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Part IIIS

Statement of Program Service Accomplishments (See the instructions.)

1

Briefly describe the organization’s mission

See Additional Data Table

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting or make significant changes in how it conducts any program services?

Yes

No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts 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 \$ 48,324,000 including grants of \$ 46,255,000 ) (Revenue \$ 0 )

FUNDS WERE TRANSMITTED 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

4b

(Code ) (Expenses \$ 5,031,000 including grants of \$ 5,031,000 ) (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 \$ )

4d

Other program services (Describe in Schedule O )














(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

4e






Total program service expenses \$ 53,355,000

Must equal Part IX, Line 25, column (B).

**Part IV Checklist of Required Schedules**

		Yes	No
<b>1</b>	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	<b>1</b>	Yes
<b>2</b>	Is the organization required to complete Schedule B, Schedule of Contributors? 	<b>2</b>	Yes
<b>3</b>	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	<b>3</b>	No
<b>4</b>	Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II.</i> 	<b>4</b>	Yes
<b>5</b>	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III.</i>	<b>5</b>	
<b>6</b>	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>	<b>6</b>	No
<b>7</b>	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	<b>7</b>	No
<b>8</b>	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	<b>8</b>	Yes
<b>9</b>	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>	<b>9</b>	No
<b>10</b>	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	<b>10</b>	Yes
<b>11</b>	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i> 	<b>11</b>	Yes
<b>12</b>	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	<b>12</b>	Yes
<b>13</b>	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	<b>13</b>	No
<b>14a</b>	Did the organization maintain an office, employees, or agents outside of the U.S.?	<b>14a</b>	No
<b>b</b>	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I.</i> 	<b>14b</b>	Yes
<b>15</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II.</i> 	<b>15</b>	Yes
<b>16</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III.</i>	<b>16</b>	No
<b>17</b>	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I.</i> 	<b>17</b>	Yes
<b>18</b>	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> 	<b>18</b>	Yes
<b>19</b>	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	<b>19</b>	No
<b>20</b>	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	<b>20</b>	No
<b>21</b>	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	<b>21</b>	No
<b>22</b>	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	<b>22</b>	No
<b>23</b>	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J.</i> 	<b>23</b>	Yes
<b>24a</b>	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25.</i> 	<b>24a</b>	Yes
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>	No
<b>c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24c</b>	No
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<b>24d</b>	No
<b>25a</b>	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? <i>If "Yes," complete Schedule L, Part I.</i>	<b>25a</b>	No
<b>b</b>	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I.</i>	<b>25b</b>	No
<b>26</b>	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>	<b>26</b>	No
<b>27</b>	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>	<b>27</b>	No

**Part IV Checklist of Required Schedules** *(Continued)*

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> . . . . . 	<b>28a</b> Yes	
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28b</b>	No
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . . 	<b>28c</b> Yes	
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	<b>29</b> Yes	
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>30</b>	No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	<b>31</b>	No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>	No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	<b>33</b>	No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . . 	<b>34</b> Yes	
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>35</b>	No
<b>36</b>	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> . . . . .	<b>36</b>	No
<b>37</b>	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . . 	<b>37</b> Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .	1a46		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .	2a116		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . <b>Note:</b> <i>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.</i>	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b	Yes	
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	Yes	
b	If "Yes," enter the name of the foreign country <u>GM , IS</u> See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ? . . . . .	5c		
6a	Did the organization solicit any contributions that were not tax deductible? . . . . .	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? . . . . .	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	7h		
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8		
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>			
a	Did the organization make any taxable distributions under section 4966? . . . . .	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b		
10	<i>Section 501(c)(7) organizations.</i> Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b		
11	<i>Section 501(c)(12) organizations.</i> Enter			
a	Gross income from members or shareholders . . . . .	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .	11b		
12a	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b		

Part VI

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

1a

Enter the number of voting members of the governing body

1a

152

b

Enter the number of voting members that are independent

1b

151

2

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

2

Yes

3

Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?

3

No

4

Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?

4

No

5

Did the organization become aware during the year of a material diversion of the organization's assets?

5

No

6

Does the organization have members or stockholders?

6

No

7a

Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

7a

No

b

Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

7b

No

8

Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

a

the governing body?

8a

Yes

b

each committee with authority to act on behalf of the governing body?

8b

Yes

9a

Does the organization have local chapters, branches, or affiliates?

9a

No

b

If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?

9b

10

Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990

10

No

11

Is there any officer, director or 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

11

No

Section B. Policies

12a

Does the organization have a written conflict of interest policy? If "No", go to line 13

12a

Yes

b

Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12b

Yes

c

Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

12c

Yes

13

Does the organization have a written whistleblower policy?

13

Yes

14

Does the organization have a written document retention and destruction policy?

14

Yes

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

a

The organization's CEO, Executive Director, or top management official?

15a

Yes

b

Other officers or key employees of the organization?

15b

Yes

Describe the process in Schedule O

16a

Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

16a

No

b

If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

16b

Section C. Disclosure

17

List the States with which a copy of this Form 990 is required to be filed

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

18

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ own website ☐ another's website ☒ upon request

19

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.

20

State the name, physical address, and telephone number of the person who possesses the books and records of the organization.  
HENRY PAVONY  
633 THIRD AVE  
NEW YORK, NY 10017  
(212) 895-7900

Form 990 (2008)

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

☐ Check this box if the organization did not compensate any officer, director, trustee or key employee

Form **990** (2008)



(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
<b>1b Total . . . . .</b>									4,161,000	0	648,000

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

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
SANDHURST ASSOCIATES 299 PARK AVENUE 42ND FL NEW YORK, NY 10171	MAINTENANCE SERVICES	167,000
GERALD LAWRENCE BLUMBERG LLP 521 FIFTH AVE NEW YORK, NY 10022	LEGAL SERVICES	121,000
STATE STREET GLOBAL ADVISORS 225 FRANKLIN STREET BOSTON, MA 02110	INVESTMENT ADVISORS	116,000
GRANTH THORNTON LLP 666 THIRD AVE NEW YORK, NY 10017	ACCOUNTING SERVICES	109,000
JANINE GORDON ASSOCIATES 11 EAST 26TH STREET NEW YORK, NY 10010	PUBLIC RELATIONS	102,000

2	Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization . . . . .	6
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Part VIII

Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514			
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . . . .	1a	0						
	b	Membership dues . . . . .	1b	0						
	c	Fundraising events . . . . .	1c	1,540,000						
	d	Related organizations . . . . .	1d	0						
	e	Government grants (contributions)	1e	4,497,000						
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	43,790,000						
	g	Noncash contributions included in lines 1a-1f \$ 116,000								
	h	Total (Add lines 1a-1f) . . . . .		49,827,000						
	Program Service Revenue	2a		Business Code						
b										
c										
d										
e										
f		All other program service revenue								
g		Total. Add lines 2a-2f . . . . .								
0										
Other Revenue		3	Investment income (including dividends, interest other similar amounts) . . . . .		6,287,000	0	-293,000	6,580,000		
	4	Income from investment of tax-exempt bond proceeds . . . . .		0	0	0	0			
	5	Royalties . . . . .		0	0	0	0			
	6a	Gross Rents	(i) Real	(ii) Personal						
			0	0						
			b	Less rental expenses					0	0
			c	Rental income or (loss)					0	0
			d	Net rental income or (loss) . . . . .					0	0
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other						
			24,005,000	0						
			b	Less cost or other basis and sales expenses					42,697,000	0
			c	Gain or (loss)					-18,692,000	0
			d	Net gain or (loss) . . . . .					-18,692,000	-18,692,000
	8a	Gross income from fundraising events (not including \$ 969,000 of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 . . . . .	a	1,540,000						
			b	Less direct expenses . . . . .					b	2,364,000
			c	Net income or (loss) from fundraising events . . . . .					-1,395,000	0
	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 . . . . .	a	0						
			b	Less direct expenses . . . . .					b	0
			c	Net income or (loss) from gaming activities . . . . .					0	0
	10a	Gross sales of inventory, less returns and allowances . . . . .	a	0						
			b	Less cost of goods sold . . . . .					b	0
			c	Net income or (loss) from sales of inventory . . . . .					0	0
	Miscellaneous Revenue		Business Code							
11a										
b										
c										
d	All other revenue									
e	Total. Add lines 11a-11d . . . . .									
0										
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . .			36,027,000	-18,692,000	-293,000	5,185,000			

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) but are not required to complete columns (B), (C), and (D).					
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	51,286,000	51,286,000		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees . . . . .	4,809,000	239,000	357,000	4,213,000
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0	0	0	0
7	Other salaries and wages	3,200,000	248,000	0	1,706,000
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	783,000	62,000	162,000	559,000
9	Other employee benefits . . . . .	1,006,000	63,000	201,000	742,000
10	Payroll taxes . . . . .	545,000	31,000	107,000	407,000
11	Fees for services (non-employees)				
a	Management . . . . .	83,000	0	0	83,000
b	Legal . . . . .	61,000	0	8,000	53,000
c	Accounting . . . . .	105,000	0	105,000	0
d	Lobbying . . . . .	0	0	0	0
e	Professional fundraising See Part IV, line 17 . . . . .	40,000			40,000
f	Investment management fees . . . . .	1,848,000	0	1,848,000	0
g	Other . . . . .	851,000	314,000	6,000	531,000
12	Advertising and promotion . . . . .	0	0	0	0
13	Office expenses . . . . .	164,000	4,000	94,000	66,000
14	Information technology . . . . .	0	0	0	0
15	Royalties . . . . .	0	0	0	0
16	Occupancy . . . . .	1,236,000	82,000	301,000	853,000
17	Travel . . . . .	389,000	31,000	28,000	330,000
18	Payments of travel or entertainment expenses for any Federal, state or local public officials . . . . .	0	0	0	0
19	Conferences, conventions and meetings . . . . .	14,000	0	1,000	13,000
20	Interest . . . . .	16,000	0	0	16,000
21	Payments to affiliates . . . . .	0	0	0	0
22	Depreciation, depletion, and amortization . . . . .	456,000	16,000	82,000	358,000
23	Insurance . . . . .	106,000	0	106,000	0
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
a	Science Programs	1,105,000	286,000	0	819,000
b	TELEPHONE	201,000	8,000	25,000	168,000
c	UBIT TAX	191,000	0	191,000	0
d	RENTAL EQUIPMENT	246,000	4,000	72,000	170,000
e	PRINTING	1,054,000	651,000	0	403,000
f	All other expenses	407,000	30,000	38,000	339,000
25	Total functional expenses. Add lines 1 through 24f	70,202,000	53,355,000	4,978,000	11,869,000
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
Assets	<b>1</b> Cash—non-interest-bearing . . . . .	6,332,000	<b>1</b>	342,000
	<b>2</b> Savings and temporary cash investments . . . . .	0	<b>2</b>	10,823,000
	<b>3</b> Pledges and grants receivable, net . . . . .	152,412,000	<b>3</b>	142,065,000
	<b>4</b> Accounts receivable, net . . . . .	0	<b>4</b>	0
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i> . . . . .	0	<b>5</b>	0
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i> . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use . . . . .	0	<b>8</b>	0
	<b>9</b> Prepaid expenses and deferred charges . . . . .	0	<b>9</b>	0
	<b>10a</b> Land, buildings, and equipment cost basis	<b>10a</b> 10,723,000		
	<b>b</b> Less accumulated depreciation <i>Complete Part VI of Schedule D</i> . . . . .	<b>10b</b> 2,207,000	8,783,000	<b>10c</b> 8,516,000
	<b>11</b> Investments—publicly traded securities . . . . .	16,710,000	<b>11</b>	15,721,000
	<b>12</b> Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i> . . . . .	464,306,000	<b>12</b>	357,842,000
	<b>13</b> Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i> . . . . .	0	<b>13</b>	
	<b>14</b> Intangible assets . . . . .	0	<b>14</b>	0
	<b>15</b> Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i> . . . . .	2,622,000	<b>15</b>	3,601,000
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	651,165,000	<b>16</b>	538,910,000	
Liabilities	<b>17</b> Accounts payable and accrued expenses . . . . .	4,709,000	<b>17</b>	3,566,000
	<b>18</b> Grants payable . . . . .	0	<b>18</b>	0
	<b>19</b> Deferred revenue . . . . .	0	<b>19</b>	0
	<b>20</b> Tax-exempt bond liabilities . . . . .	8,830,000	<b>20</b>	8,830,000
	<b>21</b> Escrow account liability <i>Complete Part IV of Schedule D</i> . . . . .	0	<b>21</b>	0
	<b>22</b> Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i> . . . . .	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	227,000	<b>23</b>	227,000
	<b>24</b> Unsecured notes and loans payable . . . . .	0	<b>24</b>	0
	<b>25</b> Other liabilities <i>Complete Part X of Schedule D</i> . . . . .	20,066,000	<b>25</b>	18,474,000
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	33,832,000	<b>26</b>	31,097,000
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	102,975,000	<b>27</b>	2,662,000
	<b>28</b> Temporarily restricted net assets . . . . .	82,968,000	<b>28</b>	85,883,000
	<b>29</b> Permanently restricted net assets . . . . .	431,390,000	<b>29</b>	419,268,000
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
	<b>33</b> Total net assets or fund balances . . . . .	617,333,000	<b>33</b>	507,813,000
	<b>34</b> Total liabilities and net assets/fund balances . . . . .	651,165,000	<b>34</b>	538,910,000

**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	<b>2a</b> Yes	
<b>b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	<b>2b</b> Yes	
<b>c</b>	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . .	<b>2c</b> Yes	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	<b>3a</b>	No
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? . . . . .	<b>3b</b>	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.  
Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC	Employer identification number 13-1623886
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Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization )

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in <b>Section 170(b)(1)(A)(i).</b>
2	<input type="checkbox"/>	A school described in <b>Section 170(b)(1)(A)(ii).</b> (Attach Schedule E )
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in <b>Section 170(b)(1)(A)(iii).</b> (Attach Schedule H )
4	<input type="checkbox"/>	A medical research organization operated in conjunction with a hospital described in <b>Section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state
5	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>Section 170(b)(1)(A)(iv).</b> (Complete Part II )
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in <b>Section 170(b)(1)(A)(v).</b>
7	<input checked="" type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>Section 170(b)(1)(A)(vi)</b> (Complete Part II )
8	<input type="checkbox"/>	A community trust described in <b>Section 170(b)(1)(A)(vi)</b> (Complete Part II )
9	<input type="checkbox"/>	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See <b>Section 509(a)(2).</b> (Complete Part III )
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety See <b>Section 509(a)(4).</b> (See instructions )
11	<input type="checkbox"/>	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 <b>Section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h a <input type="checkbox"/> Type I      b <input type="checkbox"/> Type II      c <input type="checkbox"/> Type III - Functionally Integrated      d <input type="checkbox"/> Type III - Other
e	<input type="checkbox"/>	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)
f	<input type="checkbox"/>	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	<input type="checkbox"/>	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?
h	<input type="checkbox"/>	Provide the following information about the organizations the organization supports

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 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.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	46,816,000	75,841,000	110,511,000	79,327,000	47,788,000	360,283,000
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
<b>4 Total.</b> Add line 1-3	46,816,000	75,841,000	110,511,000	79,327,000	47,788,000	360,283,000
<b>5</b> The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						69,099,000
<b>6 Public Support</b> subtract line 5 from line 4						291,184,000

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4	46,816,000	8,424,000	110,511,000	79,327,000	47,788,000	360,283,000
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,585,000	8,424,000	9,505,000	8,028,000	6,287,000	39,829,000
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on	0	341,000	36,000	602,000	-293,000	686,000
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )	1,787,000	1,466,000	1,327,000	712,000	969,000	6,261,000
<b>11 Total Support</b> (Add lines 7 through 10)						407,059,000
<b>12</b> Gross receipts from related activities, etc (See instructions )					<b>12</b>	

**13 First Five Years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ☐

Computation of Public Support Percentage

<b>14</b> Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	<b>14</b>	<b>71.534 %</b>
<b>15</b> Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	<b>15</b>	<b>71 %</b>

- 16a 33 1/3% Test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

☒
- b 33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

☐
- 17a 10% Facts and Circumstances Test - 2008.** 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 organization

☐
- b 10% Facts and Circumstances Test - 2007.** 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 supported organization

☐
- 18 Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

☐

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total Add lines 1-5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
cTotal of lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
13Total Support (Add lines 9, 10c, 11 and 12)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Computation of Public Support Percentage		
15Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16Public Support Percentage for 2007 Schedule A, Part IV -A, line 27g	16	

Computation of Investment Income Percentage		
17Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18Investment Income Percentage from 2007 Schedule A, Part IV -A, line 27h	18	
19a33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

**Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test
OTHER INCOME- IS INCOME DERIVED FROM SPECIAL FUNDRAISING EVENTS



Additional Data

Software ID:

Software Version:

EIN: 13-1623886

Name: AMERICAN COMMITTEE FOR THE WEIZMANN  
INSTITUTE OF SCIENCE INC

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Aarenau , Mr	2	X						0	0	0
Aaron , Mr	5	X						0	0	0
Abraham , Mr	5	X						0	0	0
Abramson , Mr	2	X						0	0	0
Abramson , Mrs	6	X						0	0	0
Altman , Dr	2	X						0	0	0
Leafman Appelbaum , Ms	5	X						0	0	0
Applebaum , Mr	2	X						0	0	0
Arbus , Ms	2	X						0	0	0
Asher , Mr	2	X						0	0	0
Begam , Mr	2	X						0	0	0
Belfer , Mr	2	X						0	0	0
Bennett , Mr	2	X						0	0	0
Berkman , Mr	6	X						0	0	0
Bernick , Mr	2	X						0	0	0
Birbach , Mrs	2	X						0	0	0
Bloomgarden , Dr	2	X						0	0	0
Blum , Mr	2	X						0	0	0
Blumberg Esq , Mr	5	X						0	0	0
Blumenstein , Mrs	2	X						0	0	0
Cannold , Mr	2	X						0	0	0
Chaltiel , Mr	2	X						0	0	0
Chefitz , Mr	2	X						0	0	0
Cohen , Mr	2	X						0	0	0
Cohen , Mrs	2	X						0	0	0
Crown , Mr	5	X						0	0	0
Cyker , Mr	2	X						0	0	0
Davidson , Ms,	2	X						0	0	0
Dekker , Mr	2	X						0	0	0
Allen Dick , Mr	2	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Diller , Mrs	2	X						0	0	0
Dockser , Mrs	5	X						0	0	0
Eizenstat Esq , Mr	2	X						0	0	0
Ezralow , Mr	2	X						0	0	0
Fairweather , Mr	5	X						0	0	0
Fairweather , Ms	5	X						0	0	0
Federman , Mr	2	X						0	0	0
Feldman , Dr	2	X						0	0	0
Fischer , Mr	5	X						0	0	0
Flug , Ms	5	X						0	0	0
Forman , Mr	2	X						0	0	0
Friedman , Mr	2	X						0	0	0
Friedman , Dr	5	X						0	0	0
Gardner , Mr	5	X						0	0	0
Gartner , Ms	2	X						0	0	0
Ginsburg Esq , Mr	2	X						0	0	0
Goldberg , Dr	2	X						0	0	0
Goldsmith , Mr	2	X						0	0	0
Grant , Mr	2	X						0	0	0
David Greenberg , Mr	5	X						0	0	0
Grodetsky , Mr	2	X						0	0	0
Gross , Dr	2	X						0	0	0
Gruber , Mrs	5	X						0	0	0
Guerin , Mr	2	X						0	0	0
Guerin , Mrs	2	X						0	0	0
Gurwin , Mrs	2	X						0	0	0
Haas , Dr	2	X						0	0	0
Haftel , Mr	2	X						0	0	0
Hankin , Mr	2	X						0	0	0
Hayman , Mrs	5	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Hollander , Mr	2	X						0	0	0
Imberman , Mrs	2	X						0	0	0
Jacobson , Mrs	2	X						0	0	0
Jaffe , Mrs	5	X						0	0	0
Kamins , Mr	2	X						0	0	0
Feinberg Kany , Ms	2	X						0	0	0
Kaufman , Mr	2	X						0	0	0
Eisenberg Keefer , Mrs	2	X						0	0	0
Kekst , Mr	5	X						0	0	0
Kimmel , Mrs	5	X						0	0	0
Kirk , Mr	5	X						0	0	0
Koff , Mr	2	X						0	0	0
Laster , Mr	2	X						0	0	0
Lawrence , Dr	2	X						0	0	0
Leibowitz , Dr	2	X						0	0	0
Levites , Mr	2	X						0	0	0
Levy , Dr	5	X						0	0	0
Levy , Mr	3	X						0	0	0
Lipkin , Mr	2	X						0	0	0
Machinist , Mr	5	X						0	0	0
Mancher , Mrs	2	X						0	0	0
Meadow , Mr	2	X						0	0	0
Merlo , Ms	5	X						0	0	0
Millman , Mr	2	X						0	0	0
Mondry , Mr	5	X						0	0	0
Moross , Mr	2	X						0	0	0
Morse , Mr	7	X						0	0	0
Morton , Mr	6	X						0	0	0
Mutchnik , Ms	2	X						0	0	0
Myers , Ms	2	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Nathan , Mrs	2	X						0	0	0
Nathan , Mr	2	X						0	0	0
Oppenheimer , Mr	2	X						0	0	0
Oster , Dr	3	X						0	0	0
Pappas , Mr	2	X						0	0	0
Parnes , Mr	2	X						0	0	0
Perlmutter , Ms	2	X						0	0	0
Perry , Mr	2	X						0	0	0
Petschek , Mr	2	X						0	0	0
Pickman , Mr	2	X						0	0	0
Polak , Mr	2	X						0	0	0
Pollack , Mr	6	X						0	0	0
Pritzker , Mr	2	X						0	0	0
Ratner Salzberg , Ms	2	X						0	0	0
Rifkind , Dr	2	X						0	0	0
Rochli , Mrs	2	X						0	0	0
Rom-Rymer , Dr	2	X						0	0	0
Rosenblum , Mrs	2	X						0	0	0
Roth , Mr	5	X						0	0	0
Small Savitsky , Ms	2	X						0	0	0
Schaefer , Ms	2	X						0	0	0
Schaefer , Mr	2	X						0	0	0
Schenkman , Dr	5	X						0	0	0
Schoenheimer , Mr	5	X						0	0	0
Schupf , Mrs	2	X						0	0	0
Schwarz , Mr	2	X						0	0	0
Schwartz , Dr	5	X						0	0	0
Schwarz Kassin , Ms	2	X						0	0	0
Shapell , Mrs	2	X						0	0	0
Shapell , Mr	2	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sherman , Dr	2	X						0	0	0
Silberberg , Mrs	2	X						0	0	0
Silva , Mr	5	X						0	0	0
Simmons , Mr	2	X						0	0	0
Skolnick , Mr	2	X						0	0	0
Sohnis , Mr	2	X						0	0	0
Spanier , Mr	2	X						0	0	0
Steinberg , Mr	6	X						0	0	0
Sterman , Mr	2	X						0	0	0
Sternberg , Mr	2	X						0	0	0
Stone , Mr	2	X						0	0	0
Stulman , Mr	2	X						0	0	0
Susskind , Mrs	2	X						0	0	0
Sussman , Mr	5	X						0	0	0
Taylor , Mr	2	X						0	0	0
Teplow , Mr	5	X						0	0	0
Teplow , Mr	7	X						0	0	0
Waksal , Dr	6	X						0	0	0
Waring , Mr	6	X						0	0	0
Weiss , Mrs	2	X						0	0	0
Weissman , Mrs	2	X						0	0	0
Weissman , Dr	2	X						0	0	0
Weksel , Mr	2	X						0	0	0
Wiener , Mr	4	X						0	0	0
Willner , Dr	5	X						0	0	0
Wolfensohn , Mr	2	X						0	0	0
Wolfensohn , Mrs	2	X						0	0	0
Zaffaroni , Dr	2	X						0	0	0
Zimmerman , Mr	2	X						0	0	0
Zoller , Ms	5	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Zucker , Mr	2	X						0	0	0
Zuckerberg , Mr	2	X						0	0	0
JAY LEIPZIG , SENIOR VICE PRESIDENT, RESOURCE DEVELOPMENT	35			X				324,500	0	89,800
MARSHALL LEVIN , EXECUTIVE VICE PRESIDENT	35			X				281,100	0	55,200
HENRY PAVONY , CHIF FINANCIAL OFFICER	35			X				275,100	0	82,200
ADLER HAROLD , SENIOR VICE PRESIDENT	35			X				251,700	0	97,100
MICHAEL ABIDOR , SENIOR VICE PRESIDENT	35			X				243,600	0	57,600
STEVEN MEYERS , VICE PRESIDENT	35				X			213,600	0	26,300
HERMAN NEIDITCH , VICE PRESIDENT	35				X			212,900	0	26,100
JEFFREY SUSSMAN , VICE PRESIDENT	35				X			212,700	0	26,100
MARK FELDMAN , REGIONAL DIRECTOR	35					X		184,500	0	33,500
JANIS RABIN , REGIONAL DIRECTOR	35					X		176,200	0	23,600
VIRGINIA SAIFER , DIRECTOR	35					X		159,200	0	30,300
LYNN EFFRON , DIRECTOR	35					X		144,100	0	30,300
RICHARD ENSLEIN , DIRECTOR	35					X		141,400	0	17,600
TINA BEGLEITER , DIRECTOR	35					X		137,000	0	20,300
DAPHNA RUBY , DIRECTOR	35					X		135,900	0	29,000
MARTIN KRAAR , EXECUTIVE VICE PRESIDENT	0						X	1,067,500	0	3,000

**Form 990, Part III, Line 1 - Briefly describe the organization's mission:**

THE AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE ORCHESTRATES SUPPORT IN THE UNITED STATES FOR THE VIBRANT WORLD-RENOWNED SCIENTIFIC RESEARCH CENTER AND GRADUATE UNIVERSITY IN ISRAEL. 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.

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Political Campaign and Lobbying Activities

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

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

OMB No 1545-0047

2008

Open to Public Inspection

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

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

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- 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)
- Section 501(c)(4), (5), or (6) organizations    complete Part III

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

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.)

- 1

Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2

Political expenditures

\$
- 3

Volunteer hours

Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)

- 1

Enter the amount of any excise tax incurred by the organization under section 4955

\$
- 2

Enter the amount of any excise tax incurred by organization managers under section 4955

\$
- 3

If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?

☐ Yes

☐ No
- 4a

Was a correction made?

☐ Yes

☐ No
- b

If "Yes," describe in Part IV

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.)

- 1

Enter the amount directly expended by the filing organization for section 527 exempt function activities

\$
- 2

Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt funtion activities

\$
- 3

Total of direct and indirect exempt function expenditures    Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b

\$
- 4

Did the filing organization file **Form 1120-POL** for this year?

☐ Yes

☐ No
- 5

State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made    Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC)    If additional space is needed, provide information in Part IV

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



Part II-A

To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

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

Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		5,000	
c Total lobbying expenditures (add lines 1a and 1b)		5,000	
d Other exempt purpose expenditures		68,163,000	
e Total exempt purpose expenditures (add lines 1c and 1d)		68,168,000	
f Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000		1,000,000	
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000	
h Subtract line 1g from line 1a Enter -0- if line g is more than line a		0	
i Subtract line 1f from line 1c Enter -0- if line f is more than line c		0	
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	40,000	20,000	6,000	5,000	71,000
d Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line d, column (e))					1,500,000
f Grassroots lobbying expenditures	0	0	0	0	0

Part II-B

To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

		(a)		(b)
		Yes	No	Amount
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			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines c through i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i	Other activities If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes" enter the amount of any tax incurred under section 4912			
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

		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 carryover lobbying and political expenditures from the prior year?	3	

Part III-B

To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

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

Part IV

Supplemental Information

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

Identifier	Return Reference	Explanation
SchC_P2A_S00_L01a	Schedule C, Part II-A, Line 1a	EXPENSES TO PROMOTE CONTINUATION OF FEDERAL GRANTS

## Supplemental Information

Identifier	Return Reference	Explanation
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SCHEDULE D  
(Form 990)

Supplemental Financial Statements

Department of the Treasury  
Internal Revenue Service

OMB No 1545-0047

2008

Open to Public Inspection

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

Employer identification number  
13-1623886

Part I 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? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area☐ Protection of natural habitat☐ Preservation of certified historic structure☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

4

Number of states where property subject to conservation easement is located ▶

5

Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

☐ Yes☐ No

6

Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ▶

7

Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)	Revenues included in Form 990, Part VIII, line 1	▶ \$	0
(ii)	Assets included in Form 990, Part X	▶ \$	111,000

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a	Revenues included in Form 990, Part VIII, line 1	▶ \$	0
b	Assets included in Form 990, Part X	▶ \$	0

Part III

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☒ Other ON DISPLAY FOR PUBLIC

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain why in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance . . . . .	431,390,000				
b Contributions . . . . .	13,404,000				
c Investment earnings or losses . . . . .	0				
d Grants or scholarships . . . . .	0				
e Other expenditures for facilities and programs . . . . .	25,526,000				
f Administrative expenses . . . . .	0				
g End of year balance . . . . .	419,268,000				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment 0 %

b

Permanent endowment 1 00 %

c

Term endowment 0 %

3a

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

(i) unrelated organizations . . . . .

(ii) related organizations . . . . .

3a(i)

No

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land . . . . .	0	0		0
b Buildings . . . . .	9,256,000	0	1,116,000	8,140,000
c Leasehold improvements . . . . .	0	0	0	0
d Equipment . . . . .	1,467,000	0	1,091,000	376,000
e Other . . . . .	0	0	0	0
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				8,516,000

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products	0	F
Closely-held equity interests	0	F
Other WEIZMANN GLOBAL ENDOWMENT FUND, L P	357,842,000	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )	357,842,000	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Art Collection	111,000
Other assets	2,299,000
Real Estate	1,191,000
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	3,601,000

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount
Federal Income Taxes	0
Annuity Payment Liability	15,627,000
Due To Affiliate	2,847,000
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	18,474,000

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	36,027,000
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	70,202,000
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-34,175,000
4	Net unrealized gains (losses) on investments	4	-75,345,000
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	-75,345,000
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-109,520,000

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	-41,357,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	-75,345,000
b	Donated services and use of facilities . . . . .	2b	0
c	Recoveries of prior year grants . . . . .	2c	0
d	Other (Describe in Part XIV) . . . . .	2d	0
e	Add lines 2a through 2d . . . . .	2e	-75,345,000
3	Subtract line 2e from line 1 . . . . .	3	33,988,000
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	0
b	Other (Describe in Part XIV) . . . . .	4b	2,039,000
c	Add lines 4a and 4b . . . . .	4c	2,039,000
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	36,027,000

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements . . . . .	1	68,163,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	0
b	Prior year adjustments . . . . .	2b	0
c	Losses reported on Form 990, Part IX, line 25 . . . . .	2c	0
d	Other (Describe in Part XIV) . . . . .	2d	0
e	Add lines 2a through 2d . . . . .	2e	0
3	Subtract line 2e from line 1 . . . . .	3	68,163,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	0
b	Other (Describe in Part XIV) . . . . .	4b	2,039,000
c	Add lines 4a and 4b . . . . .	4c	2,039,000
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	70,202,000

Part XIV

Supplemental Information

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

Identifier	Return Reference	Explanation
SchD_P05_S00_L04	Schedule D, Part V, Line 4	THE FUNDS ARE ENDOWED ACCORDING TO DONORS' DESIGNATION OF THE FUNDS AND THE ALLOWABLE SPENDING RATE IS TRANSMITTED TO THE WEIZMANN INSTITUTE OF SCIENCE WITH INSTRUCTIONS FOR USE FOR ITS DESIGNATED PURPOSE
SchD_P03_S00_L04	Schedule D, Part III, Line 4	ON DISPLAY FOR PUBLIC VIEWING AT THE WOLFSON HOUSE AT THE WEIZMANN INSTITUTE
SchD_P10_S00_L00	Schedule D, Part X	FIN 48 REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A " MORE LIKELY THAN NOT " THRESHOLD THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN THE ADOPTION OF FIN 48 DID NOT HAVE AN IMPACT ON THE ORGANIZATION'S STATEMENT OF FINANCIAL POSITION OR STATEMENT OF ACTIVITIES THE ORGANIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE ANY UNCERTAIN TAX POSITIONS
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	INVESTMENT EXPENSES AND UBIT EXPENSE ARE NETTED AGAINST REVENUE IN FINANCIAL STATEMENTS AMOUNTS ARE GROSSED UP ON FORM 990
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	INVESTMENT EXPENSES AND UBIT EXPENSE ARE NETTED AGAINST REVENUE IN FINANCIAL STATEMENTS AMOUNTS ARE GROSSED UP ON FORM 990

<b>1</b>	<b>For grantmakers.</b> Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance . . . . .	<input checked="" type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>2</b>	<b>For grant makers.</b> Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States		
<b>3</b>	Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed )		

For Paperwork Reduction Act Notice, see the instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2008



**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . . ☐ ☐  
Use Schedule F-1 if additional space is needed.

[illegible]

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel  
has provided a section 501(c)(3) equivalency letter . . . . . 1

3 Enter total number of other organizations or entities . . . . . 1







Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		NY GALA (event type)	CHICAGO GALA (event type)	9 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts . . . . .	963,000	594,000	952,000
	2	Less Charitable contributions . . . . .	767,000	478,000	295,000
	3	Gross revenue (line 1 minus line 2) . . . . .	196,000	116,000	657,000
Direct Expenses	4	Cash Prizes . . . . .	0	0	0
	5	Non-cash Prizes . . . . .	0	0	0
	6	Rent/Facility costs . . . . .	0	0	0
	7	Other direct expenses . . . . .	487,000	406,000	1,471,000
	8	Direct expense summary Add lines 4 through 7 in column (d) . . . . .			2,364,000
	9	Net income summary Combine lines 3 and 8 in column (d). . . . .			-1,395,000

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1 Gross revenue . . . . .				
Direct Expenses	2 Cash prizes . . . . .				
	3 Non-cash prizes . . . . .				
	4 Rent/facility costs . . . . .				
	5 Other direct expenses . . . . .				
	6 Volunteer labor . . . . .	<div><div><div>Yes</div><div>No</div></div><div><div>%</div></div></div>	<div><div><div>Yes</div><div>No</div></div><div><div>%</div></div></div>	<div><div><div>Yes</div><div>No</div></div><div><div>%</div></div></div>	
	7 Direct expense summary Add lines 2 through 5 in column (d) . . . . .				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) . . . . .				

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____		
a	Is the organization licensed to operate gaming activities in each of these states? . . . . .	9a	
b	If "No," Explain _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain _____		
11	Does the organization operate gaming activities with nonmembers? . . . . .	11	
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? . . . . .	12	

	Yes	No
<b>13</b> Indicate the percentage of gaming activity operated in		
<b>a</b> The organization's facility . . . . . <b>13a</b>		
<b>b</b> An outside facility . . . . . <b>13b</b>		
<b>14</b> Provide the name and address of the person who prepares the organization's gaming/special events books and records		
Name ►		
Address ►		
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . <b>15a</b>		
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
<b>c</b> If "Yes," enter name and address		
Name ►		
Address ►		
<b>16</b> Gaming manager information		
Name ►		
Gaming manager compensation ► \$ _____		
Description of services provided ►		
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor		
<b>17</b> Mandatory distributions		
<b>a</b> Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . <b>17a</b>		
<b>b</b> Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____		

## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 13-1623886  
**Name:** AMERICAN COMMITTEE FOR THE WEIZMANN  
INSTITUTE OF SCIENCE INC

## Form 990 Schedule G - Licensed States

[illegible]

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

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

Employer identification number  
13-1623886

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>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</div><div><div><div><input type="checkbox"/> First class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>b</div><div>If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain</div></div>		
<div><div>2</div><div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</div></div>		
<div><div>3</div><div>Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply</div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div>		
<div><div>4</div><div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a</div></div>		
<div><div>a</div><div>Receive a severance payment or change of control payment?</div></div>		No
<div><div>b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>	Yes	
<div><div>c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div>		No
<div><div>501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.</div></div>		
<div><div>5</div><div>For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</div></div>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 5a or 5b, describe in Part III</div>		No
<div><div>6</div><div>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</div></div>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 6a or 6b, describe in Part III</div>		No
<div><div>7</div><div>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</div></div>		No
<div><div>8</div><div>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 Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III</div></div>		No



**Part II** **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
MARTIN KRAAR	(i)	13,654	0	1,053,892	0	3,019	1,070,565	13,654
	(ii)	0	0	0	0	0	0	0
JAY LEIPZIG	(i)	317,419	0	7,356	89,820	0	414,595	135,626
	(ii)	0	0	0	0	0	0	0
MARSHALL LEVIN	(i)	278,715	0	2,429	39,877	15,267	336,288	118,515
	(ii)	0	0	0	0	0	0	0
HENRY PAVONY	(i)	260,659	0	14,446	80,946	1,322	357,373	132,028
	(ii)	0	0	0	0	0	0	0
ADLER HAROLD	(i)	239,274	0	12,449	77,315	19,796	348,834	119,330
	(ii)	0	0	0	0	0	0	0
MICHAEL ABIDOR	(i)	236,040	0	7,562	37,820	19,796	301,218	113,677
	(ii)	0	0	0	0	0	0	0
STEVEN MEYERS	(i)	209,819	0	3,799	19,350	6,884	239,852	101,989
	(ii)	0	0	0	0	0	0	0
HERMAN NEIDITCH	(i)	210,157	0	2,709	19,170	6,884	238,920	103,109
	(ii)	0	0	0	0	0	0	0
JEFFREY SUSSMAN	(i)	201,845	10,000	818	19,238	6,884	238,785	98,292
	(ii)	0	0	0	0	0	0	0
MARK FELDMAN	(i)	183,244	0	1,208	17,775	15,747	217,974	88,710
	(ii)	0	0	0	0	0	0	0
JANIS RABIN	(i)	173,118	0	3,115	16,074	7,464	199,771	86,340
	(ii)	0	0	0	0	0	0	0
VIRGINIA SAIFER	(i)	157,187	0	2,003	14,625	15,747	189,562	0
	(ii)	0	0	0	0	0	0	0
LYNN EFFRON	(i)	143,152	0	933	14,112	16,176	174,373	0
	(ii)	0	0	0	0	0	0	0
RICHARD ENSLEIN	(i)	139,937	0	1,485	12,750	4,771	158,943	0
	(ii)	0	0	0	0	0	0	0
TINA BEGLEITER	(i)	132,454	0	4,511	12,578	7,708	157,251	0
	(ii)	0	0	0	0	0	0	0
DAPHNA RUBY	(i)	133,533	0	2,379	12,825	16,176	164,913	0
	(ii)	0	0	0	0	0	0	0



<div>Schedule K (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Supplemental Information on Tax Exempt Bonds</div> <div>To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.</div>	OMB No 1545-0047
		2008
		Open to Public Inspection

Name of the organization AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC	Employer identification number 13-1623886
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Part I Bond Issues (Required for 2008)

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
							Yes	No	Yes	No
A	NY CITY INDUSTRIAL DEVELOPMENT AGENCY CIVIC FACILITY REVENUE BOND SERIES A	13-2906040	64971CX41	04-02-2004	5,930,000	FINANCING THE COST OF ACQUISITION OF CONDOMINIUM AT 633 THIRD AE		X		X
B	NY CITY INDUSTRIAL DEVELOPMENT AGENCY CIVIC FACILITY REVENUE BOND SERIES B	13-2906040	64971CX58	04-02-2004	2,900,000	FINANCING THE COST OF ACQUISITION OF CONDOMINIUM UNIT AT 633 THIRD AVE		X		X

Part II Proceeds (Optional for 2008)

		A		B		C		D		E	
1	Total Proceeds of Issue										
2	Gross Proceeds in Reserve Funds										
3	Proceeds in Refunding or Defeasance Escrows										
4	Other Unspent Proceeds										
5	Issuance Costs from Proceeds										
6	Working Capital Expenditures from Proceeds										
7	Capital Expenditures from Proceeds										
8	Year of Substantial Completion										
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue?										
10	Were the bonds issued as part of an advance refunding issue?										
11	Has the final allocation of proceeds been made?										
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?										

Part III Private Business Use (Optional for 2008)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?										
2	Are there any lease arrangements with respect to the financed property which may result in private business use?										

**Part III Private Business Use** *(Continued)*

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts with respect to the financed property which may result in private business use?										
<b>3b</b> Are there any research agreements with respect to the financed property which may result in private business use?										
<b>3c</b> Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
<b>5</b> 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 501(c)(3) organization, or a state or local government										
<b>6</b> Total of lines 4 and 5										
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

**Part IV Arbitrage** *(Optional for 2008)*

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has a Form 8038-T been filed wth respect to the bond issue?										
<b>2</b> Is the bond issue a variable rate issue?										
<b>3a</b> Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
<b>b</b> Name of provider										
<b>c</b> Term of hedge										
<b>4a</b> Were gross proceeds invested in a GIC?										
<b>b</b> Name of provider										
<b>c</b> Term of GIC										
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
<b>5</b> Were any gross proceeds invested beyond an available temporary period?										
<b>6</b> Did the bond issue qualify for an exception to rebate?										

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Transactions with Interested Persons

▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **To be completed by organizations that answered**  
**"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,**  
**or Form 990-EZ, Part V lines 38b or 40b.**

OMB No 1545-0047

2008

Open to Public  
Inspection

<b>Name of the organization</b> AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC	<b>Employer identification number</b> 13-1623886
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II Loans to and/or From Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total . . . . . ▶ \$										

Part III Grants or Assistance Benefitting Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
LAW OFFICES OF GERALD & LAWRENCE BLUMBERG	CHAIRMAN OF THE ORGANIZATION	121,000	FEES FOR LAW SERVICES-AT LESS THAN FAIR MARKET VALUE		No

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Non-Cash Contributions

To be completed by organizations that answered  
"Yes" on Form 990, Part IV, lines 29 or 30.  
Attach to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

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

Employer identification number  
13-1623886

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	22	116,000	COST AT MARKET
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution (historic structures) . . . . .				
14 Qualified conservation contribution (other) . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other (describe _____)				
26 Other (describe _____)				
27 Other (describe _____)				
28 Other (describe _____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .			29	0

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

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

[illegible]

SCHEDULE O  
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

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

Employer identification number  
13-1623886

Identifier	Return Reference	Explanation
F990_P06_S0A_L02	Form 990, Part VI, Section A, Line 2	Gary Abramson and Pennie Abramson husband and w ife David Fairw eather and Jane Fairw eather - husband and w ife Vera Guerin and Paul Guerin husband and w ife Phyllis Gurw in and Laura Flug mother and daughter James Nathan and llene Nathan husband and w ife David Shapell and Fela Shapell husband and w ife Theodore Teplow and David Teplow father and son Al Willner and Jane Bloomgarden father and daughter Al Willner and Joseph Willner father and son Elaine Wolfensohn and Adam Wolfensohn mother and son

Identifier	Return Reference	Explanation
F990_P06_S0A_L10	Form 990, Part VI, Section A, Line 10	THE FORM 990 IS REVIEWED BY SENIOR MANAGEMENT, GRANT THORNTON, AND THE CHAIRMAN OF THE BOARD

Identifier	Return Reference	Explanation
F990_P06_S0B_L12c	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 ALL CONFLICTS WILL BE ADDRESSED BY EXECUTIVE COMMITTEE

Identifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	COMPENSATION OF OFFICERS AND KEY EMPLOYEES IS APPROVED AND REVIEWED BY EXECUTIVE COMMITTEE FOR REASONABLENESS AS COMPARED TO SALARIES IN NON-FOR PROFIT INDUSTRY

Identifier	Return Reference	Explanation
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	COPIES OF AUDITED FINANCIAL STATEMENTS AND FORM 990 SENT TO DONORS UPON REQUEST

Identifier	Return Reference	Explanation
SchG_P01_S00_L02b	Schedule G, Part I, Line 2b	ALICE PINSLEY IS A PROFESSIONAL CONSULTANT FOR PLANNED GIVING DEPARTMENT AND THERE IS NO DIRECT REVENUE ASSOCIATED WITH HER SERVICES



SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.  
▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC

Employer identification number

13-1623886

Part I Identification of Disregarded Entities					
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations					
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
WEIZMANN INSTITUTE OF SCIENCE  PO BOX 26 REHOVOT, ISRAEL 76100 IS	SCIENTIFIC RESEARCH FOR THE BENEFIT OF HUMANITY	IS	EXEMPT		N/A
FEINBERG GRADUATE SCHOOL OF THE WEIZMANN INSTITUTE OF SCIENCE  PO BOX 26 REHOVOT, ISRAEL 76100 IS 13-6227366	GRADUATE SCHOOL IN THE FIELDS OF SCIENCE AND MEDICINE	NY	501(C)(3)	501(C)(3)	N/A

Part III

Identification of Related Organizations Taxable as a Partnership

(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, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproporionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

(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

Part V

Transactions with Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III or IV

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?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

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 transaction thresholds

(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1) WEIZMANN INSTITUTE OF SCIENCE	c	51,286,000
(2)		
(3)		
(4)		
(5)		
(6)		

Schedule R (Form 990) 2008

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.

[illegible]

Software ID: 08000095

Software Version: v1.00

EIN: 13-1623886

Name: AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(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)
		Middle East and North Africa	BASIC SCIENCE RESEARCH, NOTABLY IN THE FIGHT AGAINST DISEASES AND HUNGER, PROTECTION OF THE ENVIRONMENT AND DEVELOPMENT OF NEW TECHNOLOGIES FOR ECONOMIC GROWTH FUNDS FOR GRADUATE SCHOOL AT THE WEIZMANN INSTITUTE OF SCIENCE AND EDUCATIONAL PURPOSES	51,286,000	WIRE TRANSFERS MONTHLY ACCORDING TO DONOR DESIGNATION FOR USE OF FUNDS	0	NONE	N/A

Software ID: 08000095

Software Version: v1.00

EIN: 13-1623886

Name: AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
MARTIN KRAAR	(i) (ii)	13,654 0	0 0	1,053,892 0	0 0	3,019 0	1,070,565 0	13,654 0
JAY LEIPZIG	(i) (ii)	317,419 0	0 0	7,356 0	89,820 0	0 0	414,595 0	135,626 0
MARSHALL LEVIN	(i) (ii)	278,715 0	0 0	2,429 0	39,877 0	15,267 0	336,288 0	118,515 0
HENRY PAVONY	(i) (ii)	260,659 0	0 0	14,446 0	80,946 0	1,322 0	357,373 0	132,028 0
ADLER HAROLD	(i) (ii)	239,274 0	0 0	12,449 0	77,315 0	19,796 0	348,834 0	119,330 0
MICHAEL ABIDOR	(i) (ii)	236,040 0	0 0	7,562 0	37,820 0	19,796 0	301,218 0	113,677 0
STEVEN MEYERS	(i) (ii)	209,819 0	0 0	3,799 0	19,350 0	6,884 0	239,852 0	101,989 0
HERMAN NEIDITCH	(i) (ii)	210,157 0	0 0	2,709 0	19,170 0	6,884 0	238,920 0	103,109 0
JEFFREY SUSSMAN	(i) (ii)	201,845 0	10,000 0	818 0	19,238 0	6,884 0	238,785 0	98,292 0
MARK FELDMAN	(i) (ii)	183,244 0	0 0	1,208 0	17,775 0	15,747 0	217,974 0	88,710 0
JANIS RABIN	(i) (ii)	173,118 0	0 0	3,115 0	16,074 0	7,464 0	199,771 0	86,340 0
VIRGINIA SAIFER	(i) (ii)	157,187 0	0 0	2,003 0	14,625 0	15,747 0	189,562 0	0 0
LYNN EFFRON	(i) (ii)	143,152 0	0 0	933 0	14,112 0	16,176 0	174,373 0	0 0
RICHARD ENSLEIN	(i) (ii)	139,937 0	0 0	1,485 0	12,750 0	4,771 0	158,943 0	0 0
TINA BEGLEITER	(i) (ii)	132,454 0	0 0	4,511 0	12,578 0	7,708 0	157,251 0	0 0
DAPHNA RUBY	(i) (ii)	133,533 0	0 0	2,379 0	12,825 0	16,176 0	164,913 0	0 0