributions under section 49662	00		
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		-
10	Did the organization make a distribution to a donor, donor advisor, or related person?	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			

Gross income from other sources (Do not net amounts due or paid to other sources

If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . .

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

Did the organization receive any payments for indoor tanning services during the tax year?

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

Is the organization licensed to issue qualified health plans in more than one state?

the organization is licensed to issue qualified health plans

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

12a

13

12a

13a

14a

11b

13b

13c

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 126 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. Enter the number of voting members included in line 1a, above, who are independent 1b 126 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ~ 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," ~ 12c 13 13 ~ 14 1 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 1 15a 15b 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 arrangement 16a / b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 See Schedule O, Statement 1 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: ► MICHELE WILLNER, (212)895-7900

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

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

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

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

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

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

Don Aaron Don										
(A)	(B)	(-1	4 1					(D)	(E)	(F)
Name and Title		`								
							tee)	'		l .
		or o	Ins	읔	<u>F</u>	em Hig	For			
		direc	titut	icer	/ em	hest	mer			
		ot all t	iona		blog	ee cor		(W-2/1099-MISC)		
		rust	<u>t</u>		yee	npe				
		ee	stee			nsat				
			_			ed				
Richard Aarenau	0.2			•						
		~						0	0	0
Jon Aaron	0.2									
Board Member	0	~						0	0	0
Gary M Abramson	0.2									
Board Member	0	~						0	0	0
Pennie Abramson	0.7									
President- through 10/23/2013	0	~		~				0	0	0
Donald Altman	0.2									
Board Member	0	~						0	0	0
Steven Anixter	0.4									
Board Member	0	~						0	0	0
Sally Leafman Appelbaum	0.2									
Board Member	0	~						0	0	0
Robert H Asher	0.2									
Board Member	0	~						0	0	0
Robert Belfer	0.2									
Board Member	0	~						0	0	0
Marshall Bennett	0.2									
Board Member	0	~						0	0	0
Paul A Berkman	0.5									
Board Member	0	~						0	0	0
Howard B Bernick	0.2									
Board Member	0	~						0	0	0
Naomi Birnbach	0.2]								
Board Member	0	~						0	0	0
Lawrence S Blumberg	0.4									
Board Member	0	~						0	0	0

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

				(C)					
(A)	(B)	(-1	-4 -1		sition	. 41		(D)	(E)	(F)
Name and Title	Average					e than o is both		Reportable	Reportable	Estimated
	hours per week (list any					or/trust	tee)	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	Key	Hig	Former	the	organizations	compensation
	related organizations	vidu	i tr	Cer	em	nest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	tor tr	Institutional trustee		Key employee	con		(**-2/1099-141100)		and related
	line)	uste	trus		ee	pen				organizations
		Ď	tee			Highest compensated employee				
Penny Blumenstein	0.2					1				
Board Member	0	~						0	0	0
Victor Chaltiel	0.2									
Board Member	0	~						0	0	0
Harold Chefitz	0.2									
Board Member	0	~						0	0	0
Brent Cohen	0.2									
Board Member	0	~						0	0	0
Judith Cohen	0.2									
Board Member	0	~						0	0	0
Lester Crown	0.2									
Board Member	0	~						0	0	0
Karen Davidson	0.2									
Board Member	0	~						0	0	0
Russell Dekker	0.4									
Board Member	0	~						0	0	0
Joyce Eisenberg Keefer	0.2									
Board Member	0	~						0	0	0
Marshall S Ezralow	0.2									
Board Member	0	~						0	0	0
Samuel Ekstein	0.4									
Board Member	0	~						0	0	0
David Fairweather	0.2									
Board Member	0	~						0	0	0
Jane Fairweather	0.4									
Board Member	0	~						0	0	0
Lori A Feinberg Kany	0.2									
Board Member	0	~						0	0	0 Form 990 (2013)

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

				(0	C)					
(A)	(B)	(da m			ition			(D)	(E)	(F)
Name and Title	Average					than on the second is the second in the seco		Reportable	Reportable	Estimated
	hours per week (list any					or/trust	tee)	compensation from	compensation from related	amount of other
	hours for	or c	Inst	Officer	ξ _e	Hig	Former	the	organizations	compensation
	related organizations	vidu	i ti	cer	em	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted		Institutional trustee		Key employee	con		(**-2/1099-141100)		and related
	line)	uste	trus		ée	per				organizations
		Ď	tee			Highest compensated employee				
						<u> </u>				
Daniel Feldman	0.2									
Board Member	0	~						0	0	0
Janice Feinberg	0.2									
Board Member	0	~						0	0	0
Robert Ferguson	0.2									
Board Member	0	~						0	0	0
Alan A Fischer	0.2									
Board Member	0	~						0	0	0
Laura Flug	0.2									
Board Member	0	~						0	0	0
Michael Forman	0.2									
Board Member	0	~						0	0	0
Sonya Friedman	0.4									
Board Member	0	~						0	0	0
Peter Friedman	0.2									
Board Member	0	~						0	0	0
Paul Gardner	0.5									
Vice Chair Financial Resource Development	0	~		~				0	0	0
Peter Gelbwaks	0.4									
Board Member	0	~						0	0	0
David Geller	0.2									
Board Member	0	~						0	0	0
Bram Goldsmith	0.2									
Board Member	0	~						0	0	0
Scott David Greenberg	0.2									
Board Member	0	~						0	0	0
Meyer Grodetsky	0.2									
Board Member	0	~						0	0	0 Form 990 (2013)

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

				(0	C)					
(A)	(B)	(-1	-4 -1		ition	. 41		(D)	(E)	(F)
Name and Title	Average					e than o is both		Reportable	Reportable	Estimated
	hours per week (list any					or/trust	tee)	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	ξ _e	Hig	Former	the	organizations	compensation
	related organizations	vidu	it it	cer	em	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	tor tr	Institutional trustee		Key employee	con		(**-2/1099-141100)		and related
	line)	uste	trus		ee e	per				organizations
		ď	stee			Highest compensated employee				
						0.				
Akiva Gross	0.2			,				•		
Board Member	0	~						0	0	0
Patricia Gruber	0.7									
Secretary	0	~		~				0	0	0
Paul Guerin	0.2									
Board Member	0	~						0	0	0
Vera Guerin	0.2									
Board Member	0	~						0	0	0
Phyllis Gurwin	0.2									
Board Member	0	~						0	0	0
David Haas	0.2									
Board Member	0	~						0	0	0
Harold Haftel	0.2									
Board Member	0	~						0	0	0
Linda Hayman	0.2									
Board Member	0	~						0	0	0
Daniel Hirsch	0.2									
Board Member	0	~						0	0	0
Yossie Hollander	0.2									
Board Member	0	~						0	0	0
Arlyn Imberman	0.2									
Board Member	0	~						0	0	0
Nancy Jacobson	0.2									
Board Member	0	~						0	0	0
Jon Kaufman	0.2									
Board Member	0	1						0	0	0
Gershon Kekst	0.2									
Board Member	0	1						0	0	0
										Form 990 (2013)

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

				(0	C)					
(A)	(B)	/da m	a+ ab		ition	. 46.00		(D)	(E)	(F)
Name and Title	Average		not check more than one unless person is both an					Reportable	Reportable	Estimated
	hours per week (list any			dad		or/trust	tee)	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	Key	High	Former	the	organizations	compensation
	related organizations	vidu	ituti	cer	em	nest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	tor	Institutional trustee		Key employee	com		(** 27 1000 101100)		and related
	line)	uste	trus		ee	lpen				organizations
		Ф	tee			Highest compensated employee				
Donald Kirk	0.2									
Board Member	0	~						0	0	0
Harvey Knell	0.2									
Board Member	0	~						0	0	0
Bernard Koff	0.2									
Board Member	0	~						0	0	0
Richard Laster	0.2									
Board Member	0	~						0	0	0
Arnold Leibowitz	0.2									
Board Member	0	~						0	0	0
Tova Leidesdorf	0.2									
Board Member	0	~						0	0	0
Jay Levy	0.7									
President- as of 10/23/13	0	~		~				0	0	0
Richard Lipkin	0.4									
Board Member	0	~						0	0	0
Robert B Machinist	0.4									
Chairman Emeritus	0	~						0	0	0
Rhoda R Mancher	0.2									
Board Member	0	~						0	0	0
Larry Marks	0.4									
Board Member	0	~						0	0	0
Ellen Merlo	0.7									
National Chair	0	~		~				0	0	0
Ira Millman	0.2									
Board Member	0	~						0	0	0
Ira Mondry	0.5									
Vice Chair	0	~		~				0	0	0

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

				(0	C)					
(A)	(B)	(da m			ition	. 46.00		(D)	(E)	(F)
Name and Title	Average					e than o is both		Reportable	Reportable	Estimated
	hours per week (list any		er and		lirect	or/trust		compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	Key	High	Former	the	organizations	compensation
	related organizations	vidu	Institutional trustee	er	Key employee	nest	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	al tr	onal		ploy	com		(11 27 1000 111100)		and related
	line)	uste	trus		ee	ipen				organizations
		Φ	tee			Highest compensated employee				
						<u> </u>				
Gladys Monroy	0.4									
Board Member	0	~						0	0	0
David S Moross	0.2									
Board Member	0	~						0	0	0
Andrew R Morse	0.7									
Vice Chair Finance and Administration	0	~		~				0	0	0
Lon Morton	0.4									
Board Member	0	~						0	0	0
Ilene Nathan	0.2									
Board Member	0	~						0	0	0
Jeff Nathan	0.2									
Board Member	0	~						0	0	0
Charles Noparstak	0.4									
Board Member	0	~						0	0	0
Gil Omenn	0.2									
Board Member	0	~						0	0	0
Marc J Oppenheimer	0.2									
Board Member	0	~						0	0	0
Rosalind Perlmutter	0.2									
Board Member	0	~						0	0	0
Bruce Pollack	0.2									
Board Member	0	~						0	0	0
Deborah Ratner Salzberg	0.2									
Board Member	0	~						0	0	0
Steven Romick	0.2									
Board Member	0	~						0	0	0
Beth N Rom-Rymer	0.4									
Board Member	0	~						0	0	0 Form 990 (2013)

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

				(0	C)					
(A)	(B)	(da m			ition	. 46.00		(D)	(E)	(F)
Name and Title	Average					e than o is both		Reportable	Reportable	Estimated
	hours per week (list any					or/trust	tee)	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	ξ _e	Hig	Former	the	organizations	compensation
	related organizations	vidu	i ti	cer	em	nest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	tor tr	Institutional trustee		Key employee	con		(**-2/1099-141100)		and related
	line)	uste	trus		ee	lpen				organizations
		Ф	tee			Highest compensated employee				
Sheldon Roth	0.2							•		
Board Member	0	~						0	0	0
Tom Rykoff	0.2									
Board Member	0	~						0	0	0
Marla Schaefer	0.2									
Board Member	0	~						0	0	0
Sara Schupf	0.2									
Board Member	0	~						0	0	0
Donald L Schwarz	0.2									
Board Member	0	~						0	0	0
John Schwartz	0.2									
Board Member	0	~						0	0	0
Fela Shapell	0.2									
Board Member	0	~						0	0	0
David Shapell	0.2									
Board Member	0	~						0	0	0
Merry Sherman	0.2									
Board Member	0	~						0	0	0
Frederick Simmons	0.2									
Board Member	0	~						0	0	0
Jonathan Sohnis	0.2									
Board Member	0	~						0	0	0
Coco Soodek	0.2									
Board Member	0	~						0	0	0
Maury L Spanier	0.2									
Board Member	0	~						0	0	0
Gregg M Steinberg	0.2									
Board Member	0	~						0	0	0 Form 990 (2013)

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

		(C)								
(A)	(B)	(da m			sition	. +6.00		(D)	(E)	(F)
Name and Title	Average					e than o is both		Reportable	Reportable	Estimated
	hours per week (list any	office	er and	_	lirect	or/trust		compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	Key	High	Former	the	organizations	compensation
	related organizations	vidu	Institutional trustee	er	Key employee	nest	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	al tr	onal		ploy	com		(11 27 1000 111100)		and related
	line)	uste	trus		ee	lpen				organizations
		0	tee			Highest compensated employee				
						0				
Raymon Sterman	0.2									
Board Member	0	~						0	0	0
Menachem Sternberg	0.2									
Board Member	0	~						0	0	0
Rick Stone	0.2									
Board Member	0	~						0	0	0
Stephen L Stulman	0.2									
Board Member	0	~						0	0	0
Leah Susskind	0.2									
Board Member	0	~						0	0	0
Daniel Sussman	0.2									
Board Member	0	~						0	0	0
David Teplow	0.2									
Board Member	0	~						0	0	0
Theodore Teplow	0.6									
Board Member	0	~						0	0	0
Antonio Villalon	0.2									
Board Member	0	~						0	0	0
Saul Waring	0.4									
Board Member	0	~						0	0	0
Edna Weiss	0.2									
Board Member	0	~						0	0	0
Edna Weissman	0.2									
Board Member	0	~						0	0	0
William Weksel	0.2									
Board Member	0	1						0	0	0
David C Wiener	0.2									
Board Member	0	~						0	0	0 Form 990 (2013)

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

				(0	C)					
(A)	(B)	(-1	4		ition	. 41		(D)	(E)	(F)
Name and Title	Average					e than o is both		Reportable	Reportable	Estimated
	hours per week (list any					or/trust	tee)	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	ξ _e	Hig	Former	the	organizations	compensation
	related organizations	vidu	i ti	cer	em	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	tor tr	Institutional trustee		Key employee	con		(00-2/1099-10130)		and related
	line)) ate	tru		ee	hper				organizations
		ď	stee			Highest compensated employee				
Norman Weizenbaum	0.4									
Board Member	0	~						0	0	0
Adam Wolfensohn	0.2									
Board Member	0	~						0	0	0
Elaine Wolfensohn	0.2									
Board Member	0	~						0	0	0
Stanley R Zimmerman	0.2									
Board Member	0	~						0	0	0
Lois Zoller	0.2									
Board Member	0	~						0	0	0
Matthew Landau	0.2									
Board Member	0	~						0	0	0
David Stone	0.2									
Board Member	0	~						0	0	0
Dennis Weiss	0.2									
Board Member	0	~						0	0	0
Fredda Weiss	0.2									
Board Member	0	~						0	0	0
Mark Alexander	0.2									
Board Member	0	~						0	0	0
Jonathan Birnbach	0.2									
Board member	0	~						0	0	0
Melvin Dick	0.2									
Board Member	0	~						0	0	0
Marilyn Perlman	0.2									
Board Member	0	~						0	0	0
RICHARD PERRY	0.2									
BOARD MEMBER- THROUGH 3/3/14	0	~				<u> </u>		0	0	0 Form 990 (2013)

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

				((C)					
(A)	(B)	,.			ition			(D)	(E)	(F)
Name and Title	Average					e than c is both		Reportable	Reportable	Estimated
	hours per week (list any					or/trust	ee)	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Inst	Officer	Κey	High	Former	the	organizations	compensation
	related organizations	vidu	Institutional trustee	cer	Key employee	nest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	al tr	onal		ploy	e com		(** 2) 1000 141100)		and related
	line)	uste	trus		8	pen				organizations
		Φ	tee			Highest compensated employee				
ROY ZUCKERBERG	0.2									
BOARD MEMBER- THROUGH 3/28/14	0	~						0	0	0
HELEN DILLER	0.2									
BOARD MEMBER- THROUGH 10/1/13	0	~						0	0	0
MARK HANKIN	0.2									
BOARD MEMBER- THROUGH 10/1/2013	0	~						0	0	0
DR BESSIE LAWRENCE	0.2									
BOARD MEMBER- THROUGH 9/7/13	0	~						0	0	0
BEVERLY MUTCHNIK	0.2									
BOARD MEMBER- THROUGH 10/1/13	0	~						0	0	0
IRENE ROSENBLUM	0.2									
BOARD MEMBER- THROUGH 10/1/13	0	~						0	0	0
MARLA BERGMANN	0.2									
BOARD MEMBER	0	~						0	0	0
CINDY ANDERSON	0.2									
BOARD MEMBER- THROUGH 1/1/14	0	~						0	0	0
ALEJANDRO ZAFFARANI	0.2									
BOARD MEMBER- THROUGH 3/1/14	0	~						0	0	0
LIZ JAFFE	0.2									
BOARD MEMBER- THROUGH 10/24/13	0	~						0	0	0
IRVING WEISSMAN	0.2									
BOARD MEMBER- THROUGH 10/1/13	0	~						0	0	0
MARSHALL LEVIN	35									
EXECUTIVE VICE PRESIDENTAND CEO	0			~				479,524	0	69,010
MARK FELDMAN	35									
SENIOR VICE PRESIDENT 0				~				301,265	0	58,591
BONNIE DIAMOND	35									
SENIOR VICE PRESIDENT	0			~				235,466	0	54,151

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

		(C)								
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
	hours per	office				or/trust	tee)	compensation	compensation from	amount of other
	week (list any hours for	or c	Inst	Officer	Ke)	Hig	Former	the	related organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	cer	Key employee	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	tor tr	onal		ploy	com		(W-2/1099-WIGO)		and related
	line)	uste	trus		ée	lpen				organizations
		ď	stee			Highest compensated employee				
						<u> </u>				
MICHELE WILLNER	35									
CHIEF FINANCIAL OFFICER	0			~				204,339	0	20,401
STEVEN MEYERS	35									
VICE PRESIDENT	0				~			245,844	0	44,962
LEE BROWN	35									
REGIONAL DIRECTOR	0				~			238,133	0	53,391
JANIS RABIN	35									
REGIONAL DIRECTOR	0				~			253,995	0	32,682
JEFFREY SUSSMAN	35									
VICE PRESIDENT	0				~			233,564	0	30,635
HERMAN NEIDITCH	35									
VICE PRESIDENT	0				~			190,445	0	22,084
RICHARD ENSLEIN	35									
REGIONAL DIRECTOR	0					~		197,650	0	27,435
ELAINE YANIV	35									
REGIONAL DIRECTOR	0					~		183,505	0	25,933
ELLEN HOFSTATTER	35									
VICE PRESIDENT	0					~		185,687	0	26,306
STACY SULMAN	35									
VICE PRESIDENT	0					~		182,583	0	46,825
DAPHNA RUBY	35									
REGIONAL DIRECTOR	0					~		172,564	0	25,626
HAROLD ADLER	0									
FORMER SENIOR VICE PRESIDENT	0						~	190,889	0	503
JAY LEIPZIG	0									
FORMER VICE PRESIDENT	0						~	55,131	0	0
HENRY PAVONY	0									
FORMER CFO	0					1	V	172,172	0	0

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C)													
	(A)	(B)	(da 10	a		ition			(D)	(E)			(F)	
	Name and title	Average					than on the stantage of the st		Reportable	Reportable	le		nated	
		hours per					or/trust		compensation	compensation		amo	unt of	
		week (list any	악	5	Q	ž	역 표	Ξ	from	related			ther	. n
		hours for related	di√i	stitu	Officer	e e	ghe	Former	the organization	organizatio (W-2/1099-M		comp	n the	ווע
		organizations	dua ectc	Ition	–	Key employee	st c	e	(W-2/1099-MISC)	`	<i>,</i>	orgar	nizatio	
		below dotted	I tru	า <u>al</u> t		loye	<u></u>						related	
		line)	Individual trustee or director	Institutional trustee		Ď	Dens					organ	ization	15
			U	iee			Highest compensated employee							
							۵				-+			
											$-\!\!+\!\!$			
											$-\!\!+\!\!$			
-														
-														
-														
		 												
		 												
											-+			
											-+			
											$-\!\!+\!\!$			
1b	Sub-total			٠			•	•	3,722,756		0		53	8,535
С	Total from continuation sheets to Part	VII, Sectio	n A				•	•			-			
d								<u> </u>	3,722,756		0		53	8,535
2	Total number of individuals (including but	t not limited	I to th	ose	list	ted a	above	e) w	ho received mo	ore than \$10	00,000	of		
	reportable compensation from the organi	ization ► 2:	2											
													Yes	No
3	Did the organization list any former of							emp	oloyee, or high	est compe	nsated			
	employee on line 1a? If "Yes," complete s	Schedule J	for su	ıch	indi	ividu	ıal					3	~	
4	For any individual listed on line 1a, is the	sum of rep	oortal	ole (con	nper	nsatio	n a	nd other comp	ensation fro	om the			
	organization and related organizations	greater that	an \$1	150,	000)? <i>I</i> :	f "Ye	s, "	complete Sch	edule J fo	r such			
	individual											4	~	
5	Did any person listed on line 1a receive of	or accrue co	mpei	nsat	tion	fror	n any	un un	related organiz	ation or ind	dividual			
	for services rendered to the organization											5		~
Section	on B. Independent Contractors	<u> </u>							•					
1	Complete this table for your five highest	compansati	ed inc	dana	and		contr	acto	ore that receive	d more tha	n \$100	000 of		
•	compensation from the organization. Rep													ay
	year.	ort compo	isatic	,,,,,) LI	10 0	aiciia	iai y	car criaing wit	or within	ine orga	arnzatio	/11 J L	ux
	•											(0)		
	(A) Name and business add	Iress							(B) Description of se	ervices	C	(C) Compens	ation	
												, , , , , , , , , , , , , , , , , , ,		
	ADVERTISING, 105 ANN STREET, NEWBURG								VERTISING ANI	O MAILINGS				9,682
	AN ROTH INC, 801 SECOND AVE, NEW YOR								VERTISING					4,635
10 TE	CHNOLOGY CORP, 817 BROADWAY, NEW Y	YORK, NY 10	0003					WE	BSITE DESIGN				20	7,500
SAND	HURST ASSOCIATES, SANDHURST ASSOC	IATES, 299 F	PARK	AVI	Ε, Ν	EW	YORK	MA	INTENANCE SE	RVICES			15	6,114
BLAC	KBAUD, 2000 DANIEL ISLAND DRIVE, CHAR							COMPUTER CONSULTING				175,674		
2	Total number of independent contractor		-					th	ose listed abo	ove) who				
	received more than \$100,000 of compens	sation from	the o	raar	าเวล	tion			11					

Form 990 (2	013)
Part VI	Statement of Revenue
	Check if Schedule O contains a response or note to any line in this Part VIII

		Check if Schedule O	contains a	a resp	onse or note to	any line in this	Part VIII		🗀
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns		1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	0				
s, G	С	Fundraising events .		1c	220,000				
iifts ar /	d	Related organizations		1d	0				
s, G mil	е	Government grants (cont		1e	0				
ion r Si	f	All other contributions, gif	, ,						
but the		and similar amounts not incl	luded above	1f	73,767,000				
ntri d O	g	Noncash contributions include	ed in lines 1a-	-1f: \$	999,000				
Col	h	Total. Add lines 1a-1f			>	73,987,000			
ue					Business Code				
ven	2a								
Re	b								
ice	С								
Program Service Revenue	d								
E S	е								
gra	f	All other program serv							
Pro	g	Total. Add lines 2a-2f		'	▶	0			
	3	Investment income (i	including	divide	ends, interest,				
		and other similar amou	unts) .		•	7,849,000	0	-131,000	7,980,000
	4	Income from investment	of tax-exer	npt bo	ond proceeds ►	0	0	0	0
	5	Royalties			•	0	0	0	0
			(i) Real		(ii) Personal				
	6a	Gross rents							
	b	Less: rental expenses							
	С	Rental income or (loss)		0	0				
	d	Net rental income or (oss) .		🕨				
	7a	Gross amount from sales of	(i) Securiti	es	(ii) Other				
		assets other than inventory	43,78	1,000	0				
	b	Less: cost or other basis							
		and sales expenses .	26,76	5,000	0				
	С	Gain or (loss)	17,01	6,000	0				
	d	Net gain or (loss) .			▶	17,016,000	0	0	17,016,000
Other Revenue	b	Less: direct expenses	206,00 d on line 10	c). · a . b	372,000 398,000				
-		Net income or (loss) from			events . >	-26,000		0	-26,000
	9a	Gross income from gar							
				-	0				
		Less: direct expenses			0				
		Net income or (loss) from	•	-	vities ▶	0	0	0	0
	10a	Gross sales of inverturns and allowances							
	b	Less: cost of goods so							
	С	Net income or (loss) from		of inve					
		Miscellaneous Re	evenue		Business Code				
	11a								
	b								
	С								
	d	All other revenue .		.					
	е	Total. Add lines 11a-1			🟲	0			
	12	Total revenue. See in:	structions.		🕨	98,826,000	0	-131,000	24,970,000

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service **(D)** Fundraising Management and general expenses 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV. line 21 0 0 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . 0 0 3 Grants and other assistance to governments, organizations, and individuals outside the United States, See Part IV, lines 15 and 16. 58,923,000 58,923,000 Benefits paid to or for members O 5 Compensation of current officers, directors, trustees, and key employees 2,408,000 0 225,000 2,183,000 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . O 0 Other salaries and wages 7 4,455,000 48,000 3,197,000 1,210,000 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 610,000 19,000 126,000 465,000 Other employee benefits 9 630,000 7.000 130,000 493,000 10 Payroll taxes 3,000 427,000 105,000 319,000 11 Fees for services (non-employees): Management 115,000 0 115,000 64,000 0 70,000 6,000 122,000 0 122,000 0 d Lobbying 7,000 7,000 0 Professional fundraising services. See Part IV, line 17 78,000 78,000 Investment management fees f 0 1,866,000 1,866,000 0 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 824,000 0 0 824,000 12 Advertising and promotion 646,000 0 0 646,000 13 Office expenses 0 632,000 197,000 435,000 14 Information technology 15 Occupancy 16 1,151,000 0 294,000 857,000 17 245,000 15,000 11,000 219,000 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 49,000 0 0 49,000 20 16,000 0 0 16,000 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 486,000 6,000 123,000 357,000 23 90,000 90,000 O 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.) Science Programs 0 0 а 901,000 901,000 b C d All other expenses е 70,000 3,000 17,000 50,000 **Total functional expenses.** Add lines 1 through 24e 25 74.821.000 59.024.000 4.529.000 11,268,000 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here | if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response or	note	to any lii	ne in this Pa	rt X		🗆
		·				(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing				0	1	0
	2	Savings and temporary cash investments			[8,777,000	2	10,676,000
	3	Pledges and grants receivable, net				103,516,000	3	124,409,000
	4	Accounts receivable, net					4	
	5	Loans and other receivables from current and			′ 1			
		trustees, key employees, and highest co						
		Complete Part II of Schedule L			-		5	
	6	Loans and other receivables from other disqualified pers						
		4958(f)(1)), persons described in section 4958(c)(3)(B), are appropriate exemplations of section 501(c)(0), yellow						
		sponsoring organizations of section 501(c)(9) volun organizations (see instructions). Complete Part II of Sche					_	
ets	7						6 7	
Assets	7 8	Notes and loans receivable, net					8	
`	9	Prepaid expenses and deferred charges					9	
	10a	Land, buildings, and equipment: cost or	Ι					
		other basis. Complete Part VI of Schedule D	10a		11,246,000			
	b	Less: accumulated depreciation	10b		3,408,000	7,968,000	10c	7,838,000
	11					16,859,000		17,739,000
	12	Investments—other securities. See Part IV, line 1				489,656,000	12	538,811,000
	13	Investments-program-related. See Part IV, line	11 .				13	
	14	Intangible assets			[14	
	15	Other assets. See Part IV, line 11				2,662,000	15	2,833,000
	16	Total assets. Add lines 1 through 15 (must equa				629,438,000	16	702,306,000
	17	Accounts payable and accrued expenses		5,017,000	17	5,218,000		
	18	Grants payable			18			
	19	Deferred revenue			F		19	
	20	Tax-exempt bond liabilities			F	8,830,000	20	8,830,000
	21	Escrow or custodial account liability. Complete I			- t		21	
Liabilities	22	Loans and other payables to current and for trustees, key employees, highest compen						
bili		disqualified persons. Complete Part II of Schedu					22	
Lia	23	Secured mortgages and notes payable to unrela			+	227,000	23	227,000
	24	Unsecured notes and loans payable to unrelated		-		221,000	24	221,000
	25	Other liabilities (including federal income tax,		•				
		parties, and other liabilities not included on lines			I	12,737,000		12,617,000
		of Schedule D					25	
	26	Total liabilities. Add lines 17 through 25				26,811,000	26	26,892,000
s		Organizations that follow SFAS 117 (ASC 958)		ck here 🕨	► 🗹 and			
Ce		complete lines 27 through 29, and lines 33 and						
ılar	27	Unrestricted net assets			- t	-18,201,000	27	-8,843,000
Be	28	Temporarily restricted net assets				157,465,000		217,139,000
nr	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 95				463,363,000	29	467,118,000
гF		complete lines 30 through 34.	ю, сп	eck liele	allu			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds					30	
set	31	Paid-in or capital surplus, or land, building, or ed			- F		31	
As	32	Retained earnings, endowment, accumulated inc					32	
let	33	Total net assets or fund balances				602,627,000	33	675,414,000
_	34	Total liabilities and net assets/fund balances .			<u> </u>	629,438,000		702,306,000
								200

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9	8,826	5,000
2	Total expenses (must equal Part IX, column (A), line 25)	2		7	4,821	1,000
3	Revenue less expenses. Subtract line 2 from line 1	3		2	4,005	5,000
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		60	2,627	7,000
5	Net unrealized gains (losses) on investments	5		4	8,782	2,000
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		67	5,414	1,000
Part	XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piain	ın			
•						_
2a				а	_	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both:	ollea (or			
L.	Separate basis Consolidated basis Both consolidated and separate basis		. 2	L .	,	
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited.			D		
	separate basis, consolidated basis, or both:	u on	a			
	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 or	/ersial	nt			
C	of the audit, review, or compilation of its financial statements and selection of an independent account			c	,	
	If the organization changed either its oversight process or selection process during the tax year, ex					
	Schedule O.	ı				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	in			
	the Single Audit Act and OMB Circular A-133?		. з	а		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	rgo th		-		
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3	b		
			F	orm	990	(2013)

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.

2013

OMB No. 1545-0047

1 990 or Form 990-EZ. Open t

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

Name of the organization ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification

Employer identification number AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC 13-1623886 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II **c** Type III–Functionally integrated **d** Type III–Non-functionally integrated a Type I e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). h (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vii) Amount of monetary (vi) Is the organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col. support governing document? col. (i) of your (i) organized in the above or IRC section support? U.S.? (see instructions)) Yes Yes Nο Yes (A) (B) (C) (D) (E)

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total grants, contributions, 1 membership fees received. (Do not include any "unusual grants.") . . . 37,318,000 46,816,000 51,886,000 58,565,000 73,987,000 268.572.000 2 revenues levied organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 Total. Add lines 1 through 3. . . . 4 37,318,000 46,816,000 51,886,000 58,565,000 73.987.000 268.572.000 5 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 92,531,820 **Public support.** Subtract line 5 from line 4. 176,040,180 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total 7 Amounts from line 4 37,318,000 46,816,000 51,886,000 58,565,000 73.987.000 268,572,000 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 7.060.000 6,828,000 6,449,000 7,052,000 5.983.000 33,372,000 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 0 0 0 0 O 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 1.092.000 465,000 70,000 494,000 372,000 2,493,000 **Total support.** Add lines 7 through 10 11 304,437,000 Gross receipts from related activities, etc. (see instructions) 12 0 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f) 14 57.82 % Public support percentage from 2012 Schedule A, Part II, line 14 15 331/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this ~ 331/3% support test-2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

<u> </u>	if the organization rails to quality	under the te	ists listed beit	Jw, piease co	Jilipiele Fait	11.)	
	on A. Public Support		T				
	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	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						
7a	Amounts included on lines 1, 2, and 3						
	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						
8	Public support (Subtract line 7c from						
	line 6.)						
	on B. Total Support			T	1	Γ	
	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar sources .						
	•						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	•						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
	ų ,						
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,		-				
10	and 12.)						
14	First five years. If the Form 990 is for the	e organizatio	ı's first secon	l d third fourth	or fifth tax v	 	n 501(c)(3)
17	organization, check this box and stop he l	•					* , , ,
Secti	on C. Computation of Public Suppor						, _
15	Public support percentage for 2013 (line 8			3 column (f))		15	%
16	Public support percentage from 2012 Sch					16	
	on D. Computation of Investment Inc				<u></u>	1 . 5	70
17	Investment income percentage for 2013 (I			v line 13. colu	mn (f))	17	%
18	Investment income percentage from 2012			-		18	
19a	33 ¹ / ₃ % support tests—2013. If the organi						
	17 is not more than 33 ¹ /3%, check this box						
b	33 ¹ / ₃ % support tests—2012. If the organiz	_	=	-		=	_
~	line 18 is not more than 33 ¹ / ₃ %, check this b						
20	Private foundation. If the organization di		_		· · · · · ·		_

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Schedule A,	Part II, Line 10 - OTHER INCOME- IS INCOME DERIVED FROM SPECIAL FUNDRAISING EVENTS

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

2013

Open to Public Inspection

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.
 ► See separate instructions.
 ► Information about Schedule C (Form 990 or 990-EZ) and its

instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- 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," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

				, . a,	алу, шоп	
	ection 501(c)(4), (5), or (6) orga of organization	anizations: Complete Part III.		Employer ider	ntification number	
AMFR	ICAN COMMITTEE FOR THE	E WEIZMANN INSTITUTE OF SCIENC	EF INC		13-1623886	
Part		e organization is exempt und		c) or is a section 527 of		
1		the organization's direct and indire				
2	Political expenditures .			> \$	}	
3	Volunteer hours					
Part	<u>-</u>	e organization is exempt und		7		
1		excise tax incurred by the organiza			; 	
2		excise tax incurred by organization	•		; 	
3	•	ed a section 4955 tax, did it file For	•			No
4a					 Yes !	No
b Part	If "Yes," describe in Part	ıv. e organization is exempt und	or section 501/	c) except section 501	(0)(3)	
Taru 1		ly expended by the filing organiz			(6)(3).	
•				•		
2		filing organization's funds contrib		*		
		vities				
3	Total exempt function e	expenditures. Add lines 1 and 2.	Enter here and	on Form 1120-POL,		
	line 17b					
4	Did the filing organization	n file Form 1120-POL for this year?	?		Yes	No
5		ses and employer identification nur				
		ents. For each organization listed,				
		ontributions received that were pro- fund or a political action committe				
	as a separate segregated	Turid of a political action committee	e (PAC). II additio	Tial space is fleeded, prov		IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political	
				filing organization's funds. If none, enter -0	contributions received an promptly and directly	
					delivered to a separate political organization. If	
					none, enter -0	
/4\						
(1)						
(2)						
(3)						
(4)						
(5)						
(C)						
(6)				1	1	

00110	date 6 (1 61111 666 61 666 EZ) 2616					i age a
Pa	t II-A Complete if the organization section 501(h)).	on is exempt u	nder section 50	01(c)(3) and filed	d Form 5768 (ele	ection under
Α	Check ► ☐ if the filing organization b	elongs to an aff	iliated group (an	d list in Part IV e	each affiliated gro	oup member's
	name, address, EIN, expe	enses, and shar	e of excess lobb	ying expenditur	es).	•
В	Check $ ightharpoonup$ if the filing organization cl	hecked box A a	nd "limited cont	rol" provisions a	pply.	
	Limits on Lob	bying Expenditu	ıres	•	(a) Filing	(b) Affiliated
	(The term "expenditures" n	means amounts	paid or incurred.))	organization's totals	group totals
1	a Total lobbying expenditures to influence	e public opinion	grass roots lobby	ing)	0	
	Total lobbying expenditures to influence	e a legislative bo	dy (direct lobbying	g)	7,000	
	Total lobbying expenditures (add lines	1a and 1b) .			7,000	
	d Other exempt purpose expenditures .				74,736,000	
	Total exempt purpose expenditures (ac	dd lines 1c and 1	d)		74,743,000	
	 Lobbying nontaxable amount. Enter columns. 	the amount from	om the following	table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) i	s: The lobbying	nontaxable amount	is:		
	Not over \$500,000		ount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
	Grassroots nontaxable amount (enter 2	25% of line 1f)			250,000	
	n Subtract line 1g from line 1a. If zero or	less, enter -0-			0	
	Subtract line 1f from line 1c. If zero or I				0	
	If there is an amount other than zero reporting section 4911 tax for this year	•	•	the organization		Yes No
	(Some organizations that m columns below	nade a section 50 . See the instruc	tions for lines 2a	not have to comp through 2f on pa)
	Lobbyin	g Expenditures	During 4-Year Av	eraging Period	Г	
	Calendar year (or fiscal year	(a) 2010	(b) 2011	(a) 2012	(4) 2012	(a) Total

	Lobbying Expenditures During 4-Year Averaging Period												
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(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							
С	Total lobbying expenditures	12,000	7,000	11,000	7,000	37,000							
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000							
е	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000							
f	Grassroots lobbying expenditures	0	0	0	0	0							

Schedule C (Form 990 or 990-EZ) 2013

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	1 5768		
For e	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	iption of the lobbying activity.	Yes	No	Aı	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
h i	Other activities?					
i	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).)(5), c	or se	ction		
	00.(0)(0).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3		
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line 3	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditure next year?	, iiig	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par						
Provid	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up lis	t); Par	t II-A, li	ne 2;	and
Part II	-B, line 1. Also, complete this part for any additional information.					

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to 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

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

Employer identification number Name of the organization AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC. 13-1623886 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year). 3 Aggregate grants from (during year) . . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

chedu	e D (Form 990) 2013									Page 2
Part	,	Collections of A	Art, Hist	orical T	reasures	or Ot	her Similar A	ssets	(conti	
3	Using the organization's acquisition, collection items (check all that apply):									
а	✓ Public exhibition		d [Loan	or exchang	e prog	rams			
b	Scholarly research		e [Other						
С	☐ Preservation for future generations	3								
4	Provide a description of the organizat XIII.	tion's collections a	nd expla	in how th	ney further	the org	ganization's exe	empt pı	ırpose	in Part
5	During the year, did the organization assets to be sold to raise funds rather							ilar . 🔲	Yes	☑ No
Part	IV Escrow and Custodial Arra	ingements.								
	Complete if the organization	answered "Yes"	to Forn	n 990, P	art IV, line	9, or i	reported an a	mount	on Fo	rm
	990, Part X, line 21.									
1a	Is the organization an agent, trustee	custodian or othe	er interm	ediary fo	r contribut	ions or	other assets	not		
	included on Form 990, Part X?							. 🗆	Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the fo	llowing ta	ıble:					
								Amoun	<u>t </u>	
С	Beginning balance					10	;			
d	Additions during the year					10				
е	Distributions during the year					1e)			
f	Ending balance					1f	1			
2a	Did the organization include an amoun							. 🗆	Yes	☐ No
b	If "Yes," explain the arrangement in Pa					provide	ed in Part XIII			
Par	·									
	Complete if the organization	answered "Yes"	to Forn	n 990, P	art IV, line	10.				
	·	(a) Current year	(b) Pric		(c) Two year		(d) Three years ba	ck (e)	Four year	rs back
1a	Beginning of year balance	572,212,000	538	3,770,000	537.1	11,000	479,241,0	00	444.1	174,000
b	Contributions	10,016,000		,317,000		246,000	17,938,0			26,000
C	Net investment earnings, gains, and	10/010/000	• '	1,017,000	2.1/2	10,000	17770070		,	-20,000
	losses	67,021,000	ΛF	5,077,000	3.6	14,000	64,945,0	000	45 (551,000
d	Grants or scholarships	07,021,000		0	5,0	0	04,740,0	0	40,0	0
e	Other expenditures for facilities and			•		- 0				
•	programs	23,579,000	22	2,952,000	22.2	201,000	25,013,0	100	24.1	110,000
f	Administrative expenses	23,377,000		0	23,2	01,000	23,013,0	0	24,1	0
'	End of year balance	625,670,000	E7'		E20 7	70,000	E27 111 C		470 ′	241,000
g 2	Provide the estimated percentage of t			2,212,000			537,111,0	00	4/9,2	.41,000
	Board designated or quasi-endowmer	=	%	e (iii le 19	, coluitiii (a	.)) Held	as.			
a b	Permanent endowment	75 %	- 70							
	Temporarily restricted endowment	20 %								
С	The percentages in lines 2a, 2b, and 2		20%							
30	Are there endowment funds not in the			zation tha	t are hold	and ad	ministered for	tho		
Ja	organization by:	e possession or the	5 Organiz	Lation the	it are rielu	and ad	ministered for	LI IC	Va	o No
	•							0.	Yes	_
	(i) unrelated organizations								a(i)	<i>V</i>
	(ii) related organizations								ı(ii)	· ·
_	If "Yes" to 3a(ii), are the related organ							. 3	b	
4	Describe in Part XIII the intended uses		n s endo	wment fu	ırıas.					
Part			–				3. F 355			40
	Complete if the organization									
	Description of property	(a) Cost or oth		` '	r other basis		Accumulated	(d)	Book val	iue
		(investme	<i>'</i>	10)	ther)	a	epreciation			
1a	Land		0		0					0
b	Buildings		0		9,256,000		2,041,000		7,2	215,000
С	Leasehold improvements	.	0		0		0			0

0

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

1,875,000

115,000

508,000

115,000

7,838,000

1,367,000

. ▶

0

Schedule D (Form 990) 2013

Part VII	Investments - Oth	er Securities.					
	Complete if the orga	anization ansv	vered "Yes" to For	m 990	, Part IV, line	11b. See Form	990, Part X, line 12.
	` ' '	security or category me of security)		(b)	Book value		hod of valuation: -of-year market value
(1) Financial	derivatives				0	End-of-Year Marke	et Value
(2) Closely-h	eld equity interests .				0	End-of-Year Marke	et Value
(3) Other WE	EIZMANN GLOBAL ENDO	DWMENT FUND			538,298,000	End-of-Year Marke	et Value
(A) OTHER	?				513,000	End-of-Year Marke	et Value
(B)							
(C)							
(D)							
(E)							
(F)							
(G)							
(H)				ļ			
	n) must equal Form 990, Part X,	. , , ,			538,811,000		
Part VIII	Investments - Prog	•		000	Dord IV line	. 11a Cas Farms	000 David V line 10
			vered res to For				990, Part X, line 13.
	(a) Description	n of investment		(b)	Book value	` '	thod of valuation: -of-year market value
(1)							
(1)							
(2)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
	n) must equal Form 990, Part X,	col. (B) line 13.) ▶					
Part IX	Other Assets.						
	Complete if the orga	anization ansv	vered "Yes" to For	m 990	, Part IV, line	11d. See Form	990, Part X, line 15.
		(a	Description				(b) Book value
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)	mn (b) must equal Form	000 Part V oc	I (D) lino 15)				
Part X	Other Liabilities.	1990, Fait A, CC	I. (B) line 15.)			<i></i> . ▶	
PartA	Complete if the organic	anization anev	vered "Ves" to For	m 000	Part IV line	11e or 11f Sec	Form 990 Part Y
	line 25.	anization ansv	vered res to ror	111 990	, raitiv, iiie	; 11e 01 111. 3ee	FI OIIII 990, Fait A,
1.	(a) Description of liability	v .	(b) Book value				
(1) Federal in	· · · · · ·	,	(2) 2001 14140	0			
	AFFILIATE		2.85	35,000			
	Y PAYMENT LIABILITY			82,000			
(4)	T T AT INC. IT EIA DIETT		7,11	32,000			
(5)							
(6)							
(7)							
(8)							
(9)							
Total. (Column (b	n) must equal Form 990, Part X,	col. (B) line 25.) ▶	12,61	17,000			
	uncertain tax positions. I		de the text of the footn	ote to tl			
organization's	s liability for uncertain tax	positions under	FIN 48 (ASC 740). Che	eck here	if the text of t	he footnote has bee	en provided in Part XIII 🕡

Schedule D (Form 990) 2013 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 145,742,000 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 2a Donated services and use of facilities 2b

С	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	48,782,000
3	Subtract line 2e from line 1			3	96,960,000
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,866,000		
b	Other (Describe in Part XIII.)	4b	0		
С	Add lines 4a and 4b			4c	1,866,000
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	98,826,000
Part					
	Complete if the organization answered "Yes" to Form 990, P		•		
1	Total expenses and losses per audited financial statements			1	72,955,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	12,733,000
– a	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
C	Other losses	2c	0		
	Other (Describe in Part XIII.)	2d	0		
d	,	Zu	U	0-	•
e	Add lines 2a through 2d			2e 3	70.055.000
3	Subtract line 2e from line 1	 I I	· · · · · · ·	3	72,955,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,866,000		
b	Other (Describe in Part XIII.)	4b	0	_	
c	Add lines 4a and 4b			4c	1,866,000
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 18.)		5	74,821,000
Part	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and			5	
Sched	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part tule D, Part III, Line 4 - ON DISPLAY FOR PUBLIC VIEWING AT THE WOLFSON ITED IN REHOVOT, ISRAEL.	-	-		
Sched	ule D, Part V, Line 4 - THE FUNDS ARE ENDOWED ACCORDING TO DONORS'	DESIG	NATION OF THE FUND	S AND TH	IE
ALLO	NABLE SPENDING RATE IS TRANSMITTED TO THE WEIZMANN INSTITUTE WI	TH IN	STRUCTIONS FOR ITS	DESIGNA	TION
Sched	ule D, Part X, Line 2 - US GAAP REQUIRES THAT A TAX POSITION BE RECOG	NIZED	OR DERECOGNIZED	ON A MOR	E LIKELY
THAN	NOT THRESHOLD. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO B	E TAK	CEN IN A TAX RETURN	THE	
ORGA	NIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE ANY U	JNCEF	RTAIN POSITIONS FOR	THE OPE	<u>V</u>
YEAR	S. THE TAX YEARS ENDED JUNE 30 2011, 2012, 2013, 2014 ARE STILL OPEN T	O AU	DIT FOR BOTH FEDER	AL AND S	ГАТЕ
PURP	OSES.				
					
				Schedu	ıle D (Form 990) 2013

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization

Employer identification number

	RICAN COMMITTEE FOR THE W					13-1623886	
Par	General Information Form 990, Part IV, line		es Outside	the United States. Comp	olete if the organiz	zation answered "Yes" o	n
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	igibility for the	e grants or as	sistance, and the selection		award the	No
2	For grantmakers. Describe assistance outside the Unite		he organizati	on's procedures for monit	oring the use of	f its grants and other	
3	Activities per Region. (The fo	ollowing Part	l, line 3 table o	can be duplicated if addition	nal space is need	ed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed a program set describe specific service(s) in re	rvice, expenditures for type of and investment	
(1)	Middle East and North Africa	0	0	Grantmaking		58,923,0	000
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							_
3a	Sub-total						
b	Total from continuation						

c Totals (add lines 3a and 3b)

58,923,000

Par								nization answered "Ye	s" on Form 990,
		line 15, for ar	ny recipient who re	eceived more than \$	55,000. Part II ca	· ·		needed.	
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Middle East and Nor	BASIC SCIENTIFIC RE	51,457,000	WIRE TRANSFER	0	N/A	
(2)			Middle East and Nor	SCIENTIFIC AND EDU	7,466,000	WIRE TRANSFER	0		
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2	by the IRS, or	for which the $arphi$	grantee or counsel h	ed above that are reca as provided a section	•		•	•	2
3	Enter total nu	mber of other o	organizations or entit	ies				▶	0

Schedule F (Form 990) 2013

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

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

Schedule F (Form 990) 2013 Page 4

Part	IV Foreign Forms	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, 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)	✓ 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)	☐ 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)	☐ 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)	□ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If	

for Form 5713)

✓ No

☐ Yes

Schedule F (Form 990) 2013

Part V Supplemental Information

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

Schedule F, Part I, Line 2 - GRANTS ARE TRANSMITTED TO THE WEIZMANN INSTITUTE OF SCIENCE AND THE FEINBERG
GRADUATE SCHOOL LOCATED IN REHOVOT, ISRAEL ON A MONTHLY BASIS WITH SPECIFICATIONS RELATING TO THE
DESIGNATION FOR THE USE OF FUNDS. THE INSTITUTE CONFIRMS THAT THE MONIES ARE USED FOR THE INTENDED
PURPOSE.
TONT COL.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Employer identification number

AMER	ICAN COMMITTEE FOR THE WEIZN					l l	623886
Part	Fundraising Activities. Form 990-EZ filers are no				vered "Yes" to I	Form 990, Part IV, li	ne 17.
1	Indicate whether the organization	<u> </u>			owing activities.	Check all that apply.	
а	✓ Mail solicitations				ion of non-goverr		
b	Internet and email solicitation	ns	f		ion of governmen	•	
С	✓ Phone solicitations		g v		fundraising event	•	
d	✓ In-person solicitations		J –		J		
2a	Did the organization have a writt	en or oral agre	ement with	any individ	dual (including of	ficers, directors, trust	ees
	or key employees listed in Form						✓ Yes 🗌 No
b	If "Yes," list the ten highest paid compensated at least \$5,000 by	individuals or	entities (fun			-	
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1 Se 1	e Schedule G, Part IV, Statement						
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				•	0	78,000	-78,000
3 All Sta	List all states in which the organ registration or licensing.		stered or lic	ensed to s	olicit contribution	ns or has been notifie	d it is exempt from

Schedule G (Form 990 or 990-EZ) 2013 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. **(b)** Event #2 (a) Event #1 (c) Other events

				(2) 210.11.11	(2) 210.112	(c) canor evenue	(d) Total events
				MIDWEST GALA	NJ GOLF OUTING	2	(add col. (a) through col. (c))
				(event type)	(event type)	(total number)	coi. (c)
æ							
E	۱,	1	Gross receipts	432,000	96,000	64,000	592,000
Revenue	'	•	dioss receipts	432,000	98,000	64,000	592,000
ď							
	2	2	Less: Contributions	110,000	82,000	28,000	220,000
	3	3	Gross income (line 1 minus				
			line 2)	322,000	14,000	36,000	372,000
				322/333	11,000	30,000	0.2,000
	١,		Cook prince				
	- ا	4	Cash prizes	0	0	0	0
	5	5	Noncash prizes	0	0	0	0
			·				
es		6	Rent/facility costs	88,000	50,000	13,000	151,000
S	`	•	Herit/lacility costs	88,000	50,000	13,000	151,000
Direct Expenses							
Ж	7	7	Food and beverages	35,000	0	12,000	47,000
ರ							
<u>.e</u>	8	8	Entertainment	0	65,000	0	65,000
Ω					23,535		33/333
	_ ا	_	011 12 1				
	6	9	Other direct expenses .	94,000	26,000	15,000	135,000
	10	0	Direct expense summary. Ac	ld lines 4 through 9 in c	olumn (d)		398,000
	11	1	Net income summary. Subtra				-26,000
Pa			Gaming. Complete if the	organization answei	red "Ves" to Form 99) Part IV line 19 or r	reported more
1 6			than \$15,000 on Form 9	00 F7 line fo	ed res to ronni so	5, 1 art IV, iii 6 15, 61 1	cported more
			11an \$15,000 on Form 9				
æ				(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
E .					bingo/progressive bingo		col. (a) through col. (c))
Revenue							
$\mathbf{\alpha}$	1	1	Gross revenue				
"	١,	2	Cook prizes				
šė	2	2	Cash prizes				
Direct Expenses							
Š	3	3	Noncash prizes				
Ш							
eC.	4	4	Rent/facility costs				
Ë		-	,				
_	١,	_	Oth an allowat areas				
	_ 5	5	Other direct expenses .				
					☐ Yes%	☐ Yes%	
	6	6	Volunteer labor	□ No	□ No	□ No	
	7	7	Direct expense summary. Ac	ld lines 2 through 5 in o	olumn (d)		
	1		z oot onponee caa. y. / .e	.aee =eag e e			
	١,		Not goning income automorph	Cubtract line 7 from li	no 1 polymon (d)	_	
	8	<u> </u>	Net gaming income summar	y. Subtract line / from ii	rie i, coluirir (a)		
9)	En	ter the state(s) in which the or	ganization operates gar	ming activities:		
	а	ls t	the organization licensed to o	perate gaming activities	in each of these states	?	Tyes No
	b	If "	(NI a. 2) assembled:				
							<u></u>
10	a	We	ere any of the organization's g	aming licenses revoked	l, suspended or termina	ted during the tax year?	P . □ Yes □ No
	b	lf "	'Yes," explain:				

Schedu	lule G (Form 990 or 990-EZ) 2013	Pa	age 3
11		☐ 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?	□ Vee □	NI.
13	Indicate the percentage of gaming activity operated in:	☐ Yes ☐	No
а			%
b			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and		
	records:		
	Name▶		
	Address▶		
15a	, ,		
L		☐ Yes ☐	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$		
С			
	Name ►		
	Address►		
16	Gaming manager information:		
	Name▶		
	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		
	•	☐ Yes ☐	No
b	spent in the organization's own exempt activities during the tax year ▶ \$		
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) an Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide additional information (see instructions).		
Sched	edule G, Part I, Line 2b - SANKY COMMUNICATIONS, INC IS A PROFESSIONAL FUNDRAISING CONSULTANT FOR THE		
ORGA	ANIZATION AND THERE IS NO DIRECT REVENUE ASSOCIATED WITH THE SERVICES RENDERED.		

Schedule G, Part IV, Statement 1

AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF

SCIENCE INC 13-1623886

Form: Schedule G

Page: 1

Line Number: Part I Line 2b

Fundraiser Activity Information

Name and Address	Activity	C 1	Gross	C2	C3
			Receipts		
SANKY COMMUNICATIONS INC	PROFESSIONAL FUNDRAISING	No	0	78,000	-78,000
589 8TH AVE	CONSULTING AND SUPPORT				
NEW YORK, NY 10018					
Total:			0	78,000	-78,000

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

SCHEDULE J (Form 990)

13-1623886

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC

Employer identification number

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ 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 (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	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 in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in 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		~
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	~	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only costion 501/c)/2) and 501/c)/4) organizations must complete lines 5.0			
5	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
3	compensation contingent on the revenues of:			
а	The organization?	5a		~
a b	Any related organization?	5b		~
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in 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		~
b	Any related organization?	6b		~
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For paragraphic listed in Form 000 Part VII Costion A line to did the agranization provide any resulting			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		~
8	Were any amounts reported in 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		-
_				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Schedule J (Form 990) 2013 Page 2

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

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

Note. The sum of columns (B)(i)–(iii) 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.

Note. The sum of columns (b)(i)–(iii) to	1 0001		f W-2 and/or 1099-MIS		(C) Retirement and			o lor triat marviadar.
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
MARSHALL LEVIN, EXECUTIVE	(i)	464,744	0	14,780	36,234	32,776	548,534	
1 VICE PRESIDENT	(ii)	0	0	0	0	0	0	0
MARK FELDMAN, SENIOR VICE	(i)	292,427	0	8,838	27,225	31,366	359,856	0
PRESIDENT	(ii)	0	0	0	0	0	0	0
BONNIE DIAMOND, SENIOR	(i)	231,515	0	3,951	21,375	32,776	289,617	0
VICE PRESIDENT	(ii)	0	0	0	0	0	0	0
MICHELE WILLNER, CHIEF	(i)	200,495	0	3,844	18,675	1,726	224,740	0
FINANCIAL OFFICER	(ii)	0	0	0	0	0	0	0
HAROLD ADLER, FORMER	(i)	69,308	0	121,581	0	503	191,392	0
SENIOR VICE PRESIDENT	(ii)	0	0	0	0	0	0	0
HENRY PAVONY, FORMER CFO	(i)	155,950	0	16,222	0	0	172,172	0
6	(ii)	0	0	0	0	0	0	0
JANIS RABIN, REGIONAL	(i)	245,639	0	8,357	22,491	10,191	286,678	0
7 DIRECTOR	(ii)	0	0	0	0	0	0	0
STEVEN MEYERS, VICE	(i)	237,462	0	8,382	22,581	22,381	290,806	0
PRESIDENT	(ii)	0	0	0	0	0	0	
LEE BROWN, REGIONAL	(i)	236,648	0	1,485	22,343	31,048	291,524	0
DIRECTOR 9	(ii)	0	0	0	0	0	0	0
JEFFREY SUSSMAN, VICE	(i)	229,749	0	3,816	21,231	9,404	264,200	0
PRESIDENT	(ii)	0	0	0	0	0	0	0
DICHADD ENGLEIN DECIONAL	(i)	195,457	0	2,193	18,031	9,404	225,085	0
DIRECTOR	(ii)	0	0	0	0	0	0	0
HEDMAN NEIDITCH VICE	(i)	187,839	0	2,606	17,264	4,820	212,529	0
PRESIDENT	(ii)	0	0	0	0	0	0	0
ELLEN HOESTATTED VICE	(i)	182,370	0	3,317	16,902	9,404	211,993	0
PRESIDENT	(ii)	0	0	0	0	0	0	0
ELVINE AVVIV DECIUNAL	(i)	180,273	0	3,232	16,529	9,404	209,438	0
DIRECTOR 14	(ii)	0	0	0	0	0	0	0
STACY SULMAN, VICE	(i)	182,090	0	493	18,000	28,825	229,408	0
PRESIDENT 15	(ii)	0	0	0	0	0	0	0
DAPHNA RUBY, REGIONAL	(i)	167,230	0	5,334	15,435	10,191	198,190	0
DIRECTOR	(ii)	0	0	0	0	0	0	

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part or any additional information.
Schedule J, Part I, Line 4 - THE FOLLOWING INDIVIDUALS RECEIVED A PAYMENT FROM NON QUALIFIED SUPPLEMENTAL PENSION PLAN: HAROLD ADLER 121,581 HENRY PAVONY 16,222 JAY LEIPZIG 55,131

SCHEDULE J (Form 990)

Continuation Sheet for Schedule J (Form 990)

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.

Inspection

me of the organization							Employer identific	cation number
MERICAN COMMITTEE FOR THE V	VEIZMAI	NN INSTITUTE OF SO	CIENCE INC				13	1623886
art I Continuation of Of	ficers.	Directors, Trust	tees, Key Employe	ees, and Highes	t Compensated E	mployees (Sched	dule J. Part II)	
	ĺ	(B) Breakdown of	W-2 and/or 1099-MIS	C 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)	reported in prior Form 990 or Form 990-EZ
AY LEIPZIG, FORMER VICE RESIDENT	(i)	0	0	55,131	0	0	55,131	
RESIDENT	(ii)	0	0	0	0	0	0	
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i) (ii)							

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

OMB No. 1545-0047

Open to Public Inspection

explanations, and any additional information in Part VI. ▶ Attach to Form 990. ► See separate instructions. ▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC 13-1623886

NY CITY INDUSTRIAL DEVELOPMENT A ACENCY CIVIC FACILITY REVENUE BOND B C C D PartIII Proceeds 1 Amount of bonds retired 2 Amount of bonds retired 3 Total proceeds of issue 4 Gross proceeds in reserve funds 5 Capitalized interest from proceeds 6 Proceeds in refunding escrows 7 Issuance costs from proceeds 7 Issuance costs from proceeds 8 Credit enhancement from proceeds 9 Working capital expenditures from proceeds 10 Capital expenditures from proceeds 11 Cibrer spent proceeds 12 Cibrer unspent proceeds 13 Year of substantial completion 14 Were the bonds issued as part of an advance refunding issue? 15 Were the bonds issued as part of an advance refunding issue? 16 Has the final allocation of proceeds? 17 Was the organization maintain adequate books and records to support the final allocation of proceeds? 10 Was the organization maintain adequate books and records to support the final allocation of proceeds? 10 Was the organization maintain adequate books and records to support the final allocation of proceeds? 2 Are there any lease arrangements that may result in private business use of	Par	t I Bond Issues													
A CEDICY CIVIC FACILITY REVENUE BOND B C D Part III Proceeds A B C D Amount of bonds retired . 0 0		(a) Issuer name	(b) Issuer EIN (c	c) CUSIP#	(d) Date issued					(g) [Defeased	u ber	alf of	(i) Po finan	
Part II Proceeds A B C D Amount of bonds retired . 0 0 2 Amount of bonds legally defeased . 0 0 3 Total proceeds in reserve funds . 0 0 4 Gross proceeds in reserve funds . 0 0 5 Capitalized interest from proceeds . 0 0 6 Proceeds in refunding escrows . 0 0 7 Issuance costs from proceeds . 176,600 8 Credit enhancement from proceeds . 0 0 9 Working capital expenditures from proceeds . 0 0 10 Capital expenditures from proceeds . 0 0 11 Other spent proceeds . 0 0 12 Other unspent proceeds . 0 0 13 Year of substantial completion . 2005 Were the bonds issued as part of a current refunding issue? . V 14 Were the bonds issued as part of an advance refunding issue? . V 15 Were the bonds issued as part of an advance refunding issue? . V 16 Has the final allocation of proceeds been made? . V 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? . V 18 Was the organization maintain adequate books and records to support the final allocation of proceeds? . V 19 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? . V 2 Are there any lease arrangements that may result in private business use of	Α	AGENCY CIVIC FACILITY REVENUE BOND	13-2906040 64	1971CX41	04/02/2004	8,830,0	000 FINA ACQ	NCING THE CO UISITION OF C	OST OF ONDOMINIUI	VI Ye	s No	Yes	_	Yes	No ✓
Part II Proceeds A B C D Amount of bonds retired	В														
A B C D Amount of bonds retired	С														
A B C D Amount of bonds retired	D														
1 Amount of bonds retired 0 0	Par	II Proceeds													
2 Amount of bonds legally defeased						Α		В	(D		
3 Total proceeds of issue	1					0									
4 Gross proceeds in reserve funds						0									
5 Capitalized interest from proceeds 6 Proceeds in refunding escrows 7 Issuance costs from proceeds 8 Credit enhancement from proceeds 9 Working capital expenditures from proceeds 0 10 Capital expenditures from proceeds 10 Capital expenditures from proceeds 10 Other spent proceeds 10 Other unspent proceeds 10 Other unspent proceeds 10 Other unspent proceeds 10 Other unspent proceeds 11 Other spent proceeds 12 Other unspent proceeds 13 Year of substantial completion 14 Were the bonds issued as part of a current refunding issue? 15 Were the bonds issued as part of an advance refunding issue? 16 Has the final allocation of proceeds been made? 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? 18 Yes No Y						8,830,000									
6 Proceeds in refunding escrows	4					0									
7 Issuance costs from proceeds	5	·			I	0									
8 Credit enhancement from proceeds 0 9 Working capital expenditures from proceeds 0 10 Capital expenditures from proceeds 0 11 Other spent proceeds 0 12 Other unspent proceeds 0 13 Year of substantial completion 0 14 Were the bonds issued as part of a current refunding issue? 1 15 Were the bonds issued as part of an advance refunding issue? 1 16 Has the final allocation of proceeds been made? 1 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? 1 18 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? 1 2 Are there any lease arrangements that may result in private business use of	6	Proceeds in refunding escrows				0									
9 Working capital expenditures from proceeds 0 8,653,400 10 Capital expenditures from proceeds 8,653,400 11 Other spent proceeds 0 0 12 Other unspent proceeds 0 0 13 Year of substantial completion 0 2005 14 Were the bonds issued as part of a current refunding issue? 15 Were the bonds issued as part of an advance refunding issue? 16 Has the final allocation of proceeds been made? 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? 18 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? 19 Are there any lease arrangements that may result in private business use of	7	Issuance costs from proceeds				176,600									
10 Capital expenditures from proceeds	8	Credit enhancement from proceeds				0									
11 Other spent proceeds	9					0									
12 Other unspent proceeds	10	Capital expenditures from proceeds				8,653,400									
12 Other unspent proceeds	11	Other spent proceeds				0									
Yes No Ye	12	Other unspent proceeds				0									
Yes No Ye	13	Year of substantial completion				2005									
15 Were the bonds issued as part of an advance refunding issue?						No	Yes	No	Yes	No	,	Yes		No	
16 Has the final allocation of proceeds been made?	14	Were the bonds issued as part of a current re	efunding issue? .			~									
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	15	Were the bonds issued as part of an advance	e refunding issue?			V									
final allocation of proceeds?	16	Has the final allocation of proceeds been ma	ade?		🗸										
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	17														
 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Part	III Private Business Use			•	•		•	•	•					
which owned property financed by tax-exempt bonds?						Α		В		C			D		
2 Are there any lease arrangements that may result in private business use of	1					No	Yes	No	Yes	No	,	Yes		No	
		which owned property financed by tax-exem	npt bonds?			V									
	2														

Part III Private Business Use (Continued) В C D Α Yes No Yes Nο Yes Nο Yes 3a Are there any management or service contracts that may result in private No V **b** If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond-financed property?........... V d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? 4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government 0 % % % Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization. another section 501(c)(3) organization, or a state or local government ▶ % 0 % 0 % % Does the bond issue meet the private security or payment test? v **8a** Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued? **b** If "Yes" to line 8a, enter the percentage of bond-financed property sold or % % % c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? Part IV Arbitrage Α В C D Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Yes Nο Yes Nο Yes Nο Yes Nο 2 If "No" to line 1, did the following apply? ~ If you checked "No rebate due" in line 2c, provide in Part VI the date the Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2013

Part IV Arbitrage (Continued)									
	Α		I	В			D		
	Yes	No	Yes	No	Yes	No	Yes	No	
5a Were gross proceeds invested in a guaranteed investment contract (GIC)? .		~							
b Name of provider									
c Term of GIC									
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
6 Were any gross proceeds invested beyond an available temporary period? .		~							
7 Has the organization established written procedures to monitor the									
requirements of section 148?		~							
Part V Procedures To Undertake Corrective Action				•					
		4		В		<u> </u>	1	D	
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No	
of federal tax requirements are timely identified and corrected through the									
voluntary closing agreement program if self-remediation is not available									
under applicable regulations?		·							
Part VI Supplemental Information. Provide additional information for resp	onses to	questions	on Schedu	ile K (see ii	nstructions).			
Schedule K, Part III, Line 9-04/02/2004 8,830,000 NY CITY INDUSTRIAL DEVELOPMENT AGE	NCY CIVIC	FACILI - TH	E ORGANIZ <i>A</i>	ATION IS IN 1	HE PROCES	S OF DEVEL	OPING		
		1710121 111	2 01(0) 111127		TIL I ROOLO	O O! DEVEL			
WRITTEN PROCEDURES									

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Employer identification number

Name o	the organization				Employer id	lentification nu	mber		
AMER	ICAN COMMITTEE FOR THE WEIZMA	ANN INSTITI	JTE OF SCIENCE INC			13-16238	86		
Part	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash cont amounts repo Form 990, Part \	rted on	Method o			
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	'	36		999,000	market quota	ation		
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 24	Scientific specimens								
2 4 25	Archeological artifacts								
26	Other ► () Other ► ()								
27	Othor N								
28	Other ► (
29	Number of Forms 8283 received	by the or	canization during the tax v	ear for contribu	itions for				
	which the organization completed	•	,			29			
				3				Yes	No
30a	During the year, did the organizat	ion receive	by contribution any proper	tv reported in P	art I lines	1 - 28 that			
-	it must hold for at least three year								
	used for exempt purposes for the						30a		~
b	If "Yes," describe the arrangemen								
31	Does the organization have a		tance policy that require	s the review o	of any no	n-standard			
					=		31	~	
32a	Does the organization hire or use						<u> </u>		
-		-		-			32a		~
b	If "Yes," describe in Part II.								
33	If the organization did not report a	n amount in	column (c) for a type of pro	perty for which	column (a)	is checked,			
	describe in Part II.				, ,				

Schedule M (Form 990) (2013) 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.

SCHEDULE 0 (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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number** Name of the organization AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC 13-1623886 Form 990, Part VI, Section A, Line 2 - Gary Abramson & Pennie Abramson (Husband & Wife) Jonathan Birnbach & Naomi Birnbach (Son & Mother) David Fairweather & Jane Fairweather (Husband & Wife) Paul Guerin & Vera Guerin (Husband & Wife) Larry Marks & Gladys Monroy (Husband & Wife) Ilene Nathan & Jeff Nathan (Wife & Husband) David Teplow & Theodore Teplow (Son & Father) Fela & David Shapell (Wife & Husband) Adam and Elaine Wolfensohn (Son and Mother) Form 990, Part VI, Section B, Line 11b - THE FORM 990 IS REVIEWED BY SENIOR MANAGEMENT, GRANT THORNTON AND THE **CHAIR PERSON OF THE BOARD** Form 990, Part VI, Section B, Line 12c - ON AN ANNUAL BASIS A QUESTIONNAIRE IS SENT OUT TO ALL OFFICERS, DIRECTORS AND TRUSTEES TO IDENTIFY ANY INTEREST THAT COULD GIVE RISE TO CONFLICTS. IN THE EVENT OF DISCLOSURE THE ORGANIZATION WILL NOT ENTER INTO A CONTRACT OR TRANSACTION WITH ANY OF ITS OFFICERS, TRUSTEES, COMMITTEE MEMBERS OR EMPLOYEES, OR ANY ENTITY WHICH INDIVIDUAL OR RELATIVE HAS FINANCIAL INTEREST, UNLESS THIS INTEREST IS DISCLOSED IN ADVANCE TOT HE BOARD OR EXECUTIVE COMMITTEE AND THE BOARD APPROVES THE TRANSACTION, WITHOUT THE VOTE OF THE INTERESTED TRUSTEE OR COMMITTEE MEMBER. Form 990, Part VI, Section B, Line 15 - COMPENSATION OF OFFICERS AND KEY EMPLOYEES IS APPROVED AND REVIEWED BY THE EXECUTIVE COMMITTEE FOR REASONABLENESS AS COMPARED TO COMPENSATION PACKAGES OFFERED IN THE NON-PROFIT INDUSTRY BY PEER INSTITUTIONS. THE EXECUTIVE COMMITTEE DOCUMENTS ITS DELIBERATION AND **DISCUSSION IN ITS MEETINGS.** Form 990, Part VI, Section C, Line 19 - COPIES OF AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, GOVERNING DOCUMENTS AND FORM 990 ARE SENT TO DONORS UPON REQUEST.

AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC

Form: 990 13-1623886

Page: 6

Line Number: Part VI Section C Line 17

States Where Copy Of Return Is Filed

States	Where Copy Of Return is Fried
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CA	
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Schedule O, Statement 1	AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF
	SCIENCE INC
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WA	
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SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

(f)

Direct controlling

entity

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Open to Public ► Attach to Form 990. ► See separate instructions. Inspection

(d)

Total income

(c)

Legal domicile (state

or foreign country)

Department of the Treasury Internal Revenue Service

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

Employer identification number

(e)

End-of-year assets

Name of the organization AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC 13-1623886

(b)

Primary activity

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

_(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
Part II Identification of Related Tax-Exempt Organizations during one or more related tax-exempt organizations during the second of the second organization or the second organization or the second organization orga	itions Co	l mplete if th ax year.	e organization a	nswered "Yes" or	Form 990, Part	IV, line 34 becau	ise it ha	d
(a) Name, address, and EIN of related organization		(b) ry activity	(c) Legal domicile (state or foreign country)	(d)		(f)	Section s	g) 512(b)(13) rolled tity?
(1) See Schedule R, Part VII, Statement 1							Yes	No
(2)								
(3)								
(4)								
(5)								
(6)								

Name, address, and EIN (if applicable) of disregarded entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) ortionate ations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	c 20 managingK-1 partner?		(k) Percentage ownership
							Yes	No		Yes	No	
<u>(1)</u>												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 5 contro enti	rolled
								Yes	No
(1) CHARITABLE REMAINDER ANNUITY TRUST (18 633 THIRD AVE, NEW YORK, NY 10017	ANNUITY TRUST	NY	N/A	Т					
(2) CHARITABLE REMAINDER UNITRUST TRUST (1 633 THIRD AVE, NEW YORK, NY 10017	UNITRUST	NY	N/A	Т					
(3)									
(4)									
(5)									
(6)									
(7)									

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

Note	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		~
b	Gift, grant, or capital contribution to related organization(s)	1b	~	
С	Gift, grant, or capital contribution from related organization(s)	1c		~
d	Loans or loan guarantees to or for related organization(s)	1d		~
е	Loans or loan guarantees by related organization(s)	1e		~
f	Dividends from related organization(s)	1f		~
g	Sale of assets to related organization(s)	1g		~
h	Purchase of assets from related organization(s)	1h		1
ï	Exchange of assets with related organization(s)	1i		· ·
:	Lease of facilities, equipment, or other assets to related organization(s)	1 <u>i</u>		~
,	Lease of facilities, equipment, of other assets to related organization(s)	',		
l,	Lease of facilities, equipment, or other assets from related organization(s)	1k		~
k		11	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Performance of services or membership or fundraising solicitations for related organization(s)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		~
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		'
0	Sharing of paid employees with related organization(s)	10		~
р	Reimbursement paid to related organization(s) for expenses	1p		~
q	Reimbursement paid by related organization(s) for expenses	1q		~
r	Other transfer of cash or property to related organization(s)	1r		~
S	Other transfer of cash or property from related organization(s)	1s		'
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transactions	ction th	resho	lds.
	(a) (b) (c)	(d)		
	Name of related organization Transaction Amount involved Method of determ	ining amo	unt invo	lved
	type (a–s)			
(1)				
(2)				
- /				
(3)				
(J)				
(A)				
(4)				
(E)				
(5)				
(O)				
(6)				

Schedule R (Form 990) 2013

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(d) (e) ominant e (related, d, excluded 501(c)(3)		(e) (f) Are all partners Share of section 501(c)(3)		(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	No	
(1) WEIZMANN GLOBAL ENDOWMENT FU 110 EAST 42ND STREET, NEW YORK, NY 100	INVESTMENT MANAGEMEN	NY	Related		~	26,243,344	510,773,000		~	-131,000		~	20%
(2)	_												
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
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(13)													
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(16)													
	<u> </u>												

Schedule R (F	orm 990) 2013 Page	5
Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions).	Ť
-	Trovide additional information for responses to questions on senedule in (see instructions).	_

AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF

SCIENCE INC

Form: Schedule R 13-1623886

Page: 1

Line Number: Part II

Description of Identification of Related Tax-Exempt Organizations

Name and EIN WEIZMANN INSTITUTE OF SCIENCE

Address PO BOX 26

REHOVOT ISRAEL 76100, Israel

Primary activities SCIENTIFIC RESEARCH FOR THE BENEFIT OF HUMANITY

State or foreign countryIsraelExempt code section501 (C)3Public charity status7Direct controlling entityN/A512(b)(13) controlled organization? No

Name and EIN FEINBERG GRADUATE SCHOOL OF THE WEIZMANN INSTITUTE

Address 633 THIRD AVE

NEW YORK, NY 10017

Primary activities GRADUATE SCHOOL IN THE FIELDS OF SCIENCES AND MATHEMATICS

State or foreign countryIsraelExempt code section501(C)3Public charity status2Direct controlling entityN/A512(b)(13) controlled organization? No