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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2012
Open to Public Inspection

_	_A F	or the 2	2012 calendar year, or tax year beginning	and	lending			
	∪ <u>⊾</u> a	heck if	C Name of organization		<u> </u>	D Employer ide	ntification nur	mber
		Address change	KNESET MORDECHAI					
	{ [Name change	Doing Business As			56	-241793	8
	G 🖥	Initial return	Number and street (or P.O. box if mail is not delivered to street	address)	Room/suite	E Telephone nu	mber	
300		Termin- ated	25 FREEDOM DRIVE		<u> </u>	64	6739454	
<u> </u>	<u> </u>	Amended	Uity, town, or post office, state, and ZIP code			G Gross receipts \$		<u>552,192.</u>
ス	_ا خ	Applica- tion pending	LAKEWOOD, NJ 08701			☐ H(a) Is this a gro		
€		pending	F Name and address of principal officer AARON WALK			for affiliates		Yes X No
<u>~</u>	. —		25 FREEDOM DRIVE, LAKEWOOD, NJ			H(b) Are all affiliate		
9			$\frac{1}{1000} \frac{1}{1000} \frac{1}{1000$	4947(a)(1)	or 527		chatist (see in	•
U			▶ N/A	7 Other N	——————————————————————————————————————	H(c) Group exen		
			ganization: X Corporation Trust Association Summary	Other -	L Year	of formation: 200	3 M State of le	gal domicile: N Y
	Га			tuutus ME A	DE A	ע זם גישדת געי	OPCANT	7 7 77 (37
	2		riefly describe the organization's mission or most significant ac NGAGED IN FINANCING ,FUNDRAISIN					ZATION
	Activities & Governance		neck this box In the organization discontinued its op-					
	Še		umber of voting members of the governing body (Part VI, line 1		73 0 4 01 11101	e than 2570 Of its in	3	3
	ၓ		umber of independent voting members of the governing body			••	4	3
	တို့ ဟူ		otal number of individuals employed in calendar year 2012 (Par			•	5	0
	ıţ;		otal number of volunteers (estimate if necessary)			•	6	0
	Ė		otal unrelated business revenue from Part VIII, column (C), line	12		•••	7a	0.
	~		et unrelated business taxable income from Form 990 T, line 34			•	7b	0.
						Prior Year	Curr	rent Year
	<u>o</u>	8 Co	ontributions and grants (Part VIII, line 1h)		_	<u>484,18</u>	5. !	<u>552,192.</u>
	e l	9 Pr	ogram service revenue (Part VIII, line 2g)		_		0.	0.
	Revenue		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		_		0.	0.
	_		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and		_	4044	0.	0.
	-		otal revenue add lines 8 through 11 (must equal Part VIII, colu	ımn (A), line 12)		484,18		552,192.
	1		rants and similar amounts paid (Part IX, column (A), lines 1-3)		438,99		405,927.	
			enefits paid to or for members (Part IX, column (A), line 4)	}		0.	0.	
	Expenses		alanes, other compensation, employee benefits (Part IX, column			0.	0.	
	en l		ofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25)	28,7	16		0.	<u> </u>
	<u>a</u>	_				12,92	<u>n</u>	28,982.
		18 To	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses Add lines 13-17 (must equal Part IX, column (A), evenue less expenses Subtract line 18 from line 12	hues 254 as a second		451,91		434,909.
	:	19 Re	evenue less expenses. Subtract line 18 from line 12	RECEN	VEDL	32,26		117,283.
	580					ginning of Current Y		of Year
	ages	20 To	otal assets (Part X, line 16)	APR OS		35,90		153,190.
	Net Assets or Fund Balances	21 To	otal liabilities (Part X, line 26)		110	ò	0.	0.
2013	<u>SE</u>		et assets or fund balances Subtract line 21 from line 20	AARMAI	le le	35,90	7.	153,190.
		 	Signature Block	ORDEIA'				
₹ 7			es of perjury, occlare that have examined this return, including accor				of my knowledge	e and belief, it is
	true,	correct,	and complete. Decaration of preparer (other than officer) is based on a	all information of w	thich prepare	r has any knowledge		
APR			Signature of officer			Date		
	Sign		AARON WALKIN, OFFICER			Date		
SCANNED	Here		Type or print name and title					
3		P	rint/Type preparer's name	nature		Date Chec	* PTIN	V
رچي د کي	Paid		EE HANOVER			03/15/15 t	employed POO	182640_
(A)	Prep			ANOVER C	PA'S	Firm's EIN		641196
60	Use		irm's address 111 BROADWAY					
			NEW YORK, NY 10006			Phone no.	(212)2	27-8034
	May	the IRS	discuss this return with the preparer shown above? (see instr		/	71/		Yes No
	23200	12-10-1				110-2		orm 990 (2012)
		SE	E SCHEDULE O FOR ORGANIZATION M	ISSION S	TATEM	ENT CONTIN	UATION	つり

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Form	1 990 (2012) KNESET MORDECHAI	<u> 56-2417938</u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission RAISING FUNDS ON BEHALF OF YESHIVAS KNESET MORDECHAI IN	ISRAEL	
2	Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Tes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 405,927. including grants of \$ 405,927.) (Revenue GRANTS TO YESHIVAS KNESET MORDECHI IN ISRAEL_)
	GRANIB TO TEBRIVAS RIESET MORDECHT IN IBRAED		
4b	(Code) (Expenses \$ including grants of \$) (Revenue	e \$)
			
			,
			
			
4c	(Code) (Expenses \$) (Revenue	ie \$)
			
			
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 405,927.		
		Form \$	90 (2012)

Form 990 (2012) KNESET MORDECHAI
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	_		
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		1	
	during the tax year? If "Yes," complete Schedule C, Part II	4_	_	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_	1	
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		-	-
0	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
5	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
-	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X_
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	<u> </u>	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
124	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa	-	
v	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		l	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			[
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X_	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			1
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			1
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		}	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 -	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4-		
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		X
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		990	(2012)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21_		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			i
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23_	<u> </u>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			٠.
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			,,,
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,,
	Part V, line 1	34	-	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00		ŀ
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			. v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Х	
	Note. All Form 990 filers are required to complete Schedule O	38 Form	990	(2012)
		roim	330	(2012)

Form	990 (2012) KNESET MORDECHAI		56-2417	938	P	age !
Par						
	Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		İ I	ĺ
	Did the organization comply with backup withholding rules for reportable payments to vendors and i	eportable o	aming			
	(gambling) winnings to prize winners?	•		1c		
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	0			
	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b		1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction		•			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•		3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		•••	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority of	ver, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		X
	If "Yes," enter the name of the foreign country:	,	• • •			
	See instructions for filing requirements for Form TD F 90-22.1, Peport of Foreign Bank and Financial	Accounts	-			[
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transf	action?	• ••	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he organiza	tion solicit			
	any contributions that were not tax deductible as charitable contributions?	J		6a		X
	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or aift	 S			
	were not tax deductible?	. .		6b		
	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provid	led to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	•		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	1			
	to file Form 8282?	·		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contract?		7e		İ
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		••	7 f		
	If the organization received a contribution of qualified intellectual property, did the organization file F		s required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. [
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at			8	,	
	Sponsoring organizations maintaining donor advised funds.	•				
	Did the organization make any taxable distributions under section 4966?			9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		•	9b		
	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
-	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
	If the state of th	/o O		445	\vdash	

Form 990 (2012) KNESET MORDECHAI

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response or changes in Schedule O See instructions

	to line ba, bb, or tob below, describe the dicumstances, processes, or changes in schedule O. See instructions								
_	Check if Schedule O contains a response to any question in this Part VI			X					
Sec	tion A. Governing Body and Management		V	N _a					
4	Enter the number of voting members of the governing body at the end of the tax year	2	Yes	No					
ıa	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing	4							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
	Enter the number of voting members included in line 1a, above, who are independent 1b	2							
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	4							
2	officer, director, trustee, or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization become aware during the year of a significant diversion of the organization assets.	6		X					
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	 							
/ a	more members of the governing body?								
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		X					
b	persons other than the governing body?	7b		Х					
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	10							
8	The governing body?	8a	X						
	Each committee with authority to act on behalf of the governing body?	8b	X						
р 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	- 60	A						
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			_*.					
	tion D. Follolog (This Section & requests information about policies not required by the internal revenue code y		Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100	-						
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a		12a		х					
b		12b	_						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	_						
Ŭ	in Schedule O how this was done	12c		İ					
13	Did the organization have a written whistleblower policy?	13		X					
14	Did the organization have a written document retention and destruction policy?	14		X					
15	Did the process for determining compensation of the following persons include a review and approval by independent	17							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a		_ <u>x</u> _					
b	Other officers or key employees of the organization	15b		X					
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	100							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		x					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	1							
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure		_						
17	List the states with which a copy of this Form 990 is required to be filed ▶NJ								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le						
-	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	nd finar	icial						
-	statements available to the public during the tax year								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation.	•						
-	THE ORGANIZATION - 6467394549		·						
	25 FREEDOM DRIVE, LAKEWOOD, NJ 08701								
23200		Form	990	(2012)					

Form 990 (2012) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				1 than is bot	one h an	ed any current officer, of (D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) AARON WALKIN	1.00									
OFFICER				Х		<u> </u>		0.	0.	0
(2) JACOB EISENTEIN	0.00									
OFFICER				X				0.	0.	0
(3) NOCHUM ABRAMOWITZ	1.00	Ì		ĺ						
OFFICER				X		<u> </u>		0.	0.	0
								-		
<u> </u>						<u> </u>				
										
-		-								
							_			
		-		 						
					-	-				
	-		-	-						
	-						_			
								·-		
		-				<u> </u>	<u> </u>			

Form 990 (2012)

Pa	t VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A) Name and trile	(B) Average hours per week	Position (do not check more box, unless person officer and a direct				ore than one on is both an		(D) Reportable compensation from	(E) Reportable compensation from related		am	(F) imated ount of other	of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	O-MISC) fro orga and		ensat om the inizatio relate nizatio	e on ed
												_		
							-					_	· <u> </u>	
							<u> </u>						_	
				_				_		<u> </u>	_			
					ļ									
							-							
								-			-		_	
	Sub-total Total from continuation sheets to Part V	II, Section A					>		0.		0.			0.
d 2	Total (add lines 1b and 1c) Total number of individuals (including but r	not limited to th	ose	liste	ed a	bove	e) wl	ho re	eceived more than \$100	,000 of reportabl	0. e			<u>0.</u>
	compensation from the organization	director or tri	ıcto	- ka	»or	nnle	21/00	or	highest componented of	mplovos on		- 	Yes	No
3	Did the organization list any former officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i> For any individual listed on line 1a, is the si	such individual										3		X
5	and related organizations greater than \$15 Did any person listed on line 1a receive or	0,000? If "Yes,	" co	mpie	ete S	Sche	edule	e J f	for such individual	-	-	4		X
	rendered to the organization? If "Yes," contains B. Independent Contractors	=]	5		X
1	Complete this table for your five highest co the organization Report compensation for										pens	ation fr	om	
	(A) Name and business	address	N	ONI	₹				(B) Description of s	services	С	(C) ompen	sation	1
				_				_						
					_			_						
											·	· 		
								1				 .		
2	Total number of independent contractors (ot lu	mite	d to		_	sted	l above) who received n	ore than				
	\$100,000 of compensation from the organi	zation >					0					Form 9	90 (2	012

		Check if Schedule O cont	ains a response	to any question i	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
S, E		Fundraising events	1c					
# Z		Related organizations	1d					
'S E		Government grants (contribut						1
<u>[5</u> i2]	f	All other contributions, gifts, gran						
her	•	similar amounts not included abo		552,192.				
Ē		Noncash contributions included in lines		332/1321				ĺ
SE	_	Total. Add lines 1a-1f	. 12-11 \$		552,192.		<u>'</u>	
		Total Tida Milos Ta Ti		Business Code	<u> </u>			
يو	2 a							
Program Service Revenue	_ b							
8 E	c							
E S	d							
ğ.	_							
<u>4</u>	- +	All other program service reve	enue					
		Total, Add lines 2a-2f	7140					
	3	Investment income (including	dividends inter	est and				
	3	other similar amounts)	Gividerida, inter	CSI, and				
	4	Income from investment of ta	v.evemnt hand i	proceeds				
	5	Royalties	x-exempt bond	proceeds				
J	3	noyanies	(i) Real	(ii) Personal	·			
İ	6 a	Gross rents	(y near	(ii) r ersoriai				
	٠.	1		 				
	b	Rental income or (loss)		 				
ľ	ا		L					
İ	d	Gross amount from sales of	(i) Securities	(ii) Other	<u></u> -			
	/ a		() Securities	(ii) Otrier				
		assets other than inventory Less, cost or other basis		 				
	D	and sales expenses		1				
	_	•		 				
		Gain or (loss) Net gain or (loss)						
		- , ,	a avanta (nat					_
E E	ва	Gross income from fundraisin including \$	-	1				
Other Reven		contributions reported on line						
8		Part IV, line 18	•					
ĬĘ	L		a b					
5		Less direct expenses	-	'				
]		Net income or (loss) from fund	-	<u> </u>				 -
	9 a	Gross income from gaming ac Part IV, line 19						
	_		a b					
1		Less: direct expenses		'				
		Net income or (loss) from gan						
	10 a	Gross sales of inventory, less						
		and allowances	a					
ļ		Less: cost of goods sold	b	'L				
}	<u> </u>	Net income or (loss) from sale		P				
}		Miscellaneous Revenu		Business Code				İ
	11 a			 				
ĺ	b							
ļ	C	All other roughus		 				
	_	All other revenue		<u> </u>				
	_	Total. Add lines 11a-11d			552,192.	0.	0.	0.
23200	<u>12</u>	Total revenue See instructions.		<u>P</u>	004,134.	U • I	<u> </u>	Form 990 (2012)
12-10-	12							rum əə∪ (2012)

Sect	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respon		s Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	405,927.	405,927.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include			:	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	•			
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		 -		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses			<u> </u>	
14	Information technology				
15	Royalties				
16	Occupancy				00.546
17	Travel	28,746.			28,746.
18	Payments of travel or entertainment expenses			;	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest			-	
21	Payments to affiliates		·· ····		_ _
22	Depreciation, depletion, and amortization			 -i	
23	Insurance			-	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				
а	BANK FEES	236.		236.	
b					
С					
d					· -
	All other expenses		40		
<u>25</u>	Total functional expenses. Add lines 1 through 24e	434,909.	405,927.	236.	28,746.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X		- 	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	35,907.	1	153,190.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		1	
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
	[basis. Complete Part VI of Schedule D 10a		Ĭ	
	ь	Less accumulated depreciation 10b		10c	
	11	Investments · publicly traded securities		11	
	12	Investments other securities See Part IV, line 11		12	
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	35,907.	16	153,190.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
jab	Ì	key employees, highest compensated employees, and disqualified persons.			
_		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	<u>0.</u>
	ļ	Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and		. }	
Ses	ļ	complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
Б	29	Permanently restricted net assets		29	
Ŀ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ X			
ō		and complete lines 30 through 34.			
3ets	30	Capital stock or trust principal, or current funds	0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	35,907.	32	<u>153,190.</u>
~	33	Total net assets or fund balances	35,907.	33	153,190.
	34	Total liabilities and net assets/fund balances	35,907.	34_	<u>153,190.</u>

Form **990** (2012)

Form	990 (2012) KNESET MORDECHAI	56-241	7938	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	552	1,1	<u>92.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	434	.,91	09.
3	Revenue less expenses. Subtract line 2 from line 1	3	117	,2	<u>83.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	35	,91	07.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	_153	,19	90.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
1	Accounting method used to prepare the Form 990: X. Cash Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		ļ	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	d on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
h	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	A hasis		_	<u></u>
	consolidated basis, or both	0 04010,			
	Separate basis Consolidated basis Both consolidated and separate basis				
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	[[
·	review, or compilation of its financial statements and selection of an independent accountant?	o addit,	2c	Ì	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	-20		
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
Ja	Act and OMB Circular A-133?	igio Addit	3a		X
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	 ired audit	30		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit	3b		
	er additor orpitally trip in deficially describe any stops taken to undergo duent addits		Form 9	90 c	20121
				/*	·-/

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Inspection

name or	me organizati							-			nuncau		
Dod	Decem		MORDECHAI	<u>.</u>					5	6 –	2417	938	}
Part I	<u> </u>		rity Status (All organiz					tructions.					
		· ·	because it is: (For lines 1	_		-	-						
1 📙			s, or association of churc			ction 170	(b)(1)(A)(i)).					
2			70(b)(1)(A)(ii). (Attach Sc										
3 📙	-		ital service organization of										
4 📖			operated in conjunction	with a hos	prial desc	nbed in se	ction 170	(b)(1)(A)(i	ii). Enter	the	hospital	's nan	ne,
	city, and stat												
5 📖	-	•	benefit of a college or ur	niversity o	wned or o	perated by	a governi	mental un	it describ	ed i	n		
		(b)(1)(A)(iv) . (Compl	· ·										
6 🖳		=	nent or governmental und			-							
7 📖	-	•	ceives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	e general	pub	lic desc	ribed	ın
		b)(1)(A)(vi). (Comple											
8 🖳			section 170(b)(1)(A)(vi).										
9 X	-	•	ceives (1) more than 33 1										
			nctions - subject to certa										
			axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization	afte	r June 3	10, 19	75.
		509(a)(2). (Complete				_							
10			perated exclusively to te					-				_	
11	_	•	perated exclusively for th						•	-	•		or
			ations described in section		•		2) See seo	ction 509(a)(3). Ch	eck	the box	that	
			organization and comple							_			
	a Type I		•	ype III - Fu		_		• •			nctionall 	•	•
e	_	=	at the organization is not										
		_	than one or more publicly						9(a)(1) or	sec	tion 509)(a)(2)	
f	_		tten determination from t	ine IRS tha	atitisa iy	pe i, Type	II, or Type	9 111					г
		rganization, check th					-f +L - f-11		0				L
g	-		organization accepted ar										Τ
		•	directly controls, either al	one or tog	etner with	persons o	escribeo	ın (II) and ((III) below	'• 	44-(1)	Yes	No
	-		upported organization?								11g(i)	┼	
	•		rson described in (i) above?									+-	
	• •	•	a person described in (i) o	• • •							11g(iii)	<u> </u>	Ь
h	Provide the i	bilowing information	about the supported org	gariizatiorii	(5)								
			T	tive le the e	rganization	(v) Did you	u notify the	(vi) is	s the	Γ		<u> </u>	
• •	of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col. (i) lis			ion in col.	Lorganizati	ation in col. 💜		(vii) Amount of mo		netary
Ulya	anization		above or IRC section		document?			(i) organiz U.S	.?		sup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No	1			
			† 		 								
					1		•		1				
			•						 				
					ļ			1					
										-			
								1	T				
]	T					
Total			1	<u></u>				<u> </u>	<u>L</u> .				
	aperwork Re	duction Act Notice	, see the Instructions for	or				Schedul	e A (For	m 9	90 or 99	30-EZ	2012

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012						Page 2
Part II Support Schedule for (Complete only if you checked	•					•
fails to qualify under the tests			-	on lailed to quality	under rat in in the	organization
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 						
6 Public support. Subtract line 5 from line 4						
Section B. Total Support			· · · · · · · · · · · · · · · · · · ·	T		
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4 8 Gross income from interest, dividends, payments received on						
securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business						
activities, whether or not the business is regularly carried on 10 Other income Do not include gain						
or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10 12 Gross receipts from related activities,	eta (coo instructi	L		<u> </u>	12	
13 First five years. If the Form 990 is for	,	•	d fourth or fifth t	av vaar as a sectir		
organization, check this box and stop	•	3 11131, 3000110, 11111	a, 1021111, 01 111111 ti	ax year as a seem	// 30 /(c/(d)	
Section C. Computation of Publi		rcentage			 	
14 Public support percentage for 2012 (I		········	column (f))		14	%
15 Public support percentage from 2011		-	•••		15	%
16a 33 1/3% support test - 2012. If the costop here. The organization qualifies	organization did no	ot check the box o		14 is 33 1/3% or i	more, check this bo	ox and
b 33 1/3% support test - 2011. If the o	organization did no	ot check a box on	line 13 or 16a, and	I line 15 is 33 1/39	6 or more, check th	nis box
and stop here. The organization quali						
17a 10% -facts-and-circumstances test	: - 2012 . If the org	ganization did not i	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,

Schedule A (Form 990 or 990-EZ) 2012

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	432,821.	459,822.	515.003.	484.185.	552,192.	2444023.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	432,021.	433,022.	313,003.	404,103	3327 1320	
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf		•				
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	432,821.	459,822.	515,003.	484,185.	552,192.	2444023.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
(Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)						2444023.
<u>Se</u>	ction B. Total Support	<u></u>					
Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
_	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	432,821.	459,822.	515,003.	484,185.	552,192.	2444023.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						. st T
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		•				
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
	Total support. (Add lines 9, 10c, 11, and 12)	432,821.	459,822.		484,185.		2444023.
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3) organız	ation,
_	check this box and stop here	in Community Dr				·	
	ction C. Computation of Publ		<u> </u>			45	100 00 %
	Public support percentage for 2012 (column (t))			100.00 % %
	Public support percentage from 2011				 	16	%
	ction D. Computation of Investing Investment income percentage for 20			ne 13. column (f)		17	.00 %
	-		18	%			
18 Investment income percentage from 2011 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not							
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	fies as a publicly	supported organization	ation	. ▶ X
	33 1/3% support tests - 2011. If the line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047
0040
2012
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Open to Public
Increation

Department of the Treasury Internal Revenue Service

Employer identification number

Name of the organization Employee						er identification number		
KNESET MORDECHA	ΔI				56-24179	38		
	rmation on A	Activities Ou	tside the United States. Complet	e if the organi				
		n maintain recor	ds to substantiate the amount of its grai	nts and other a	assistance.			
<u>-</u>	-		the selection criteria used to award the			Yes X No		
2 For grantmakers. Desc United States	cribe in Part V the	e organization's	procedures for monitoring the use of its	grants and oti	her assistance ou	tside the		
3 Activities per Region. (T	he following Part		an be duplicated if additional space is no	eeded)				
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prog describe	ity listed in (d) iram service, specific type e(s) in region	(f) Total expenditures for and investments in region		
			GRANTS TO YESHIVAS TO			ľ		
MIDDLE EAST AND		_	SUPPORT RELIGIOUS STUDIES					
NORTH AFRICA -	1 1	11_	AND EDUCATION			405,927.		
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3 a Sub-total	1	1				405,927,		
b Total from continuation								
sheets to Part I	0	0			 			
c Totals (add lines 3a	1	1	į l					
and 3b)	1	l1_	<u> </u>			405 927.		
LHA For Paperwork Reduct	tion Act Notice,	see the Instruc	tions for Form 990.		Schedule F	(Form 990) 2012		

232071 12-10-12

Schedule F (Form 990) 2012 KNESET MORDECHAI

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed

(i) Method of valuation (book, FM) appraisal, other)	FWV		_					Schedule F (Form 990) 201
(h) Description of non-cash assistance								Pohod
(g) Amount of non-cash assistance	0,					xempt by	1	
(f) Manner of cash disbursement						recognized as tax-e		
(e) Amount of cash grant	405,927。				:	foreign country.		
(d) Purpose of grant	TO SUPPORT THE RELIGIOUS & EDUCATIONAL ACTIVITES OF THE YESHIVA,	•				Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter		
(c) Region	MIDDLE EAST AND NORTH AFRICA					ns listed above that are el has provided a sectio	or entities	
(b) IRS code section and EIN (if applicable)						recipient organization he grantee or couns	other organizations	
1 (a) Name of organization		•				2 Enter total number of the IRS, or for which the	3 Enter total number of other organizations or entities	

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Page 3

KNESET MORDECHAI

Schedule F (Form 990) 2012 KNESE

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Schedule F (Form 990) 2012 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients Part III can be duplicated if additional space is needed (b) Region (a) Type of grant or assistance

"Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions

Schedule F (Form 990) 2012

X No

for Form 5713)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

KNESET MORDECHAI 50-241/938
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EXCLSIVELY FOR RELIGIOUS ACTIVITIES. OUR MAIN ACTIVITIES CONSIST OF
RAISING FUNDS FOR DISTRIBUTION TO OTHER NON-PROFITS TO ASSIST THEM IN
THEIR NON PROFIT GOALS
FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 IS MADE
AVAILABLE TO MEMBERS OF THE BOARD EITHER VIA EMAIL OR IN PAPER BEFORE
FILING.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATIONS GOVERNING
DOCUMENTSARE AVAILABLE UPON REQUEST IN WRTIING FROM THE ORGANIZATION

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