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SCANNED DEC 1 1 2012

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

For the 2011 calendar year, or tax year beginning

► The organization may have to use a copy of this return to satisfy state reporting requirements

, 2011, and ending

Open to Public Inspection

В	Check if a	pplicable	С	DE	mployer Ident	fication Number
	Addr	ess change	AMERICAN FRIENDS OF NETIV ARYEH INC		13-4258	585
	Nam	e change	18 ORCHARD HILL DRIVE	Ет	elephone numi	ber
	\vdash	ıl return	MONSEY, NY 10952		212-812	-0759
	\vdash	ninated				
	\vdash	nded return		G o	ross receipts	\$ 1,866,998.
	\mathbf{H}	ication pending	F Name and address of principal officer	H(a) Is this a group		
	☐ ybbı	ication penuing	,	H(b) Are all affiliat		Yes No
	Tay av	empt status	X 501(c)(3) 501(c) () ◄ (insert no) 4947(a)(1) or 527	If 'No,' attach	a list (see ins	
-		empi status site: ► N/				•
<u> </u>				H(c) Group exemp		
K		forganization	X Corporation Trust Association Other ► L Year of Formation	on 2003	WI State of I	egal domicile DE
Pa	rt I 🔻	Summar		m DELTCT	OIIC	
			be the organization's mission or most significant activities TO SUPPOR			
)ce			LE_SCIENTIFIC_LITERARY_AND/OR_EDUCATIONAL_PRO			
nar			UCATIONAL SCHOLARS & WEEKEND RETREATS ATTENDED			
Ver			RAL_PUBLIC_THAT_WILL_DISCUSS_JEWISH_RELIGIOUS_ bx F			
တိ			oting members of the governing body (Part VI, line 1a)	re triair 25% 0	1 3	3
ಶ			dependent voting members of the governing body (Part VI, line 1b)		4	0 3 0
iţi			of individuals employed in calendar year 2011 (Part V, line 2a)		5	3
Activities & Governance	6 T	otal number	of volunteers (estimate if necessary)		6	0
ď			ed business revenue from Part VIII, column (C), line 12		7a	0.
	b N	let unrelated	business taxable income from Form 990 T, line 34	·, · · · · · · · · · · · · · · · · · ·	7b	0.
				Prior `		Current Year
a			and grants (Part VIII, line; th)	1,93	1,697.	1,866,785.
Revenue	9 P	rogram serv	rice revenue (Part VIII, line 2g)			
eve	10 Ir	ivestment ir	ncome (Part VIII, column (A) lines 3,4, and 7d) 1 [法]		208.	213.
<u>~</u>	11 C	ther revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).	1 03	1 005	1 066 000
_			e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,905.	1,866,998.
			imilar amounts paid (Part IX, column (A), lines 1-3)	1,43	2,000.	1,407,326.
			to or for members (Part IX, column (A), line 4)		0 505	1.60.000
ø			er compensation, employee benefits (Part IX, column (A), lines 5-10)	15	8,525.	160,882.
Expenses	16a P	rofessional	fundraising fees (Part IX, column (A), line 11e)			/ 5 / 131 94
(pe	b T	otal fundrais	sing expenses (Part IX, column (D), line 25) ► 10,500.			
மி	17 C	ther expens	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	30	6,576.	271,885.
			es Add lines 13-17 (must equal Part IX, column (A), line 25)	-	7,101.	1,840,093.
			expenses Subtract line 18 from line 12		4,804.	26,905.
ъ 6		·	<u> </u>	Beginning of C		End of Year
oots or Jancos	20 T	otal assets	(Part X, line 16)		4,294.	201,199.
88		otal liabilitie	s (Part X, line 26)		25.	25.
Net Ass Fund Bal	22 N	let assets or	fund balances Subtract line 21 from line 20	17	4,269.	201,174.
	rt II	Signatur		.1		
		·		the best of my kno	wledge and be	lief, it is true, correct, and
com	plete Dec	laration of prep	eclare that I have examined this return, including accompanying schedules and statements, and to larer (other than officer) is based on all information of which preparer has any knowledge			
		Rec	leve knosses	111	12/201	L
Sig	ın	Signatu	re of officer	Date		
He	re	RIC	HARD GROSSMAN	Presider	nt	
		Type or	print name and title			
		Print/Type p	preparer's name Preparer's signature Date	Check	k X if	PTIN
Pai	d	Neil E	Rosen CPA Neil Rosen CPA 113	ハン self-e		P00281672
	parer	<u> </u>				
	e Only		1004 5	Firm's	s EIN ► 11	-3239164
	,	3 55616	Breoklyn, NY 11230	Phone	/71	
May	the IP	S discuss th	is return with the preparer shown above? (see instructions)	11 11011	· (/ I	X Yes No
_				A0113L 08/18/11		Form 990 (2011)

Form 990 (2011) AMERICAN FRIEND	OS OF NETIV ARYEH INC	13-4258	585 Page 2
Part III Statement of Program S	ervice Accomplishments		
Check if Schedule O contains a	a response to any question in this Part III.		\overline{X}
1 Briefly describe the organization's mis			
See Schedule O			
2 Did the organization undertake any si	gnificant program services during the year which were not liste	ad on the prior	
Form 990 or 990-EZ?	grifficant program services during the year which were not list		Yes X No
If 'Yes,' describe these new services	on Sahadula O	L] 165 K
•		Г	Yes X No
-	g, or make significant changes in how it conducts, any program	n services /	Yes X No
If 'Yes,' describe these changes on S			
4 Describe the organization's program s	service accomplishments for each of its three largest program sizations and section 4947(a)(1) trusts are required to report the	services, as meas	sured by expenses ts and allocations to
others, the total expenses, and reven	ue, if any, for each program service reported	ic amount or grain	ts and anocations to
·			
4a (Code Expenses \$	1,536,569. including grants of \$ 1,407,326.) (Revenue \$	
TO SUPPORT JEWISH LEARN		_) (Nevenue \$	
	YESHIVAT NETIV ARYEH , JERUSALEM, ISRAE		
Intoogn REMITTANCES TO	TESTIVAL MELLY ARIED , SERUSALEM, ISRAE	; <u>_</u>	
		·	
4b (Code Expenses \$	94,217. including grants of \$) (Revenue \$)
SPONSOR LECTURES BY NOT		_) (Neverlue \$	
STONDON LECTORES DI NOI	ED EDUCATIONAL SCHOLARS		
		. — — — — —	-
		. – – – – – –	_
			
4c (Code (Expenses \$	including grants of \$) (Payanua \$	``
40 (Code) (Expenses Ψ	including grants of \(\psi	_) (Nevenue \$	
		-	
		. 	
		. 	
·			
		·	
4d Other program services (Describe in	Schedule ()		
	including grants of \$) (Revenue	s \$,
	1,630,786.	· · ·	
4e Total program service expenses ► BAA	TEEA0102L 07/05/11		Form 990 (2011)
200	ILEAUIUZE U//US/II		(2011)

BAA

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	·	_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	_6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	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? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
ā	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
(c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
(d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	Х	<u></u>
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
ł	f 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	ŀ	

13-4258585 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III Х 22 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete* X Schedule I 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 240 d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I X 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b X Schedule L, Part I 26 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? If 'Yes,' complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If 'Yes,' complete Schedule L, Part III* 27 Х 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28b Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c X Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 31 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part IХ 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, Х 34 line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Х **b** Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 35b Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Х Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 37 Х treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

Note. All Form 990 filers are required to complete Schedule O BAA

38

Х Form 990 (2011)

38

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Check if Schedule O contains a response to any question in this Part V		r.,	
1a Fator the growther generated in Pay 2 of Farm 1000 Fator 0 of anti-collection	6	Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	6		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable (gambling) winnings to prize winners?	le gaming 1c		X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	3		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	.		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 <u>a</u>		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other author financial account in a foreign country (such as a bank account, securities account, or other financial account belif 'Yes,' enter the name of the foreign country ►	ority over, a 4a		Х
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Account	ints		· · · · · · · · · · · · · · · · · · ·
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	, 5b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization stat were not tax deductible?	anization 6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or not tax deductible?	gifts were 6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods services provided to the payor?	and 7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 <u>u</u>		<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was req			
Form 8282?	7c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d		ļ .	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract			X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 88 as required?	399 7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization f Form 1098-C?	ile a 7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess busholdings at any time during the year?	ns. Did the siness 8		
9 Sponsoring organizations maintaining donor advised funds.	2,2		
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	ļ	
10 Section 501(c)(7) organizations. Enter.			
a Initiation fees and capital contributions included on Part VIII, line 12			:
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	٠ ﴿ ،	1	
11 Section 501(c)(12) organizations. Enter	,		
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		ļ	
a Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b	.,		
c Enter the amount of reserves on hand			 ,.
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	X
b If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation in Schedule O</i>	14b		

Form 990 (2011) AMERICAN FRIENDS OF NETIV ARYEH INC 13-4258585 Page 6 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Х Х **b** Each committee with authority to act on behalf of the governing body? 8b 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 Q9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13. 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c See Schedule O Х 13 Did the organization have a written whistleblower policy? 13 14 Х 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15a a The organization's CEO, Executive Director, or top management official b Other officers of key employees of the organization See Schedule Q 15b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a . * b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its <u>Ľ:L</u> participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed **None** Section 6104 requires an organization to make its Forms 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 Another's website X 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 during the tax year See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► ORGANIZATION 18 ORCHARD HILL DRIVE MONSEY NY 10952 845-270-1587

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization	n nor any	relate	d or	gan	ızatı	on co	mpe	nsated any current of	ficer, director, or trus	tee
(A) Name and title	(B) Average hours per week	unles	s per	son is	ition ore the	an one n an offi ustee)	box, cer	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W 2/1099 MISC)	related organizations (W 2/1099 MISC)	from the organization and related organizations
(1) RICHARD GROSSMAN										****
President	10			X				0.	0.	0.
(2) IRA KOFF										
Treasurer	25			X				65,518.	0.	0.
(3) CHAIM EDELSTEIN										
<u>Vice President</u>	10			X				0.	0.	0.
_(4) ILANA SCHEINER KROLL					ľ				_]	_
EXECUTIVE DIRECT	40					_X_		55,250.	0.	0.
_(5)										
(6)										
										
_(8)										
<u>(10)</u>										
<u>(11)</u>										
<u>(12)</u>										
(14)				_						
								<u> </u>		

Part VII. Section A. Officers, Directors, Trust	ees, l	∖ ey	Em			es,	and	Highest Com	pensated Em	ployees (cont)
(A) Name and title	(B) Average hours	box.	, unle	Pos heck ss pe	rson	than is both or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per week (describ e hours for related organi- zations in Sch O)	rector	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organization: (W-2/1099-MISC)	from the organization and related organizations
(15)										
(16)	 									
(17)										
(18)	Ì									
(19)										
(20)										
<u>(21)</u>										
(22)										
(23)										
(24)									+	
(25)										
1 b Sub-total	1	1			1			120,768.	C	0.
c Total from continuation sheets to Part VII, Section	A						>	0. 120,768.		0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limite from the organization ► 0	d to the	ose I	ıste	d ab	ove;) wh	o re		L	
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trus ndıvıdu	stee, <i>al</i>	key	em	ploy	ee,	or h	ighest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	portabl han \$1	le co 50,0	mpe 00?	ensa If '\	tion 'es'	and com	l oth	er compensation e Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or a services rendered to the organization.	ompen comple	satio	on fr chec	om dule	any <i>J fo</i>	unre r sue	elate ch p	ed organization or erson	ındıvıdual	5 X
Section B. Independent Contractors									G #100 000 - f	
Complete this table for your five highest compensation from the organization. Report compe	nsation	epen n for	the	t co cale	ntra	r yea	ar e	nding with or with	in the organization	
(A) Name and business addres	s							Description	of services	(C) Compensation
									_	
									-	
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		t lım	ıted	to t	hose	e list	ed a	above) who receiv	red more than	

Га	t viii Statement of Revenue				
A.P. (1990)	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lins 1a-1f h Total. Add lines 1a-1f	1,866,785.			
PROGRAM SERVICE REVENUE	Business Code 2 a b c d e	1,000,703.			
200	f All other program service revenue				
<u> </u>	g Total. Add lines 2a-2f 3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds ▶	213.	213.		
	5 Royalties (i) Real (ii) Personal 6a Gross rents b Less rental expenses c Rental income or (loss)		He t	4 3	*d#3 \$
	d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)				2
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code 11 a b c	-			
	d All other revenue			_	
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions.	1,866,998.	213.	0.	0.

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)

	Check if Schedule O contains a re	esponse to any question	ı ın this Part IX		
Do l	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				Programme of the control of the cont
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	1,407,326.	1,407,326.		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	65,518.	0.	65,518.	0.
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	83,075.		83,075.	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	12,289.		12,289.	
11	Fees for services (non-employees)		;		
á	a Management				
ŀ) Legal				
•	C Accounting	12,000.		12,000.	
•	i Lobbying				
•	Professional fundraising services See Part IV, line 17				
1	Investment management fees				
ç	g Other				
12	Advertising and promotion				
13	Office expenses	4,170.	2,085.	2,085.	
14	Information technology	,		•	
15	Royalties				
16	Occupancy				
17	Travel	21,875.	21,875.	-	
18		21,010.	21,0,0		
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,532.		1,532.	
23	Insurance	5,282.		5,282.	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	, .			3
:	OUTSIDE SERVICES	183,264.	183,264.	<u> </u>	
	CONFERENCES	12,648.	12,648.		
	GIFTS	10,500.	12,010.		10,500.
	TELELPHONE	7,176.	3,588.	3,588.	20,000.
	All other expenses	13,438.	3,300.	13,438.	
25	Total functional expenses Add lines 1 through 24e	1,840,093.	1,630,786.	198,807.	10,500.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here	2,010,000.	2,000,100.	223,007.	
	SOP 98-2 (ASC 958-720)				
BAA					Form 990 (2011)

Form 990 (2011)

Part X **Balance Sheet** (B) End of year (A) Beginning of year 106,522 134,087 Cash ~ non-interest-bearing 1 2 66,390 2 66,385 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 37,630. 10a 36,908 722 1,387 10b 10 c **b** Less accumulated depreciation 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 174,294 201,199 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses. 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25 25 25 26 Organizations that follow SFAS 117, check here 7 and complete lines 27 through 29 and lines 33 and 34. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Q R Organizations that do not follow SFAS 117, check here > X and complete Áτ FUZD lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 174,269 32 201,174 174,269 201,174. Total net assets or fund balances. 33 174,294 34 201,199. Total liabilities and net assets/fund balances 34

BAA

Forn	990	(2011)	AMERICAN	N FRIENDS	OF NETI	V ARYEH	INC		13·	-4258585	5	Pa	age 12
Pai	t XI	Reco	nciliation o	of Net Asse	ets		<u>-</u>						
	•	Check	ıf Schedule	O contains a i	response to a	ny question	in this Part XI						
										1 1			
1	Total	revenue	e (must equal	Part VIII, col	umn (A), lıne	12)				1		66,	
2	Total	expense	es (must equ	al Part IX, col	lumn (A), lıne	25)				2		40,0	
3	Reve	nue less	expenses S	ubtract line 2	from line 1					3		26,	
4	Net a	ssets or	fund balance	es at beginnin	ng of year (mu	ust equal Par	rt X, line 33, co	olumn (A))		4	1	.74,2	
5	Othe	r change	es in net asse	ts or fund bal	lances (explai	ın ın Schedul	le O)			5			0.
6		issets or nn (B))	fund balance	es at end of y	ear Combine	lines 3, 4, a	and 5 (must eq	ual Part X, line 3	3,	6	2	201,	174.
Pa	t XII	Finan	icial Stater	nents and	Reporting			"					
		Check	ıf Schedule C	contains a r	esponse to ar	ny question i	n this Part XII			·			
					_							Yes	No
1	Acco	untıng m	nethod used t	o prepare the	Form 990 [Cash	X Accrual	Other					3 1
	If the	organiz hedule (ation change	d its method	of accounting	from a prior	year or check	ed 'Other,' explai	ın			** *	3 · }
2	Were	the org	anızatıon's fır	nancial statem	nents compile	d or reviewe	d by an indepe	endent accountar	ıt?		2a		X
ı	Were	the org	anızatıon's fır	nancial staten	nents audited	by an indepe	endent accoun	tant?			2b	X	
•	: If 'Ye revie	es' to line w, or coi	e 2a or 2b, do mpilation of i	es the organ ts financial st	ization have a atements and	a committee I selection of	that assumes r	responsibility for nt accountant?	oversight of	the audit,	2 c	X	
	If the	organız hedule (atıon change)	d either its ov	ersight proce	ss or selection	on process dur	ring the tax year,	explain		~ %		,
•				eck a box be ed basis, or b		e whether th	e financial stat	tements for the y	ear were iss	sued on a	**	* sv	
	X	Separa	te basıs [Consolidat	ed basıs [Both cons	solidated and s	separate basis					لاستنه
3	As a Audit	result of Act and	f a federal aw I OMB Cırcula	rard, was the ar A-133?	organization i	required to u	indergo an aud	lit or audits as se	t forth in the	e Single	3a		X
ı	or au	s,' did th	ne organizatio	on undergo th	e required au	idit or audits?	? If the organiz	zation did not und	dergo the re	quired audit	: 3b		

Form **990** (2011)

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

Name	of the	organization							Employe	r identificat	tion number		
AME	RI	CAN FRIENDS OF								258585			
Parl	: 1	Reason for Publ	ic Charity Status	(All organizations	must o	comple	te this	part.)	See ii	nstruct	ions.		
The o	rga	nization is not a priva	te foundation becaus	e it is (For lines 1 throi	ugh 11,	check o	nly one	box)					
1		A church, convention	of churches or assoc	ciation of churches desc	cribed in	section	170(b)	(1)(A)(i)					
2	П	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ)								
3	П			e organization describe		tion 17	0(b)(1)(A	AXiii).					
4	П		•	in conjunction with a h					0/b\1\/	AYiii) Fr	nter the hos	soital's	
	لسا	name, city, and state							- ()(-)(-	,,,,, –.			
5			ated for the benefit o	f a college or university	owned	or oper	ated by	a gover	nmenta	I unit de	scribed in s	section	n .
6 7	X		normally receives a s	overnmental unit describustantial part of its surt II)					t or fron	n the ger	neral public	: desc	rıbed
8				70(b)(1)(A)(vi). (Complet	te Part I	1)							
9		from activities related investment income a	d to its exempt function) more than 33-1/3% of ons – subject to certair s taxable income (less mplete Part III)	n except	ions, ar	ıd (2) no	more t	han 33-	1/3% of	its support	from	gross
10		An organization orga	nized and operated e	xclusively to test for pu	iblic safe	ety See	section	1 509(a)	(4).				
11		An organization orga more publicly suppor describes the type of	nized and operated e ted organizations des	exclusively for the benef scribed in section 509(a sion and complete lines	fit of, to)(1) or s 11e thr	perform section 5	the fur 509(a)(2 h	ctions o	of, or ca section !	rry out th 5 09(a)(3)	he purpose). Check th	s of or ne box	ne or that
		a ☐ Type I	b Type II	c Type III						d \square	Type III -		
е				anization is not controll than one or more pub		-	_		or more escribed	disqual in section	- 1		
f		If the organization re- check this box	ceived a written dete	rmination from the IRS	that is a	Type I	, Type II	or Typ	e III sup	porting	organizatio	n,	
g		Since August 17, 200	06, has the organizati	on accepted any gift of	r contrib	ution fr	om any	of the fo	llowing	persons	32		I
		(i) A person who o	directly or indirectly of	ontrols, either alone or	togethe	r with pe	ersons d	lescribe	d ın (ıı)	and (III)	11 - 6	Yes	No
		-		oported organization?							11 g (i)		<u> </u>
			er of a person descri	= = = = = = = = = = = = = = = = = = =							11 g (iı)	<u> </u>	-
			•	described in (i) or (ii) a							11 g (iii)		<u> </u>
<u>h</u>				e supported organizatio	on(s)		ī						
		(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (your go	Is the ration in	the organ	rou notify nization in n (i) of upport?	organiz colur organize	s the sation in in (i) ed in the S ?	(vii) Amou	nt of sup	port
					Yes	No	Yes	No	Yes	No			
<u>(A)</u>		,											
<u>(B)</u>													
(C)						<u></u>							
<u>(D)</u>		-											
<u>(E)</u>				A.									
Takal						1							

Schedule A (Form 990 or 990-EZ) 2011 AMERICAN FRIENDS OF NETIV ARYEH INC 13-4258585 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

	· · · · · · · · · · · · · · · · · · ·				·		
Sec	tion A. Public Support	,			Υ		
	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')	2,301,882.	1,976,002.	1,659,288.	1,931,697.	1,866,785.	9,735,654.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	2,301,882.	1,976,002.	1,659,288.	1,931,697.	1,866,785.	9,735,654.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	, ,					0.
6	Public support. Subtract line 5 from line 4					,	9,735,654.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	2,301,882.	1,976,002.	1,659,288.	1,931,697.	1,866,785.	9,735,654.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	10,016.	2,133.	343.	208.		12,700.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
11	Total support. Add lines 7 through 10	* * * * * * * * * * * * * * * * * * * *	* * *				9,748,354.
12	Gross receipts from related activ	vities, etc (see ins	tructions)			12	0.
	First five years. If the Form 990 organization, check this box and	stop here	·	nd, third, fourth, c	or fifth tax year as	a section 501(c)((3)
	tion C. Computation of Pu						00.00
	Public support percentage for 20	•	``	ne 11, column (f))		14	99.87 % 99.78 %
	Public support percentage from 33-1/3% support test — 2011. If	the organization d	lid not check the	box on line 13, ar	nd the line 14 is 3	15. 3-1/3% or more, o	
t	and stop here. The organization 33-1/3% support test — 2010. If and stop here. The organization	the organization d	lid not check a bo	ox on line 13 or 16	oa, and line 15 is	33-1/3% or more,	
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop he	re. Explain in Part	t IV how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and stop he a publicly support	re. Explain in Part ted organization	t IV how the ▶
	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a			
BAA					Sc	hedule A (Form 9	90 or 990-EZ) 2011

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	ction A. Public Support						
Caler	ndar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants').						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513		-				
4 5	_			-			
	governmental unit to the organization without charge						
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🟲 👚	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
10 a	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and			d, third, fourth, o	r fifth tax year as	a section 501(c)(3	») ► □
	tion C. Computation of Pul				_		
	Public support percentage for 20		· -	e 13, column (f))		15	<u>~</u>
	Public support percentage from					16	%
	tion D. Computation of Inv						
	Investment income percentage for			=	mn (f))	17	<u> </u>
18			- A Dowl III I.a.	17		18	%
	Investment income percentage f	rom 2010 Schedul	e A, Part III, line	17		_ 10]_	
19 a	33-1/3% support tests - 2011. If is not more than 33-1/3%, check	the organization of this box and stop	did not check the here. The organi	box on line 14, a zation qualifies a	is a publicly supp	e than 33-1/3%, ar orted organization	nd line 17
19 a	33-1/3% support tests - 2011. If	f the organization of this box and stop f the organization of b, check this box a	did not check the here. The organidid not check a bond stop here. The	box on line 14, a zation qualifies a ox on line 14 or li e organization qua	is a publicly supp ine 19a, and line alifies as a public	e than 33-1/3%, ar orted organization 16 is more than 33 ly supported organ	nd line 17 ► □

Schedule A	A (Form	990 or 9	90-EZ) 2	2011 7	AMERI	CAN	FRIE	INDS	OF	NET.T.	V ARY	FH T	.NC		13-42	58585		Page 4	ł
Part IV	Supp Part I	lement I, line instruc	al Info l 17a or	rmatio 17b; a	n. Cor nd Pa	npletert III,	e this line 1	part 12. Al	to p Iso c	rovide omple	the e	explar s part	nations for ar	requi ny add	red by itional	Part Inform	II, line nation.	10;	_
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													- -						_
								- - -											_

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions. OMB No 1545-0047

2011

Open to Public Inspection
Employer identification number

7. M.T	ERICAN FRIENDS OF NETIV ARYEH	TMC			13-42	E0E0E	
Pai			r Similar Fun				
rai	the organization answered 'Yes' t	o Form 990. Part IV. line	6.	us or Acce	Junes. (ompiete	: 11
	and organization unavoided 100 t	(a) Donor advised fu		(b) 5:	ınde and	other acco	
1	Total number at end of year	(a) Donor advised to	inus	(0) (1)	arius ariu	other accc	Junts
2	Aggregate contributions to (during year)						
2 3	Aggregate contributions to (during year) Aggregate grants from (during year)						
4	Aggregate value at end of year						
7	,	L	L				
5	Did the organization inform all donors and doi funds are the organization's property, subject			onor advised	[Yes	No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private beneather.	the benefit of the donor or dono	g that grant fund or advisor, or for	ds can be any other	ſ	Yes	No
Pai	rt II Conservation Easements. Compl	ete if the organization an	swered 'Yes'	to Form 99	90. Parl	IV. line	
	Purpose(s) of conservation easements held by			10 1 0.111 5.	, , , a	,	
•	Preservation of land for public use (e.g., r		Preservation of	of an historica	ally impor	tant land a	irea
	Protection of natural habitat		Preservation of		•		
	Preservation of open space	L					
2	Complete lines 2a through 2d if the organizational day of the tax year	on held a qualified conservation	n contribution in	the form of a	conserv	ation easei	ment on the
				Н	eld at the	End of th	e Tax Year
á	Total number of conservation easements			2a			
ŀ	Total acreage restricted by conservation ease	ments		2 b			
•	Number of conservation easements on a certi	fied historic structure included i	n (a)	2c			
(Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, an	d not on a histo	rıc 2d			
3	Number of conservation easements modified, tax year ►	transferred, released, extinguis	shed, or termina	ted by the org	ganızatıoı	n during the	e
4	Number of states where property subject to co	onservation easement is located	. ⊢				
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring	, inspection, hai	ndling of viola	ations,	Yes	No
6	Staff and volunteer hours devoted to monitoring	ng, inspecting, and enforcing co	onservation ease	ements during	the yea	r	
7	Amount of expenses incurred in monitoring, in \$	nspecting, and enforcing conser	rvation easemen	its during the	year		
8	Does each conservation easement reported or 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the req	quirements of se	ction	[Yes	No No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements						
Pai	t III Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical 7 wered 'Yes' to Form 990,	reasures, or Part IV, line	Other Sim 8.	ilar As	sets.	
1 a	If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its final	s held for public exhibition, edu	cation, or resea				
t	 If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items 	r SFAS 116 (ASC 958), to repoild for public exhibition, education	rt in its revenue on, or research i	statement ar n furtherance	d balanc of publi	e sheet wo c service, p	orks of art, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1			► \$.	
	(ii) Assets included in Form 990, Part X				► \$		
2	If the organization received or held works of a amounts required to be reported under SFAS			or financial g	aın, prov	ide the foll	owing
a	Revenues included in Form 990, Part VIII, line				► \$	S	
t	Assets included in Form 990, Part X.				▶ \$	-	

Schedule D (Form 990) 2011 AMER					13-425			Page 2
Part III Organizations Mainta	ining Collect	ions of Art, Hi	storical	Treasures, or	Other Similar Ass	ets (c	ontinu	ed)
3 Using the organization's acquisiti items (check all that apply)	on, accession, a	and other records	, check ar	ny of the following	that are a significant u	se of its	s collect	tion
a Public exhibition		d Lo	an or exc	hange programs				
b Scholarly research		e 💹 Ot	her					
c Preservation for future gener 4 Provide a description of the orga Part XIV		tions and explain	how they	further the organ	ızatıon's exempt purpos	se in		
5 During the year, did the organiza assets to be sold to raise funds r	ition solicit or rec	ceive donations o	f art, histe	orical treasures, o	r other similar lection?	Yes	Г	No
Part IV Escrow and Custodia), Part	
line 9, or reported an	amount on Fo	orm 990, Part	X, line	21.				
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian,	or other intermed	liary for co	ontributions or oth	er assets not	Yes	Γ	No
b If 'Yes,' explain the arrangement	, in Part XIV and	complete the fol	lowing tal	ole	·			
						Amoun	<u>t</u>	
c Beginning balance					1c			
d Additions during the year					1d			
e Distributions during the year					1e			
f Ending balance2a Did the organization include an a	mount on Form	000 Bart V Juna	212		1f	Yes		No
b If 'Yes,' explain the arrangement		550, Fait A, line	21'				L	
Part V Endowment Funds. Co		organization	answere	ed 'Yes' to For	m 990. Part IV. line	<u>10.</u>		
	(a) Current yea			(c) Two years back		_	Four years	s back
1 a Beginning of year balance		,,,				1 3 3		
b Contributions								1.3
c Net investment earnings, gains, and losses							:	
d Grants or scholarships							1 (31)	inpl.
e Other expenditures for facilities and programs						3. 3s,		
f Administrative expenses							<u> </u>	
g End of year balance							<u> </u>	* '
2 Provide the estimated percentag		year end balance	(line 1g,	column (a)) held	as			
a Board designated or quasi-endov								
b Permanent endowment	~%	o .						
c Temporarily restricted endowmer		6						
The percentages in lines 2a, 2b,		•						
3a Are there endowment funds not organization by	in the possessio	n of the organiza	tion that a	are held and admi	nistered for the	ſ	Yes	No
(i) unrelated organizations						3a(i)		1
(ii) related organizations						3a(ii)		
b If 'Yes' to 3a(ıı), are the related of	organizations lis	ted as required or	n Schedul	le R ⁹		3b		
4 Describe in Part XIV the intender	=	· ·				<u></u>		
Part VI Land, Buildings, and								
Description of property	(a	Cost or other ba (investment)		Cost or other pasis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land					; ;;;;;			
b Buildings	<u> </u>							
c Leasehold improvements	<u> </u>				25.000			
d Equipment	<u> </u>			37,630.	36,908.			722.
e Other		ol Form 000 B-	V colum	n (P) line 10(c)	>			722.
Total. Add lines 1a through 1e (Colum	ını (u) must equa	ai Γυππ 330, Μαπ	A, COIUM	iii (b), iiile 10(c))		lule D (l	Form 90	90) 2011
					- 51100	(-		,

Schedule **D** (Form 990) 2011

	D (Form 990) 2011 AMERICAN FRIENDS (13-425	8585	Page :
Part VII	Investments – Other Securities. See		line 12.	N/A		
•	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua Cost or end-of-year mar	tion ket value	
(1) Financ	cial derivatives					
	y-held equity interests					
(3) Other						
<u>(A)</u>				·		
<u>(B)</u>						
<u>(C)</u>						
<u>(D)</u>					···	
<u>(E)</u>						
<u>(F)</u>			<u> </u>		· · · · · · · · · · · · · · · · · · ·	
(G)			ļ			
(H)						
<u>(l)</u>			, ,	······································		
	umn (b) must equal Form 990 Part X, column (B) line 12)	Form 000 Port V	June 12		<u> </u>	
Part VIII	I Investments – Program Related. See		, line 13.	N/A		
	(a) Description of investment type	(b) Book value		(c) Method of valua Cost or end-of-year mar	tion ket value	
(1)			1			
(2)						
(3)				,		
(4)						
(5)					-	
(6)						
(7)						
(8)						
(9)						-
(10)						
Total (Colur	mn (b) must equal Form 990, Part X, column (B) line 13)				3:1	
Part IX	Other Assets. See Form 990, Part X,		1		Γ	
	(a) De	scription			(b) Book	value
(1)			····			
(2)	***************************************					
(3)	· · · · · · · · · · · · · · · · · · ·	==				
<u>(4)</u>			······		<u>-</u>	
<u>(5)</u> (6)						
(0) (7)						
(8)						
(9)						
(10)						
	olumn (b) must equal Form 990, Part X, column (i	B). line 15)		>		·
Part X	Other Liabilities. See Form 990, Part					
	(a) Description of liability	(b) Book value				
(1) Fede	eral income taxes	, , , , , , , , , , , , , , , , , , ,				
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(0)		i				

Total (Column (b) must equal Form 990, Part X, column (B) line 25.)

2 FIN 48 (ASC 740) Footnote 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 (ASC 740)

(10) (11)

Sche	dule D (Form 990) 2011 AMERICAN FRIENDS OF NETIV ARYEH IN	C	1	3-425	8585	Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Finance	ial Sta	ntements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)				1,	866,998.
2	Total expenses (Form 990, Part IX, column (A), line 25)			ſ	1,	840,093.
3	Excess or (deficit) for the year Subtract line 2 from line 1			[26,905.
4	Net unrealized gains (losses) on investments					
5	Donated services and use of facilities.					
6	Investment expenses					
7	Prior period adjustments					
8	Other (Describe in Part XIV)					
9	Total adjustments (net) Add lines 4 through 8					
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3	3 and 9)	Ì		26,905.
$\overline{}$	t XII Reconciliation of Revenue per Audited Financial Statemen			eturn		
1	Total revenue, gains, and other support per audited financial statements			1	1,	866,998.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			18		
a	Net unrealized gains on investments	2a				
	Donated services and use of facilities	2b				
	Recoveries of prior year grants	2c				
	Other (Describe in Part XIV)	2d				
	Add lines 2a through 2d			2e		
	Subtract line 2e from line 1			3	1	866,998.
-	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		(2.38)		300,330.
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		9		
	Other (Describe in Part XIV)	4b		\dashv		
	Add lines 4a and 4b	_ 70		4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1	866,998.
	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts V	Vith Evnenses ne			000, 550.
1	Total expenses and losses per audited financial statements	IIICS V	vitii Expenses pe	1		840,093.
	Amounts included on line 1 but not on Form 990, Part IX, line 25			100		010,033.
	Donated services and use of facilities	2 a				
	Prior year adjustments	2b				
	Other losses	2c	<u> </u>	-		
		2d		$\exists : \exists$		
	Other (Describe in Part XIV) Add lines 2a through 2d			1		
2	Subtract line 2e from line 1			2e	1	840,093.
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		A-100/47		040,093.
4,	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV)	4b				
	Add lines 4a and 4b			4c		
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18))		5	1,	840,093.
Par	t XIV Supplemental Information	•				
Part	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lindditional information	nes 20	and 4b Also comple		part to pro	, vide - – – – – – - – – – – –
	·	·				
	·					
BAA	TEEA3304L 05/25/11			Sche	dule D (Fo	rm 990) 2011

Schedule D	(Form 990) 2011	AMERICAN F	TRIENDS OF	NETIV ARYER	I INC	 13-4258585	Page 5
Part XIV	Supplemental	Information	(continuea)				
•							
						 - 	
						 - -	
						 	
						 	
		- 			. – – – – – –	 	
		- 				 	
						 	
			 -			 - <i>-</i>	
· — -							
			 -			 - 	

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

AM.	ERICAN FRIENDS OF				13-42585	
Pa	to Form 990, Par	t ion on Activiti t IV, line 14b.	es Outside the	e United States. Complet	e if the organization	n answered 'Yes'
1	For grantmakers. Does the grantees' eligibility for	e organization ma the grants or assi	intain records to s stance, and the s	substantiate the amount of its gelection criteria used to award	grants and other assista the grants or assistance	nce, X Yes No
2	United States	e in Part V the org rt V	janization's proce	dures for monitoring the use of	fits grants and other as	sistance outside the
3	Activities per Region (The	e following Part I, I	ine 3 table can be	e duplicated if additional space	is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)						
(2)						
(3)						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
10)						
11)						
12)	· .					
13)				<u> </u>		
14)						
15)	1					
16)						
17)						
3	Sub-total			*		
	Total from continuation sheets to Part I					·
•	Totals (add lines 3a and 3b)	0	0			0.

Page 2

Schedule F (Form 990) 2011 AMERICAN FRIENDS OF NETIV ARYEH INC

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 Part II can be duplicated if additional space is needed.

section and EIN (if applicable)	(c) Region	of grant	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)
	LSKAEL	SUPPORT	1,407,326.				
		LEARNING					
		FOR MEN					
,							
22.*							
·					·		

the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 Enter total number of other organizations or entities BAA

Schedule F (Form 990) 2011

TEEA3502L 05/26/11

Page 3

Schedule F (Form 990) 2011 AMERICAN FRIENDS OF NETIV ARYEH INC

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			,				
		:					
				:			

Sche	dule F (Form 990) 2011 AMERICAN FRIENDS OF NETIV ARYEH INC 13	-4258585	Page 4
Par	t IV Foreign Forms		
1	• Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	¹ Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No
BAA	TEEA3505L 01/17/12	Schedule F (F	orm 990) 2011

Schedule F (Form 990) 2011 AMERICAN FRIENDS OF NETIV ARYEH INC	13-4258585	Page 5
Part Supplemental Information Complete this part to provide the information required by Part I, line 2 (3, column (f) (accounting method; amounts of investments vs expenditus (accounting method); Part III (accounting method); and Part III, column recipients), as applicable. Also complete this part to provide any additional control of the control of	(monitoring of funds); ures per region); Part (c) (estimated numb onal information (see	Part I, line II, line 1 er of instructions).
Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outs	ide US	
BOARD MEMBERS MAKE PERIODIC TRIPS TO ISRAEL TO INVESTIGATE	AND MONITOR THE	USE_OF
GRANTS THE RESULTS OF THESE TRIPS ARE THEN REPORTED TO TH	E BALANCE OF THE	BOARD OF
DIRECTORS		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990 or 990-EZ.

13-4258585 AMERICAN FRIENDS OF NETIV ARYEH INC Form 990, Part III, Line 1 - Organization Mission TO SUPPORT RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY AND/OR EDUCATIONAL PROGRAMS. SPONSOR LECTURES BY NOTED EDUCATIONAL SCHOLARS & WEEKEND RETREATS ATTENDED BY EDUCATIONAL SCHOLARS & THE GENERAL PUBLIC THAT WILL DISCUSS JEWISH RELIGIOUS TOPICS & CURRENT EVENTS Form 990, Part VI, Line 11b - Form 990 Review Process OUR FORM 990 IS PREPARED FROM BOOKS AND RECORDS WHICH HAVE BEEN AUDITED BY A OUTSIDE CPA FIRM. BEFORE FILING OUR FORM 990 IS REVIEWED AND APPROVED BY AT LEAST 2 BOARD MEMBERS FOR COMPLETENESS Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts ONCE A YEAR DURING BOARD MEETINGS CONFLICT OF INTEREST POLICIES ARE REVIEWED AND APPROVED Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees THE BOARD DISCUSSES PERFORMANCE EXPECTATIONS BY ASSESSING THE NATURE AND SCOPE OF EACH POSITION AND TO SET COMPENSATION LEVELS BY REVIEWING PAY RANGES FROM DATA. IF THE DECISION AFFECTS ANY BOARD MEMBER PERSONALLY THAT BOARD MEMBER IS NOT PARTY TO ANY DISCUSSIONS THAT MAY AFFECT THEM Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available UPON REQUEST OUR ORGANIZATION WILL SEND COPIES OF OUR GOVERNMENT DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO ANY INTERESTED PARTY. OUR TAX RETURN ARE AVAILABLE TO THE PUBLIC THRU THE INTERNET SUITE GUIDESTAR.COM