



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

2012

Department of the Treasury  
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2012, or tax year beginning **, 2012, and ending**

Name of foundation

**Wexner Foundation**

Number and street (or P.O. box number if mail is not delivered to street address)

**8000 Walton Parkway**

Room/suite

**100**

City or town

**New Albany**

State ZIP code

**Oh 43054**

G Check all that apply:

 Initial return Final return Address change Initial Return of a former public charity Amended return Name change

H Check type of organization:

 Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16)

 Cash Accrual**► \$ 4,758,670.**

(Part I, column (d) must be on cash basis.)

**Part I Analysis of Revenue and****Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
R E V E N U E	1 Contributions, gifts, grants, etc, received (att sch)	<b>9,151,650.</b>			
	2 Ck ► <input type="checkbox"/> If the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash/investments	<b>1,101.</b>	<b>1,101.</b>	<b>1,101.</b>	
	4 Dividends and interest from securities				
	5 a Gross rents				
	b Net rental income or (loss)				
	6 a Net gain/(loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
A D M I N I S T R A T I V E O P E R A T I N G A N D E X P E N S E S	10 a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	<b>9,152,751.</b>	<b>1,101.</b>	<b>1,101.</b>	
	13 Compensation of officers, directors, trustees, etc	<b>1,516,140.</b>			<b>1,516,140.</b>
	14 Other employee salaries and wages	<b>1,180,422.</b>			<b>1,180,422.</b>
	15 Pension plans, employee benefits	<b>656,398.</b>			<b>656,398.</b>
	16 a Legal fees (attach schedule) I-16a Stmt	<b>5,338.</b>			<b>5,338.</b>
	b Accounting fees (attach sch) I-16b Stmt	<b>62,759.</b>			<b>62,759.</b>
	c Other prof fees (attach sch) I-16c Stmt	<b>169,616.</b>			<b>169,616.</b>
	17 Interest				
	18 Taxes (attach schedule) I-18 Stmt	<b>450.</b>			<b>450.</b>
	19 Depreciation (attach sch) and depletion	<b>83,209.</b>			
	20 Occupancy	<b>748,107.</b>			<b>748,107.</b>
	21 Travel, conferences, and meetings	<b>2,011,627.</b>			<b>2,011,627.</b>
	22 Printing and publications	<b>100,641.</b>			<b>100,641.</b>
	23 Other expenses (attach schedule) See Line 23 Stmt	<b>733,039.</b>			<b>733,039.</b>
	24 Total operating and administrative expenses. Add lines 13 through 23	<b>7,267,746.</b>			<b>7,184,537.</b>
	25 Contributions, gifts, grants paid	<b>2,182,980.</b>			<b>2,182,980.</b>
	26 Total expenses and disbursements. Add lines 24 and 25	<b>9,450,726.</b>			<b>9,367,517.</b>
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	<b>-297,975.</b>			
	b Net investment income (if negative, enter -0-)		<b>1,101.</b>		
	c Adjusted net income (if negative, enter -0-)			<b>1,101.</b>	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
A S S E T S	1	Cash – non-interest-bearing	45,636.	34,395.	34,395.
	2	Savings and temporary cash investments	996,911.	957,966.	957,966.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
		Less allowance for doubtful accounts			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	467,995.	318,262.	318,262.
	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule)			
	c	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment. basis	3,795,882.		
		Less: accumulated depreciation (attach schedule)	347,835.	3,507,549.	3,448,047.
	15	Other assets (describe )			
	16	<b>Total assets</b> (to be completed by all filers – see the instructions Also, see page 1, item I)	5,018,091.	4,758,670.	4,758,670.
L I A B I L I T I E S	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe )			
	23	<b>Total liabilities</b> (add lines 17 through 22)			
N F E U T N D A S B S S A E L T A S N C O E R S	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			<input type="checkbox"/>	
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			<input checked="" type="checkbox"/>	
	27	Capital stock, trust principal, or current funds		5,018,091.	4,758,670.
	28	Paid-in or capital surplus, or land, building, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	<b>Total net assets or fund balances</b> (see instructions)	5,018,091.	4,758,670.	
	31	Total liabilities and net assets/fund balances (see instructions)	5,018,091.	4,758,670.	

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	5,018,091.
2	Enter amount from Part I, line 27a	2	-297,975.
3	Other increases not included in line 2 (itemize) ▶ See Other Increases Stmt	3	42,623.
4	Add lines 1, 2, and 3	4	4,762,739.
5	Decreases not included in line 2 (itemize) ▶ Depreciation	5	4,069.
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	4,758,670.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)			(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (Column (h)) gain minus column (k), but not less than -0- or Losses (from column (h))		
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss). <span style="border: 1px solid black; padding: 2px;">If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7</span>			2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): <span style="border: 1px solid black; padding: 2px;">If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8</span>			3		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2011	9,125,149.	5,559,962.	1.641225
2010	8,207,361.	4,832,244.	1.698457
2009	8,728,205.	5,512,948.	1.583219
2008	9,948,239.	3,798,066.	2.619291
2007	9,693,045.	3,657,978.	2.649837

2 Total of line 1, column (d) .....	2	10.192029
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years .....	3	2.038406
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 .....	4	5,434,552.
5 Multiply line 4 by line 3 .....	5	11,077,823.
6 Enter 1% of net investment income (1% of Part I, line 27b) .....	6	11.
7 Add lines 5 and 6 .....	7	11,077,834.
8 Enter qualifying distributions from Part XII, line 4 .....	8	9,473,163.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

1 a Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter 'N/A' on line 1.	1	22.
Date of ruling or determination letter (attach copy of letter if necessary – see instrs)		
1 b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b	2	0.
1 c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		3 22.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
3 Add lines 1 and 2	5	22.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		
6 Credits/Payments:		
a 2012 estimated tax pmts and 2011 overpayment credited to 2012	6 a	407.
b Exempt foreign organizations – tax withheld at source	6 b	
c Tax paid with application for extension of time to file (Form 8868)	6 c	0.
d Backup withholding erroneously withheld	6 d	
7 Total credits and payments Add lines 6a through 6d	7	407.
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	385.
11 Enter the amount of line 10 to be Credited to 2013 estimated tax	385.	Refunded
	11	

**Part VII-A | Statements Regarding Activities**

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b	X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
c Did the foundation file Form 1120-POL for this year?	1 c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		
(1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities	2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	6	X
• By language in the governing instrument, or		
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) See States Registered In	8 b	X
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	9	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	10	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		

**Part VII-A | Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) .....	11	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions) .....	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address .....	13	X
14	The books are in care of ▶ <u>Peggy Ugland</u> Telephone no. ▶ <u>(614) 939-6000</u> Located at ▶ <u>8000 Walton Parkway, Suite 100 New Albany OH ZIP + 4 43054</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year .....	15	<input type="checkbox"/>
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....	16	X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ▶ <u>IS</u>			

**Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

1 a	During the year did the foundation (either directly or indirectly):	Yes	No
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
1 b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here .....	<input type="checkbox"/>	X
1 c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? .....		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	If 'Yes,' list the years ▶ <u>20__ , 20__ , 20__ , 20__</u>		
2 b	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement – see instructions.) .....		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ <u>20__ , 20__ , 20__ , 20__</u>		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If 'Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.) .....		
3 b			
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012? .....		
4 b			X

## Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5 a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here 

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

If 'Yes,' attach the statement required by Regulations section 53 4945-5(d)

6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8870

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?

5 b

6 b X

7 b

## Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Leslie H. Wexner 8000 Walton Parkway, Suite 100 New Albany OH 43054	Trustee 1.00	0.	0.	0.
Barbara Abrahamson 2123 Fair Ave. Bexley OH 43209	President 40.00	469,393.	60,715.	0.
Dennis S. Hersch 551 Madison Ave., 9th Floor NY NY 10022	Secretary, Trustee 5.00	250,000.	0.	0.
See Information about Officers, Directors, Trustees, Etc		796,747.	104,430.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Elizabeth Meyers 2192 Sandover Rd Columbus OH 43220	Senior Administrator 40.00	72,880.	5,412.	0.
Gordon I. Mars 249 S. Cassady Ave. Bexley OH 43209	Director, Graduate Fellow 40.00	172,676.	30,447.	0.
Karen Collum 5779 Albany Green Westerville OH 43081	Senior Administrator 40.00	87,424.	14,098.	0.
Lori Baron 185 E. 85th St., Apt 21F NY NY 10028	Director, Operations 40.00	138,934.	20,391.	0.
Angie Adkins 808 Columbus Ave., #21G NY NY 10025	Director, Wexner Heritage 40.00	123,253.	30,985.	0.

Total number of other employees paid over \$50,000

2

**Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Rabbi Maurice Corson 181 East 81 St., Apt 11B New York	Rabbinical Advisory Services	79,336.
Rabbi Jay Moses 120 S. Cassingham Rd. Columbus	Rabbinical Advisory Services	108,724.
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
<b>Total number of others receiving over \$50,000 for professional services</b>		<b>None</b>

**Part IX-A | Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 Religious education program to strengthen Jewish community leaders through intensive study of text in bible, history, philosophy and law led by experienced clergy & faculty. Statement 7thru9 for master calendar and curriculum.		1,590,174.
2 Leadership development program for mid-career leaders in Israel's public sector. Wexner Israel Fellowship Program is unique partnership between Wexner Foundation, Israel Civil Service and Harvard. Eligibility Form Attached.		693,295.
3 Wexner Graduate Fellowship/Davidson Scholars program provides leadership development for Jewish communal professionals in graduate schools. Program application attached.		1,472,501.
4 -----		-----

**Part IX-B | Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 None		0.
2 -----		-----
All other program-related investments. See instructions		
3 -----		-----
<b>Total. Add lines 1 through 3</b>		<b>None</b>

BAA

Form 990-PF (2012)

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:	
a Average monthly fair market value of securities .....	1a
b Average of monthly cash balances .....	1b 1,751,003.
c Fair market value of all other assets (see instructions) .....	1c 3,766,309.
d Total (add lines 1a, b, and c) .....	1d 5,517,312.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e
2 Acquisition indebtedness applicable to line 1 assets .....	2
3 Subtract line 2 from line 1d .....	3 5,517,312.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) .....	4 82,760.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 .....	5 5,434,552.
6 Minimum investment return. Enter 5% of line 5 .....	6 271,728.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

1 Minimum investment return from Part X, line 6 .....	1
2a Tax on investment income for 2012 from Part VI, line 5 .....	2a
b Income tax for 2012. (This does not include the tax from Part VI.) .....	2b
c Add lines 2a and 2b .....	2c
3 Distributable amount before adjustments. Subtract line 2c from line 1 .....	3
4 Recoveries of amounts treated as qualifying distributions .....	4
5 Add lines 3 and 4 .....	5
6 Deduction from distributable amount (see instructions) .....	6
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 .....	7

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:	
a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26 .....	1a 9,367,517.
b Program-related investments – total from Part IX-B .....	1b 0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes .....	2 105,646.
3 Amounts set aside for specific charitable projects that satisfy the:	
a Suitability test (prior IRS approval required) .....	3a
b Cash distribution test (attach the required schedule) .....	3b
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .....	4 9,473,163.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) .....	5 0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4 .....	6 9,473,163.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income (see instructions)**

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only				
b Total for prior years. 20 ___, 20 ___, 20 ___				
3 Excess distributions carryover, if any, to 2012.				
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e				
4 Qualifying distributions for 2012 from Part XII, line 4 ► \$ 9,473,163.				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2012 distributable amount				
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount – see instructions		0.		
e Undistributed income for 2011. Subtract line 4a from line 2a Taxable amount – see instructions			0.	
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2008	0.			
b Excess from 2009	0.			
c Excess from 2010	0.			
d Excess from 2011	0.			
e Excess from 2012	0.			

BAA

Form 990-PF (2012)

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1 a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling				► <input type="checkbox"/> N/A																																								
b	Check box to indicate whether the foundation is a private operating foundation described in section				<input checked="" type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)																																								
2 a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed																																												
b	85% of line 2a																																												
c	Qualifying distributions from Part XII, line 4 for each year listed																																												
d	Amounts included in line 2c not used directly for active conduct of exempt activities																																												
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c																																												
3	Complete 3a, b, or c for the alternative test relied upon																																												
a	'Assets' alternative test – enter																																												
(1)	Value of all assets																																												
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)																																												
b	'Endowment' alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed																																												
c	'Support' alternative test – enter																																												
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)																																												
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii)																																												
(3)	Largest amount of support from an exempt organization																																												
(4)	Gross investment income																																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Tax year</th> <th colspan="4" style="text-align: center;">Prior 3 years</th> <th rowspan="2" style="text-align: center;">(e) Total</th> </tr> <tr> <th style="text-align: left;">(a) 2012</th> <th style="text-align: center;">(b) 2011</th> <th style="text-align: center;">(c) 2010</th> <th style="text-align: center;">(d) 2009</th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">1,101.</td> <td style="text-align: center;">866.</td> <td style="text-align: center;">957.</td> <td style="text-align: center;">3,240.</td> <td style="text-align: center;">6,164.</td> </tr> <tr> <td style="text-align: left;">936.</td> <td style="text-align: center;">736.</td> <td style="text-align: center;">813.</td> <td style="text-align: center;">2,754.</td> <td style="text-align: center;">5,239.</td> </tr> <tr> <td style="text-align: left;">9,473,163.</td> <td style="text-align: center;">9,125,148.</td> <td style="text-align: center;">8,207,361.</td> <td style="text-align: center;">8,728,205.</td> <td style="text-align: center;">35,533,877.</td> </tr> <tr> <td style="text-align: left;">2,182,980.</td> <td style="text-align: center;">1,926,155.</td> <td style="text-align: center;">1,869,027.</td> <td style="text-align: center;">1,991,568.</td> <td style="text-align: center;">7,969,730.</td> </tr> <tr> <td style="text-align: left;">7,290,183.</td> <td style="text-align: center;">7,198,993.</td> <td style="text-align: center;">6,338,334.</td> <td style="text-align: center;">6,736,637.</td> <td style="text-align: center;">27,564,147.</td> </tr> <tr> <td style="text-align: left;">184,569.</td> <td style="text-align: center;">185,332.</td> <td style="text-align: center;">161,075.</td> <td style="text-align: center;">183,765.</td> <td style="text-align: center;">714,741.</td> </tr> </tbody> </table>						Tax year	Prior 3 years				(e) Total	(a) 2012	(b) 2011	(c) 2010	(d) 2009	1,101.	866.	957.	3,240.	6,164.	936.	736.	813.	2,754.	5,239.	9,473,163.	9,125,148.	8,207,361.	8,728,205.	35,533,877.	2,182,980.	1,926,155.	1,869,027.	1,991,568.	7,969,730.	7,290,183.	7,198,993.	6,338,334.	6,736,637.	27,564,147.	184,569.	185,332.	161,075.	183,765.	714,741.
Tax year	Prior 3 years				(e) Total																																								
(a) 2012	(b) 2011	(c) 2010	(d) 2009																																										
1,101.	866.	957.	3,240.	6,164.																																									
936.	736.	813.	2,754.	5,239.																																									
9,473,163.	9,125,148.	8,207,361.	8,728,205.	35,533,877.																																									
2,182,980.	1,926,155.	1,869,027.	1,991,568.	7,969,730.																																									
7,290,183.	7,198,993.	6,338,334.	6,736,637.	27,564,147.																																									
184,569.	185,332.	161,075.	183,765.	714,741.																																									

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

Leslie H. Wexner

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

None

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed

Barbara Abrahamson, President  
8000 Walton Parkway, Suite 110  
New Albany OH 43054 (614) 939-6060

b The form in which applications should be submitted and information and materials they should include.

See Attached Pages 10 thru 19

c Any submission deadlines.

See Attached Pages 10 thru 19

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

See Attached Pages 10 thru 19

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i> See attached schedule of grants on attached pages 5 thru 6. OH 43054		Attached	Attached	2,182,980.
<b>Total</b>				► 3a 2,182,980.
<i>b Approved for future payment</i>				
<b>Total</b>				► 3b

## Part XVI-A Analysis of Income-Producing Activities

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)					1,101.
13 Total. Add line 12, columns (b), (d), and (e)	...	13			1,101.
(See worksheet in line 13 instructions to verify calculations )					

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

**Part XVII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1)	Cash .....	1 a (1)	X
(2)	Other assets .....	1 a (2)	X
b	Other transactions:		
(1)	Sales of assets to a noncharitable exempt organization .....	1 b (1)	X
(2)	Purchases of assets from a noncharitable exempt organization .....	1 b (2)	X
(3)	Rental of facilities, equipment, or other assets .....	1 b (3)	X
(4)	Reimbursement arrangements .....	1 b (4)	X
(5)	Loans or loan guarantees .....	1 b (5)	X
(6)	Performance of services or membership or fundraising solicitations .....	1 b (6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees .....	1 c	X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? .....  Yes  No

B II - Yes, complete the following schedule:		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign  
Here

*Deaggy W. Ligha*  
Signature of officer or trustee

11/12/13

—  
Tal

May the IRS discuss this return with the preparer shown below (see Instructions)?

**Paid  
Preparer  
Use Only**

Print/Type preparer's name <b>MICHELE ROSENBERG</b>	Preparer's signature 	Date <b>11/11/13</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P01346138</b>
Firm's name ► <b>CORNICK, GARBER &amp; SANDLER, LLP</b>	Firm's EIN ► <b>13-2620561</b>			
Firm's address ► <b>825 THIRD AVENUE, 4TH FLOOR</b> <b>NEW YORK, NY 10022</b>	Phone no. <b>212-557-3900</b>			

**BAA**

**Form 990-PF (2012)**

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service

OMB No 1545-0047

**Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

**2012****Name of the organization****Employer identification number****Wexner Foundation**

23-7320631

**Organization type (check one)****Filers of:**

Form 990 or 990-EZ

**Section:**

501(c)( \_\_\_\_ ) (enter number) organization  
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule****Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II.)

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.****Schedule B** (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

Wexner Foundation

23-7320631

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Jewish Federation of Greater Seattle	\$ 87,500.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
	2031 3rd. Ave.		(Complete Part II if there is a noncash contribution)
	Seattle WA 98121		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Greater Miami Jewish Federation	\$ 175,000.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
	4200 Biscayne Blvd.		(Complete Part II if there is a noncash contribution)
	Miami FL 33137		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Samis Foundation	\$ 87,500.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
	208 James St., Suite C		(Complete Part II if there is a noncash contribution)
	Seattle WA 98104		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Columbus Jewish Federation	\$ 175,000.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
	1175 College Ave.		(Complete Part II if there is a noncash contribution)
	Columbus OH 43209		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	United Jewish Appeal-Federation of Jewish Philanthropies of New York	\$ 175,000.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
	130 E. 59th St		(Complete Part II if there is a noncash contribution)
	New York NY 10022		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Jim Joseph Foundation	\$ 276,650.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
	343 Sansome St., Suite 1200		(Complete Part II if there is a noncash contribution)
	San Francisco CA 94104		

Name of organization

Employer identification number

Wexner Foundation

23-7320631

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Jewish Community Federation-SF 121 Steuart St. San Francisco CA 94105	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
8	Wexner Family Charitable Fund 8000 Walton Parkway, #100 New Albany OH 43054	\$ 8,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

THE WEXNER FOUNDATION  
2012 DEPRECIATION SCHEDULE  
23-7320631

Date	Description	Cost	Method	2012 Depreciation	Accu Depreciation
<b>Furniture, Fixtures &amp; Equipment</b>					
<b>Furniture &amp; Fixtures</b>					
88-89	Office Furniture	55,908 00	10yr S/L	0.00	55,908 00
10-88	Roche Buboi - Table	3,516 00	10yr S/L	0 00	3,516.00
10-88	Continental Office - Furniture & Cabinets	15,665.00	10yr S/L	0 00	15,665 00
12-88	Continental Office - Furniture & Cabinets	5,274 00	10yr S/L	0 00	5,274 00
12-88	Art Exchange - Paintings	3,010 00	10yr S/L	0 00	3,010 00
12-88	M A Fox - Credenza	3,810 00	10yr S/L	0 00	3,810.00
12-88	M A Fox - Conference Table	5,385 00	10yr S/L	0 00	5,385 00
2-89	Continetal-Radius Board	1,073 00	10yr S/L	0 00	1,073 00
2-89	Forbus-Table	3,225 00	10yr S/L	0.00	3,225 00
2-89	Continetial-Files	1,413 00	10yr S/L	0 00	1,413 00
1-89	Builders Appliance-Refridge	1,248 00	10yr S/L	0 00	1,248.00
11-00	Office Furniture	38,939 80	10yr S/L	0 00	38,939 80
5-03	Telephone Equipment	5,991.18	10yr S/L	599.12	5,691 63
9-05	Office Furniture	15,442.49	10yr S/L	1,544 25	11,581 87
8-06	Office Furniture	4,379 00	10yr S/L	437.90	2,846 35
9-10	Office Furniture -NY	189,005 00	5yr S/L	37,801.00	94,503 00
6-11	Office Furniture-Columbus	40,553 00	5yr S/L	8,111 00	12,166 00
6-11	Computer Equip	35,548 00	5yr S/L	7,110 00	10,665.00
4-30	Office Equip	23,191.00	5yr S/L	2,319 00	2,319 00
12-13	Computer	1,594 43	5yr S/L	159 00	159 00
		<b>\$454,170 90</b>		<b>\$58,081 27</b>	<b>\$278,398 64</b>
<b>Leasehold Improvements-New York</b>					
9-10	Improvements-New York	41,214 00	10yr SL	4,121 00	9,616 00
4-11	Improvements-New York	169,637 00	10yr SL	16,964 00	25,446 00
1-12	Improvements-Columbus	80,861 00	10yr SL	4,043 00	4,043 00
		<b>291,712.00</b>		<b>25,128.00</b>	<b>39,105 00</b>
<b>Total Depreciation</b>					
				<b>83,209 27</b>	

Form 990-PF, Page 1, Part I, Line 23  
**Line 23 Stmt**

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Insurance	11,121.			11,121.
Repairs & Maintenance	63,907.			63,907.
Office Supplies, Postage & Misc	26,615.			26,615.
Security & Delivery	3,128.			3,128.
Moving & Other	368.			368.
Honoraria	282,225.			282,225.
Dues	1,276.			1,276.
Computer Expense	68,633.			68,633.
Parsonage	143,596.			143,596.
Continuing Education	2,429.			2,429.
Personnel Procurement	1,978.			1,978.
Telephone	19,115.			19,115.
Bank Charges	3,124.			3,124.
Program Review	100,000.			100,000.
Temporary Help	3,265.			3,265.
Employee Moving Expense	2,259.			2,259.
<b>Total</b>	<b><u>733,039.</u></b>			<b><u>733,039.</u></b>

Form 990-PF, Page 2, Part III, Line 3  
**Other Increases Stmt**

Deferred Compensation-FMV Adjustment	42,623.
<b>Total</b>	<b><u>42,623.</u></b>

Form 990-PF, Page 4, Part VII-A, Line 8a  
**States Registered In**

OH - Ohio  
 NY - New York

Form 990-PF, Page 6, Part VIII, Line 1  
**Information about Officers, Directors, Trustees, Etc.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person ... <input checked="" type="checkbox"/> Business ... <input type="checkbox"/> Abigail S. Wexner One Whitebarn Rd. New Albany OH 43054	Trustee 1.00	0.	0.	0.

Form 990-PF, Page 6, Part VIII, Line 1  
 Information about Officers, Directors, Trustees, Etc.

Continued

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person ... <input checked="" type="checkbox"/> Business . <input type="checkbox"/> <u>Larry S. Moses</u> <u>300 S. Drexel</u> <u>Ave., Cols. OH 43209</u>	<u>President-Emeritus</u> <u>40.00</u>	<u>471,056.</u>	<u>60,715.</u>	<u>0.</u>
Person ... <input checked="" type="checkbox"/> Business .. <input type="checkbox"/> <u>Cynthia Chazan</u> <u>53 Speir Dr.</u> <u>S.Orange NJ 07079</u>	<u>VP</u> <u>40.00</u>	<u>325,691.</u>	<u>43,715.</u>	<u>0.</u>
Person .. <input checked="" type="checkbox"/> Business ... <input type="checkbox"/> <u>Gideon Kaufman</u> <u>315 E. Hymen Ave.</u> <u>Aspen CO 81611</u>	<u>Trustee</u> <u>1.00</u>	<u>0.</u>	<u>0.</u>	<u>0.</u>
Person .. <input checked="" type="checkbox"/> Business . . <input type="checkbox"/> <u>Peggy Ugland</u> <u>8000 Walton Parkway, #100</u> <u>New Albany OH 43054</u>	<u>Treasurer</u> <u>1.00</u>	<u>0.</u>	<u>0.</u>	<u>0.</u>

Total

796,747. 104,430. 0.

Form 990-PF, Page 1, Part I  
 Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
<u>Vorys, Sater, Seymour</u>	<u>General Corporate</u>	<u>320.</u>			<u>320.</u>
<u>Proskauer Rose LLP</u>	<u>General Corporate</u>	<u>1,312.</u>			<u>1,312.</u>
<u>Resheff &amp; Schiff</u>	<u>Employment</u>	<u>3,706.</u>			<u>3,706.</u>
Total		<u>5,338.</u>			<u>5,338.</u>

Form 990-PF, Page 1, Part I  
 Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
<u>Ernst &amp; Young</u>	<u>Financial Statements</u>	<u>33,500.</u>			<u>33,500.</u>
<u>Management Services</u>	<u>Accounting</u>	<u>21,759.</u>			<u>21,759.</u>
<u>Cornick, Garber &amp; Sandl</u>	<u>Tax</u>	<u>7,500.</u>			<u>7,500.</u>

Form 990-PF, Page 1, Part I  
**Line 16b - Accounting Fees**

Continued

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
<b>Total</b>		<b><u>62,759.</u></b>			<b><u>62,759.</u></b>

Form 990-PF, Page 1, Part I  
**Line 16c - Other Professional Fees**

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
<b>ADP</b>	<b>Payroll Processing</b>	<b>2,721.</b>			<b>2,721.</b>
<b>Rabbi Jay Moses</b>	<b>Rabbinical Advisory Fees</b>	<b>96,895.</b>			<b>96,895.</b>
<b>Rabbi Maurice Corson</b>	<b>Rabbinical Advisory Fees</b>	<b>70,000.</b>			<b>70,000.</b>
<b>Total</b>		<b><u>169,616.</u></b>			<b><u>169,616.</u></b>

## Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount
The Wexner Family Charitable Fund	8,000,000.
Jewish Federation of Greater Seattle	87,500.
Greater Miami Jewish Federation	175,000.
Samis Foundation	87,500.
Columbus Jewish Federation	175,000.
United Jewish Appeal-Federation of Jewish Philanthropies NY	175,000.
Jim Joseph Foundation	276,650.
Jewish Community Federation-SF	175,000.
Total	<u>9,151,650.</u>

The Wexner Foundation  
23-7320631  
FY 12-31-2012

Page,10, Part XVI, Line 3a-Grants	Date	Cash	Purpose	
			2,049	To fund community assistance programs
United Way Of Franklin County 360 S Third St Columbus , Ohio 43215 (501(c)3 Organization)	11-30-12	Cash	11,298	To provide educational funding
Congregation Tifereth Israel 1354 Broad St Columbus,Oh 43205 (501(c)3 Organization)	5-8-12	Cash	5,000	To provide educational funding
Jewish Funders Network 150 W 30th St #900 NY,NY 10001 (501(c)3 Organization)	5-8-12	Cash	10,000	To Support Synagogue
Temple Israel 5419 E Broad St Columbus, Ohio 43201 (501(c)3 Organization)	7-24-12	Cash	8,120	
Jewish Federations of North America,Inc 25 Broadway Suite 1700 NY,NY 10004	9-27-12	Cash	30,000	To provide educational funding
Fellowships-Paid During Calendar Year				
Hebrew Union College 3101 Clifton Ave Cincinnati,Ohio 45220 (501(c)3 Organization)		Cash	180,000	To fund educational fellowships
Yeshiva University 500 W 185th St New York, New York 10033 (501(c)3 Organization)		Cash	105,000	To fund educational fellowships
Jewish Theological Seminary Broadway And 122nd St New York,New York 10027 (501(c)3 Organization)		Cash	135,000	To fund educational fellowships
Hebrew College 160 Herick RD Newton Centre,Ma 02459 (501(c)3 Organization)		Cash	100,000	To fund educational fellowships
Boston University 881 Commonwealth Ave Boston, Ma 02215 (501(c)3 Organization)		Cash	15,000	To fund educational fellowships
John Hopkins University 1740 Massachusetts Ave Room 308 Washington DC 20036 (501(c)3 Organization)		Cash	25,000	To fund educational fellowships
American Jewish University 15600 Mulholland Dr Bel-Air,Ca 90077 (501(c)3 Organization)		Cash	25,000	To fund educational fellowships
Yeshivat Chovevei Torah Rabinical School 550W 110th St New York,New York 10025 (501(c)3 Organization)		Cash	35,000	To fund educational fellowships

Columbia University 210 Kent Hall -New York, New York 10025 (501(c)3 Organization)	Cash	5,000	To fund educational fellowships
Hunter College 695 Park Ave , Room 236 Medford, Ma 02155 NY, NY 10065	Cash	15,000	To fund educational fellowships
Brandeis University 415 South Street Waltham, Mass 02254 (501(c)3 Organization)	Cash	50,000	To fund educational fellowships
Reconstructionist Rabbinical College Church Road & Greenwood Avenue Wyncote, Pa 19095 (501(c)3 Organization)	Cash	25,000	To fund educational fellowships
Harvard University Cambridge, Mass 02138 (501(c)3 Organization)	Cash	935,513	To fund educational fellowships
Stanford University 355 Galvez St Stanford, Ca 94305 (501(c)3 Organization)	Cash	20,000	To fund educational fellowship
New York University 100 Washington Square East New York, New York 10003 (501(c)3 Organization)	Cash	320,000	To fund educational fellowship
Schechter Institute 4 Avraham Granot Street Jerusalem, Israel 91160 (501(c)3 Organization)	Cash	10,000	To fund educational fellowship
Princeton University 103 Clio Hall Princeton, NJ 08544 (501(c)3 Organization)	Cash	10,000	To fund educational fellowship
University of Toronto 252 Bloor St ,12th Floor Toronto, Ontario M5S 1V6 (501(c)3 Organization)	Cash	10,000	To fund educational fellowship
Northeastern University 360 Huntington Ave Boston, Ma 02115 (501(c)3 Organization)	Cash	25,000	To fund educational fellowship
Yale University 320 York St ,Room 129 New Haven, Ct 06520-8236 (501(c)3 Organization)	Cash	36,000	To fund educational fellowship
York University 4700 Keele St ,York Lanes 283 Toronto, Ontario (501(c)3 Organization)	Cash	25,000	To fund educational fellowship
George Washington University 44983 Knoll SQ ,Suite 280 Ashburn, Va 20147 (501(c)3 Organization)	Cash	10,000	To fund educational fellowship
	Total Grants Paid	2,182,980	
		=====	

**WEXNER HERITAGE PROGRAM**  
**SAMPLE TWO-YEAR CURRICULUM OVERVIEW**

**YEAR ONE**  
**THE HISTORY OF THE JEWISH PEOPLE**

**Objectives:**

- (1) To know the factual outline and major events of Jewish history.
- (2) To analyze our people's key leaders and their decisions.
- (3) To internalize our historical experience and form a coherent identity.
- (4) To consider the implications of Jewish historical events for contemporary Jewish leadership challenges.

**EIGHTEEN SESSIONS/THREE UNITS**

**Unit I. The Biblical and Rabbinic Periods**

- (1) Back to the Beginning: The Genesis of Leadership (Genesis)
- (2) The Challenge of Leadership (Exodus and Numbers)
- (3) The Conquest of the Land and the Ethics of Power (Deuteronomy, Joshua, Judges, I Samuel)
- (4) The Rise and Fall of the Monarchies (II Samuel, I & II Kings)
- (5) The Second Commonwealth (586 BCE - 70 CE)
- (6) Destruction and Renewal: The Emergence of Rabbinic Judaism (70 CE - 622 CE)
- (7) **Leadership Session: Defining a Leadership Framework and Vocabulary**

**Unit II. The Medieval Period**

- (8) The Jews under Medieval Christendom:  
From Constantine (4th Century) to Luther (16th Century)
- (9) Jews and Jewries in the Orbit of Islam
- (10) The Expulsion of Ashkenazic and Sephardic Jewries and their Aftermaths
- (11) Roads to Modernity: Social, Economic, Political and Intellectual (c. 1550-1789)
- (12) East European Jewry through 1881
- (13) **Leadership Session—Leadership in Times of Transition:  
Adaptive Challenges in Jewish History**

**Unit III. The Modern Period**

- (14) Enlightenment and Emancipation in Western Europe, 1750-1881
- (15) From Europe to America and Palestine, 1881-1914
- (16) Modern Anti-Semitism and the Holocaust, 1870-1945
- (17) Zionism, Palestine and Israel, 1914-1998
- (18) United States Jewry, 1914-1998

**YEAR TWO**  
**THE THOUGHT AND LITERATURE OF THE JEWISH PEOPLE**

**Objectives:**

- (1) To acquaint students with the literature and fundamentals of Jewish thought from the Biblical period to the present.
- (2) To help students understand the relationship between thought and history.
- (3) To trace development and change in Jewish thought over the millennia.
- (4) To understand the nexus between the core ideas of Judaism's texts and the exercise of leadership in Jewish life.

**EIGHTEEN SESSIONS/FOUR UNITS**

**Unit I. Biblical Text: Prophets and Writings**

1. Moses, Elijah and Jonah: The Biblical Idea of Prophecy
2. Priest, Prophet, King: Biblical Models of Leadership
3. Divine Justice and God's Covenant: Job
4. Jewish Leadership in the Diaspora: The Book of Esther
5. The Book of Ruth: Autonomy and Vision as Programs for Leadership

**6. Leadership Session: Case Studies and Peer Consultation**

**Unit II. Rabbinic Text**

7. Mishnah
8. Talmud
9. Midrash
10. Codes and Responsa

**Unit III. Liturgical Text**

11. What is Prayer?
12. The Anatomy of the Prayer Book
13. Sabbath and Holiday Liturgy
14. The Haggadah

**Unit IV. Modern Jewish Thought**

15. The Rise of Modern Denominations in Judaism
16. Imagining Israel: Early Zionist Thinkers
17. 20<sup>th</sup> and 21<sup>st</sup> Century Jewish Thought

**Concluding Leadership Session**

18. Where does our Jewish Leadership Odyssey go from here?

**Wexner Heritage Program  
2012-2013 MASTER CALENDAR**

	<b>NY RSJ 12 Monday</b>	<b>Seattle 12 Tuesday</b>	<b>Columbus 11 Monday</b>	<b>Miami 11 Tuesday</b>	<b>San Francisco 11 Monday</b>
1	9/10/2012 Erica Brown	9/4/2012 Ed Feinstein	9/10/2012 Aaron Panken	9/4/2012 Michael Berger	9/10/2012 Danny Landes
2	10/15/2012 Erica Brown	9/11/2012 Ed Feinstein	10/15/2012 Aaron Panken	9/27/2012 Michael Berger	10/15/2012 Danny Landes
3	11/5/2012 Erica Brown	10/16/2012 Ed Feinstein	11/5/2012 Aaron Panken	10/16/2012 Michael Berger	10/29/2012 Danny Landes
4	11/12/2012 Erica Brown	10/30/2012 Ed Feinstein	11/19/2012 Elka Abrahamson	10/30/2012 Michael Berger	11/5/2012 Danny Landes
5	11/19/2012 Jay Moses	11/20/2012 Ed Feinstein	11/26/2012 Aaron Panken	11/20/2012 Michael Berger	11/19/2012 Naomi Levy
6	12/3/2012 Benjy Gampel	12/4/2012 Ed Feinstein	12/3/2012 Larry Hoffman	12/4/2012 Larry Hoffman	12/3/2012 Naomi Levy
7	12/17/2012 Benjy Gampel	12/18/2012 Jay Moses	12/17/2012 Larry Hoffman	12/18/2012 Larry Hoffman	12/17/2012 Naomi Levy
8	1/7/2013 Olga Litvak	1/8/2013 Joshua Holo	1/7/2013 Larry Hoffman	1/8/2013 Larry Hoffman	1/7/2013 Naomi Levy
9	1/14/2013 Olga Litvak	1/22/2013 Joshua Holo	1/14/2013 Larry Hoffman	1/22/2013 Larry Hoffman	1/14/2013 Leon Wiener Dow
10	1/28/2013 Olga Litvak	2/5/2013 Joshua Holo	1/28/2013 Joe Kanofsky	2/5/2013 Don Seeman	1/28/2013 Leon Wiener Dow
11	2/11/2013 Olga Litvak	2/26/2013 Joshua Holo	2/11/2013 Joe Kanofsky	2/26/2013 Don Seeman	2/11/2013 Leon Wiener Dow
12	2/25/2013 Olga Litvak	3/12/2013 Joshua Holo	2/25/2013 Joe Kanofsky	3/12/2013 Don Seeman	2/25/2013 Tali Zelkowicz
13	3/18/2013 Zvi Gitelman	3/21/2013 Joshua Holo	3/11/2013 Ben Jacobs	3/19/2013 Don Seeman	3/18/2013 Tali Zelkowicz
14	4/8/2013 Zvi Gitelman	4/9/2013 David Myers	4/8/2013 Ben Jacobs	4/9/2013 David Bryfman	4/8/2013 Rachel Nussbaum
15	4/22/2013 Zvi Gitelman	4/23/2013 David Myers	4/22/2013 Jay Moses	4/23/2013 David Bryfman	4/22/2013 Rachel Nussbaum
16	5/6/2013 Zvi Gitelman	5/7/2013 David Myers	5/6/2013 Les Wexner	5/7/2013 Jay Moses	5/6/2013 Eric Yoffie
17	5/20/2013 Esther Perel	5/21/2013 David Myers	5/20/2013 Wayne Firestone	5/21/2013 Shira Stutman	5/20/2013 Darren Kleinberg
18	6/3/2013 Misha Galperin	6/3/2013 David Myers	6/3/2013 Elka Abrahamson	6/4/2013 Cindy Chazan	6/3/2013 Jay Moses

WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS  
PROGRAM APPLICATION (REVIEW)

2013 - 2014

Applicant Information

**First name:**

**Last name:**

**Email Address:**

**Cell Phone:**

**Date of Birth:**

**Gender:**

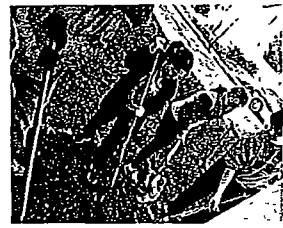
**Address:**

**Age as of next August 1:**

**Have you previously applied to the Wexner Graduate Fellowship/Davidson Scholars or  
Wexner Field Fellows Program?**

**What city will you be living in in March and April 2014?**

**This field is required**



# WELCOME TO THE WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 1)

## General Information

**Submit a short biographical sketch of yourself in the 3rd person (1250 character limit). (See "Meet our Fellows" on our web site for examples) \***

**Required**

**What city will you be living in in March and April 2014? \***

**Required**

**List the specific graduate programs and academic institutions to which you are applying or are enrolled in (first year only) to prepare you for your professional career in the Jewish Community. \***

School	Program	Degree Granted	Enrollment Date	Expected Graduation Date
<input type="text"/>				

**If you are applying for other grants or scholarships for your graduate program, please list them below. (550 character limit)**

**Blank**

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 2)

### General Education

List all undergraduate programs that you have attended in chronological order with most recent first. If you did not graduate from a school, enter in all information necessary, and then leave the graduation date blank. \*

School	Location	Dates Attended	Major	Degree Granted	Date graduated, if applicable
Blank	Blank	Blank	Blank	Blank	Blank

List all graduate programs that you have attended in chronological order with most recent first. If you did not graduate from a school, enter in all information necessary, and then leave the graduation date blank.

School	Location	Dates Attended	Major	Degree Granted	Date Graduated, if applicable
Blank	Blank	Blank	Blank	Blank	Blank

List academic awards, honors, scholarships, and distinctions you have attained in your general education, as well as any publications you have authored.

Name of Award	Date	Brief Description (200 characters or less)
Blank	Blank	Blank

Have you been suspended or dismissed from a post-high school academic institution? \*

No

Please describe your activities since you were an undergraduate student. In other words, let us know what you have been doing since leaving school or have done in between your school programs. If you are currently an undergraduate, please write "N/A." (1000 character limit, including spaces) \*

**required**

In which foreign language(s) are you proficient? Please rate yourself in the following categories as excellent, good, fair or poor.

Language	Speaking	Reading Comprehension	Writing	Translation
Blank	Blank	Blank	Blank	Blank

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 3)

Although this step is not required, please review and ensure you answered all questions relevant to you

### Jewish Education

**Please list all elementary and secondary formal Jewish educational institutions that you attended starting with most recent.**

School	Affiliation	Location	Type of Program	Dates Attended
Blank	Blank	Blank	Blank	Blank

**List up to five of your most significant informal Jewish educational activities (in your opinion), such as summer camps, youth groups, Israel trips or other programs in which you have participated starting with the most significant.**

Organization	Location	Type of Program	Role	Dates of Participation
Blank	Blank	Blank	Blank	Blank

**List up to five university level courses in Jewish Studies. If you have taken more than five Jewish Studies classes, please list the ones that are most significant in your opinion. The committee will view the remaining courses on your transcripts.**

School	Location	Course	Instructor	Credit Units
Blank	Blank	Blank	Blank	Blank

**Please list all formal Hebrew language study you have completed.**

Program	Location	Dates
Blank	Blank	Blank

**List any academic awards, honors, scholarships and distinctions you have attained in your Jewish education as well as any related publications you have authored that you have NOT listed above.**

Name of Award	Date	Brief Description (200 characters or less)
Blank	Blank	Blank

# WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 4)

## Additional Educational Information

**Name of undergraduate university or universities from which you graduated \***

School	GPA
--------	-----

If your school does not give a GPA, please explain here (leave blank if not applicable). You can also use this space to explain any anomalies in your GPA.

[Edit](#)

**Name of graduate programs from which you graduated (leave blank if not applicable)**

School	GPA
--------	-----

If any of your graduate programs to which you are applying require the GRE you must enter your scores in the blanks below and have the official test score report sent to the Wexner Foundation.

If your school requires a different graduate school entrance test please have the official test score report sent to the Wexner Foundation at the address below and enter zeros in the blanks below.

If none of the graduate programs to which you are applying require one of these exams or you are applying as a Field Fellow, then please fill in this section with zeros as you do not need to submit test scores. \*

Name of Test	Verbal Score	Quantitative Score	Analytic Score	Exam Date
--------------	--------------	--------------------	----------------	-----------

## Unofficial Transcripts

Upload a scanned unofficial transcript of all undergraduate and graduate institutions that you attended. \*

**Existing Unofficial Transcripts**

conference call line.docx

 [VIEW](#)

## Official Transcripts

All official academic transcripts must be received by the due date and sent directly to:

**Linda Smith**  
 The Wexner Foundation  
 8000 Walton Parkway #110  
 New Albany, OH 43054

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 5)

Although this step is not required, please review and ensure you answered all questions relevant to you

### Employment History

**Please list up to 5 of your most significant work experiences (including teaching, camp counseling, etc.) and indicate whether or not they were in the Jewish community. Please list chronologically starting with your most recent work experience.**

Title	Organization	Jewish (Y/N)	Hours per week	Dates of Employment
████████	████████	████████	████████	████████

### Extra-curricular Activities

**List and briefly describe up to 7 of your most significant volunteer, leadership and/or other activities.**

Role	Organization	Jewish (Y/N)	Hours per week	Dates
████████	████████	████████	████████	████████

**List your hobbies and leisure-time interests.**

**Hobby**

████████

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 6)

## Electronic Reference Process

Salutation	First Name	Last Name	Job Title	Phone	Email
has not yet submitted your reference. <a href="http://wexnerfoundation.org/recommendation/5b747619-5ce4-419b-9523-ad926410fd69">http://wexnerfoundation.org/recommendation/5b747619-5ce4-419b-9523-ad926410fd69</a>					
has not yet submitted your reference. <a href="http://wexnerfoundation.org/recommendation/9628146b-0934-4acd-aff3-4c73e52fd23">http://wexnerfoundation.org/recommendation/9628146b-0934-4acd-aff3-4c73e52fd23</a>					
has not yet submitted your reference. <a href="http://wexnerfoundation.org/recommendation/ade667d1-118b-4fec-ad5f-e82e67b87f0d">http://wexnerfoundation.org/recommendation/ade667d1-118b-4fec-ad5f-e82e67b87f0d</a>					

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 7)

### Essay 1 - Content Guidelines

**We are interested in understanding who you are, your career goals and how your projected graduate program or projected course of study will best prepare you for these goals. With this in mind, please describe in your essay the following:**

- a. The development of your interest in your projected career, particularly the critical junctures that played an important role in this evolution (e.g. experiences, family influences, role models, ideas, etc.).
- b. The leadership skills that you need to acquire to best prepare yourself for your projected career.
- c. The reasons for selecting your specific graduate program(s) and how your program(s) will address the leadership skills development articulated above.

\* Required

### Essay 1 \*

**required**

### Essay 2 - Content Guidelines

**The Wexner Graduate Fellowship/Davidson Scholars Program is intended to facilitate the development of future professional leaders for the North American Jewish community. We are interested in your reflections on the North American Jewish community, focusing on its challenges and your sense of yourself as a future leader in that community. Please describe the following in your essay as fully as possible.**

- a. As you consider the future of the North American Jewish community which issue most concerns you as it relates to your future career? Discuss your own approach to addressing this issue. How do you hope to bolster the efforts of addressing this issue?
- b. Describe the leadership role(s) you envision for yourself in the North American Jewish community ten to fifteen years from now.

\* Required

### Essay 2 \*

**required**

## WEXNER GRADUATE FELLOWSHIP/DAVIDSON SCHOLARS PROGRAM APPLICATION (STEP 8)

### Your Own Question/Answer

This space is designed to give you a chance to show us your creative side by writing your own question and answering it so that we can get a better sense of who you are. The committee encourages you to be creative in your question and answer and use this space to show us a side of you that may not normally be apparent in a written application.

#### Write your question here \*

**required**

#### Write your answer here \*

**required**

### Short Answer

**Please share with us one thing you love about being Jewish in 60 seconds or less by video (guidelines below).**

Note: it does not have to be the most profound, inspiring thing, or even your favorite but it should be something that is meaningful to you.

#### VIDEO GUIDELINES:

- The video should be a simple 60-second (or less) statement from you.
- Feel free to record yourself via your mobile device or laptop.
- WE PREFER IF YOU DON'T USE A PROFESSIONAL CAMERA and/or PROFESSIONAL EDITING SOFTWARE.
- Video must be in one of the following formats: mov, mp4, .mpeg, .avi.
- Please do not use animations, photographs, additional music/audio or graphics.
- This is not a video contest.
- We want to hear from you.

#### INSTRUCTIONS TO UPLOAD VIDEO:

- Capture a 60 second (or less) video via your mobile device or computer
- If using a mobile device, email the file to yourself
- Save the file somewhere on your computer that is accessible
- When filling out the Wexner Graduate or Field Fellowship Application, and you arrive to the questions to upload your video, click "Browse" and find the video file you have saved on your computer. When you see the green button, click upload
- Click "Next Step" and go onto the next question
- Please note, pending the video file size and the speed of your internet, uploading your video could take a little time.

#### Upload Video \*

**DOWNLOAD VIDEO**

### Statement for Re-applicants

**Have you previously applied to be a Wexner Graduate Fellow/Davidson Scholar or Wexner Field Fellow? \***

No

Submit Application

**Submit your application to the Wexner Foundation by checking the box below and clicking "Submit Completed Application." By submitting my application, I am confirming that I am:**

- Entering the first or second year of a full-time degree granting graduate program starting this summer or fall 2014, based in North America, that will allow me to pursue a career as a professional Jewish leader in North America.
- A citizen of the United States, Canada, or Mexico or have documentation that allows me to study and to work in that country.
- Between the ages of 21 and 40 upon entering my graduate program.

I understand that if selected as a "Finalist" that I will be available for an in-person interview the week of March 30, 2014 at the Foundation's expense.

**Also, I understand that if selected as a Wexner Fellow/Davidson Scholar that:**

- I will attend a 2-day orientation May 20-22, 2014 near Baltimore
- I will attend a 5-6 day Summer Institute in the second half of August for 4 years (the first one is August 17-22, 2014)
- I will attend a 4-day Winter Institute in January for 4 years (usually around MLK day)
- I will attend a 5-day retreat in November of my third year (usually around the JFNA GA)
- I will participate in monthly peer consultation conference phone calls
- Any change of my program must be approved by the Director of the Wexner Graduate Fellowship/Davidson Scholars Program
- I intend to work as a Jewish professional in North America for at least 4 years upon completion of my graduate degree.

**I have read all of the statements above, reviewed my application, and confirmed that it is complete.**

Please review and save/print your application before submitting. If you have trouble printing your application, it may be that your computer is blocking pop-ups. Try disabling your pop-up blocker.

All automated communication will come from the @wexner.net domain. Please be sure that your server will accept this email address and not send it to your spam or junk mail folder. Otherwise, be sure to check your spam or junk mail for automated emails from the Foundation.

Once your application is submitted, you will not be able to make changes or print your application.

**I have saved my application.**

#### **Application Status**

Application - Declined

#### **Comments (not viewable to applicant)**

[Step 1](#) [Step 2](#) [Step 3](#) [Step 4](#) [Step 5](#) [Step 6](#) [Step 7](#) [Step 8](#) [Review](#)

THE WEXNER FOUNDATION

איך היא דרכך? שורה והיכר או האדם? כל טהרה תפארת לעשה ותפארת לו מן ואדם

"Which is the right path to choose? One not chosen and noble in its simplicity."

## WEXNER ISRAEL FELLOWSHIP PROGRAM ELIGIBILITY FORM

**The Wexner Israel Fellowship Program (WIFP)  
Eligibility Form for Academic Year 2014-2015  
WIFP Class 26**

Thank you for your interest in the Wexner Israel Fellowship Program. The following form will help us evaluate your eligibility for submitting candidacy for the WIFP program, which will take place during Harvard University's academic year 2014-2015.

It is recommended that you read the Wexner Foundation website thoroughly prior to filling in this form. **Harvard's Kennedy School** (HKS) website can also provide additional helpful and updated information to candidates.

Please note that you'll need a compatible browser to read this form and to fill it out ([Microsoft Internet Explorer](#) or [Mozilla Firefox](#)). This form is not compatible with other web browsers. Also, typed-in information cannot be saved once it has been entered, and prior to submitting the form.

Please supply the information below in English, except where Hebrew is specified, and in both cases as completely as you can.

Please make sure you keep a copy of these materials.

We will be in touch with you regarding your eligibility by return email or by phone. If you have any questions, please contact Ms. Nitzan Glad at [wifp@wexner.net](mailto:wifp@wexner.net) or 02-563-7035.

\*\*\*\*\*

**\* Indicates required field**

**General Information**

\*Family Name

\*First Name

Prior Full Name

\*Gender

\*Date of Birth  
(DD/MM/YYYY)

(Please note that in order to be eligible, candidate must be at least 30 years and not more than 49 years of age on November 25, 2013.)

**Present Mailing Address**

\*Address I Street

Address I POB

\*Address I City/Town

\*Address I Region

\*Address I Postal Code

\*Address I Country

Address II Street

Address II POB

Address II City/Town

Address II Region

Address II Postal Code

Address II Country

\*Home Phone

Work Phone

\*Cell Phone

\*Email Address I

\*Please retype your  
Email Address I

Email Address II

Please retype your  
Email Address II

**\*Work Experience**

Please briefly characterize your professional work experience and the skills that you believe represent your strong points. What are the two or three professional skills that you need to improve upon?

# Wexner Israel Fellowship Program Eligibility Form

21

Add your CV below the the characterization you have just provided

Please limit your entire response to 4,500 characters, including spaces (approximately 2 pages, double-spaced, 12 point font and 3/4" margins)

Our system allows for minimal formatting of text. It is recommended that you write the text of your response, including your CV, with a program that provides a "spell check" function and a character counter, and then cut and paste it into the space below. Also, once you have done this, be sure to scroll down to see that all text was pasted into the box below, and double check the information on your final print-out before submitting

## \*Current position (English)

Please indicate the organization in which you are currently employed, including title of position, in English. Please be sure to select at least one of the options below

If you currently work for more than one organization, please indicate all relevant information

<b>Government Ministries</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>
<b>Government Authorities</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>
<b>Government Companies</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>
<b>Local Government</b>	<input type="text"/>
<b>Organization</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>
<b>IDF</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>
<b>Hospitals</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>
<b>HMO (Kupot Holim)</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>
<b>NGO (name of organization)</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>
<b>Other (name of organization)</b>	<input type="text"/>
<b>Position</b>	<input type="text"/>

## \*Current position (Hebrew)

Please indicate the organization in which you are currently employed, including title of position, in Hebrew. Please be sure to select at least one of the options below.

משרד ממשלת	<input type="text"/>
תפקיד	<input type="text"/>
רשות ממשלתית	<input type="text"/>
תפקיד	<input type="text"/>
חברות ממשלתיות	<input type="text"/>
תפקיד	<input type="text"/>
שלטון מקומי	<input type="text"/>
ארגון	<input type="text"/>
תפקיד	<input type="text"/>
צה"ל	<input type="text"/>
תפקיד	<input type="text"/>
בתי חולים	<input type="text"/>
תפקיד	<input type="text"/>
קופות חולים	<input type="text"/>
תפקיד	<input type="text"/>
מגזר שלישי-שם הארגון	<input type="text"/>
תפקיד	<input type="text"/>
אחר - שם הארגון	<input type="text"/>
תפקיד	<input type="text"/>

**Immediate Supervisor**

\*Immediate supervisor's name in English

\*Immediate supervisor's position in English

\*Immediate supervisor's name in Hebrew.

\*Immediate supervisor's position in Hebrew

**\*Prior Work Experience**

Please specify your five prior work professional positions (before your present position as indicated above) Please note that after pressing the bar below, you will be returned to the top of the page and will need to scroll down

From (YYYY) / Until (YYYY) / Position / Workplace

**Additional Information**

We are interested in receiving as full a picture as possible of your professional expertise and leadership potential in the Israeli public sector  
Use the free text box below if additional space is necessary to explain your chosen career path so far.

Please note that there is a limit of 2,000 characters, including spaces, for this section.

**\*Professional Development**

It is important for us to have a sense of your professional vision as a Wexner Israel Fellowship Candidate Please indicate up to three of your professional goals for the next five to ten years

Please note that there is a limit of 1,000 characters, including spaces, for this section

**Military Service/National-Civic Service**

If relevant - please specify:

Position (Rank)	<input type="text"/>
From (YYYY)	<input type="text"/>
Until (YYYY)	<input type="text"/>
Type	<input type="text"/>
Corps	<input type="text"/>

**Previously Applied**

\*Have you ever applied to the Wexner Israel Fellowship Program before?

If so, when (MMYYYY)?

**\*Standardized Test Score (TOEFL/ IELTS or GRE)**Indicate Intended or actual date of **TOEFL/ IELTS** (Test of English as a Foreign Language) or **GRE** (Graduate Record Examinations), which is required for admission to HKS. Note that it is crucial to register at the earliest opportunity for the examPlease keep in mind that TOEFL/ IELTS or GRE test scores and any score appeals must be submitted by November 25, 2013. If you do not have a scheduled exam date, please indicate the month you intend to take the examMost candidates of the Wexner Israel Fellowship Program are exempted by HKS from the GRE or GMAT as stated on the School's website. The TOEFL/ IELTS is required by HKS of all candidates whose native language is not English or whose undergraduate degree program was not conducted in EnglishIf you're not sure whether or not you should take the TOEFL/ IELTS or GRE test, please contact the HKS admission's office directly by email with your question, and add the WIFP email address in the CC section

Please note that after pressing the bar below, you will be returned to the top of the page and will need to scroll down

**Test Type / Date Type / Exam Score / Exam Date**

Click here to add a test information

**How did you hear about the Wexner Israel Fellowship Program?**

Please mark one or more of the following options

 Newspaper  Internet  Foundation Website  WIFP Alumni  Civil Service Commission  Other

If newspaper or other, please provide details

Newspaper

Other

**User Name and Password**

Please choose a username and password. These will be your user name and password designations throughout the Wexner Israel Fellowship application process

\*User Name

\*Password (minimum 7 characters)

\*Confirm Password

\*Once you have submitted your form, you will not be able to view it and/or change data in it. We strongly recommend that you save a copy of the form for your records. To save your Eligibility Form (EF) in PDF format, please click the "Save EF as PDF" button.

 I have printed my eligibility form

HEADQUARTERS COLUMBUS  
8000 Walton Parkway, Suite 110  
New Albany, Ohio 43054  
(614) 939-6360

NEW YORK  
599 Lexington Avenue, 27A  
New York, New York 10022  
(212) 355-6115

CAMBRIDGE  
Center for Public Leadership, Harvard Kennedy School  
79 JFK Street  
Cambridge, MA 02139  
(617) 496-7113

TEL AVIV  
37 Derech Bet Lechem  
Jerusalem, Israel 93553  
(02) 563-7025

Find a Staff Member | Contact Us | Copyright 2007-2008 The Wexner Foundation

Application for Extension of Time To File an  
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box . . . . . ►
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

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

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

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

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

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions  Wexner Foundation	Employer identification number (EIN) or  23-7320631
File by the due date for filing your return. See Instructions	Number, street, and room or suite no. If a P.O. box, see instructions  8000 Walton Parkway, Suite 100	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions  New Albany, Ohio 43054	

Enter the Return code for the return that this application is for (file a separate application for each return) . . . . . 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► Peggy Ugland

Telephone No. ► 614-939-6000 FAX No. ►

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

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8-15, 20 13, to file the exempt organization return for the organization named above. The extension is for the organization's return for  
►  calendar year 20 12 or

►  tax year beginning , 20 , and ending , 20 .

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	100
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	407
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

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

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Cat No 27916D

Form 8868 (Rev. 1-2013)

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box

Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)**

Enter filer's identifying number, see instructions

Type or point  File by the extended due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions  Wexner Foundation Number street and room or suite number if a P.O. box, see instructions  8000 Walton Parkway, #100 City, town or post office, state, and ZIP code. For a foreign address, see instructions  New Albany, OH 43054	Employer identification number (EIN) or  23-7320631 Social security number (SSN)
--	---	---

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

04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990 EZ	01		
Form 990 BL	02	Form 1041 A	08
Form 4720 (individual)	03	Form 4720	09
Form 990 PF	04	Form 5227	10
Form 990 T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990 T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of  Peggy Ugland  
Telephone No  (614) 939-6000 FAX No  (614) 939-6025
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3 month extension of time until Nov 15, 2013

5 For calendar year 2012, or other tax year beginning 2013, and ending 2013

6 If the tax year entered in line 5 is for less than 12 months, check reason  Initial return  Final return

Change in accounting period

7 State in detail why you need the extension Additional information is needed to file a complete and accurate Form 990-PF

8a If this application is for Form 990 BL, 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$ 22.
b If this application is for Form 990 PF, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$ 407
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c \$ 0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title  FIF20502 01/21/13

BAA

Date  Form 8868 (Rev. 1-2013)