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DLN: 93493101003214

Department of the Treasury

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)

2012

OMB No 1545-0047

Open to Public

				g 07-01-2012 ,2012, and ending 06-	30-2013			
	ck if appl ress chan	licable		EIZMANN INSTITUTE OF SCIENCE INC			yer ident 523886	ification number
— Nan	ne change	e	Doing Business As					
Initi	al return	ŀ		nail is not delivered to street address) Room/s	uite	E Teleph	one numbe	er
Terr	mınated		633 3RD AVENUE 20TH FLOOR			(212)	895-79	100
	ended reti		City or town, state or country, and 7 NEW YORK, NY 10017	ZIP + 4				
App	lication pe	ending			_	G Gross	receipts \$:	108,490,000
			F Name and address of prin MARSHALL LEVIN 633 3RD AVENUE 20TH FL	·		hıs a group ıates?	return f	or ┌Yes ៧ No
			NEWYORK,NY 10017					ed? 「Yes 「No see instructions)
Tax	-exempt	t status	▽ 501(c)(3) □ 501(c)() ◄ (insert no)				
w	ebsite: Þ	► ww\	W WEIZMANN-USA ORG		H(c) Gro	oup exempt	tion num	per F
(Form	n of organ	nızatıon	Corporation Trust Associatio	n Other 🕨	L Year of	formation 19	944 M S	itate of legal domicile N
Pai	rt I	Sum	mary					
aoyemance	<u>ISI</u>	RAEL		ENOWNED SCIENTIFIC RESEARCH				
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s common				ing body (Part VI, line 1a)			3 4	13
				of the governing body (Part VI, line 1b calendar year 2012 (Part V, line 2a)			5	8
}				ecessary)			6	4
	7a To	tal unr	elated business revenue from P	art VIII, column (C), line 12			7a	-159,000
	b Ne	et unrel	ated business taxable income fi	rom Form 990-T, line 34			7b	-213,000
					Pr	ior Year		Current Year
<u>.</u>			- '	ne 1 h)	·	51,884,	000	58,566,000
Revenue				ne 2g)		-		13,051,000
Æ		11146361	ment income (i ait viii, column					
	11 (Otherr	evenue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 11e)		-8,	000	-194,000
	12	Total re	evenue—add lines 8 through 11	(must equal Part VIII, column (A), lii	ne			
	12	Total re	evenue—add lines 8 through 11	(must equal Part VIII, column (A), lıı		68,405,	000	71,423,000
	12] 13 (Total re 12) . Grants	evenue—add lines 8 through 11	(must equal Part VIII, column (A), lines 1-3)			000	71,423,000 56,040,000
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May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

. . . ГYes ГNo

4d Other program services (Describe in Schedule O)
 (Expenses \$ 0 including grants of \$

Total program service expenses ►

aning grants or \$

56.126.000

0)

0)(Revenue \$

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)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
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	Yes	
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	Yes	
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	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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 1^2 If "Yes," complete Schedule I, Parts I and II	21		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
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		No
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		No
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		No
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		i	
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	Yes	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Par	Statements Regarding Other IRS Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 23		103	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
2-		2-	V 0.0	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a 3b	Yes Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30	res	
тa	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country 🌘 GM , IS			
	See instructions for filing requirements for Form TD F 90-22 1, Report 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Oa		- 140
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	į Į		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			140
u	74			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	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			
1	Section 501(c)(12) organizations. Enter			
_	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.	, l		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	<u> </u>		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Form 990 (2012) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax 1a 132 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are 131 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Yes Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο 6 Nο 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Nο Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the vear by the following

а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	even	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NE, NH, NJ, NM, NV, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. 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, and financial 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 ►MICHELE WILLNER 633 3RD AVENUE 20TH FLOOR NEW YORK, NY (212)895-7900

Νo

16a

16b

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

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

	1	1		(C)						
(A) Name and Title	(A) A verage hours per week (list any hours for related					heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2033 11130,	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion (han d n is	one I both	box, an	heck unless officer stee)	S	(D) Reportable compensation from the organization (W-			(F) Estima nount of ompens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganizati relate irganiza	d
1b	Sub-Total			<u> </u>	<u>. </u>	<u>. </u>	<u> </u>	 					
c	Total from continuation sheet	s to Part VII, S	ection A	١.				F					
d	Total (add lines 1b and 1c) .					•		F	3,961,189	C)		615,810
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	ian			
										-		Yes	No
3	Did the organization list any fo on line 1a? <i>If</i> "Yes," complete S					key •	emplo	yee, •	or highest compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1			•					_				
	services rendered to the organ	nization? <i>If "Yes</i>	," compl	ete S	ched	lule 3	1 for su	ch pe	erson	[5		No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your five		ensate	dinde	epen	den	t contr	acto	rs that received mo	re than \$100,000	of		

compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
POKE NEW YORK LLC 11 HARRISON STREET NEW YORK NY 10013	WEBSITE DESIGN	241,000
ADS ADVERTISING 105 ANN STREET NEWBURGH NY 12550	ADVERTISING AND MAILINGS	231,000
GRANT THORNTON LLP 666 THID AVE NEW YORK NY 10017	ACCOUNTING SERVICES	219,000
MICROCORE 32 UNION SQUARE NEW YORK NY 10003	COMPUTER CONSULTING	193,000
SANDHURST ASSOCIATES 299 PARK AVE 42ND FL NEW YORK NY 10171	MAINTENANCE SERVICES	158,000
Table work and an and are a store than the store had not been been able to the store that the store that the		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶9

Part V	***	Statement of Revenue Check if Schedule O contains a res	spansa ta any guastian	un thic Bart VIII			
		Check if Schedule O Contains a res	sponse to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
(0	1a	Federated campaigns	1a 0				
unts	b	Membership dues	1b 0				
Sra not		Fundraising events	1c 747,000				
S, C	C						
# <u>.</u> 1	d	Related organizations	1d 0				
ž.E	е	Government grants (contributions)	1e 0				
ri Si	f	All other contributions, gifts, grants, and similar amounts not included above	1f 57,819,000	İ			
bul The	g	Noncash contributions included in lines	4 225 754				
Contributions, Gifts, Grants and Other Similar Amounts	y	1a-1f \$	1,235,751				
a C	h	Total. Add lines 1a-1f		58,566,000			
Program Service Revenue	2a b		Business Code				
N C	с						
<u> </u>	d						
Ē	e						
₽ O	f	All other program service revenue					
4	g	Total. Add lines 2a-2f		0			
	3	Investment income (including divi		7,052,000	o	-159,000	7,211,00
	4	and other similar amounts) Income from investment of tax-exempt b	_	0	0	0	
	5	Royalties	▶	0	0	0	
		(ı) Real	(II) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	С	Rental income	0				
	d	or (loss) Net rental income or (loss)					
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of 42,378,000 assets other than inventory	0				
	b	Less cost or other basis and 36,379,000	0				
		sales expenses					
	c d	Gain or (loss) 5,999,000 Net gain or (loss)		5,999,000	0	ol	5,999,00
Other Revenue		Gross income from fundraising events (not including \$ 747,000 of contributions reported on line 16 See Part IV, line 18		5,233,655	J		3,333,00
<u>.</u>			a 494,000				
둥	b C	Less direct expenses Net income or (loss) from fundrais		-194,000		ol	-194,00
		Gross income from gaming activities See Part IV, line 19	es	151,000		J	13,1,00
	b	Less direct expenses	a b				
	c	Net income or (loss) from gaming					
		Gross sales of inventory, less					
		returns and allowances .					
			a .				
		Less cost of goods sold Net income or (loss) from sales of	b Inventory b				
	С	Miscellaneous Revenue	Business Code				
ŀ	11a	MISCENDIEOUS NEVEIIUE	Duamess Code				
	ь						
	c			+			
	d	All other revenue					
	u e	Total. Add lines 11a-11d					
			-	0			
	12	Total revenue. See Instructions	🕨	71,423,000	0	-159,000	13,016,000

Form 990 (2012) Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Management and Program service Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 0 0 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 56,040,000 56,040,000 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 2,934,000 0 360,000 2,574,000 key employees . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 4,087,000 Other salaries and wages 45,000 1,275,000 2,767,000 Pension plan accruals and contributions (include section 401(k) 644,000 19,000 141,000 484,000 and 403(b) employer contributions) 865,000 6,000 174,000 Other employee benefits 685,000 3,000 10 438,000 109,000 326,000 11 Fees for services (non-employees) 168,000 ٥ Ω Management 168,000 121,000 0 121,000 Legal 0 119,000 0 119,000 0 0 0 11,000 11,000 Lobbying 93,000 Professional fundraising services See Part IV, line 17 93,000 Investment management fees 1,684,000 0 1,684,000 0 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 1,214,000 Schedule O) 1.214.000 0 Advertising and promotion . . 592,000 0 ٥ 12 592,000 13 Office expenses 688,000 2,000 234,000 452,000 14 Information technology . . . 15 Royalties . . 1,158,000 0 305,000 853,000 16 Occupancy **17** 236,000 3,000 12,000 221,000 Travel 18 Payments of travel or entertainment expenses for any federal, 0 state, or local public officials 0 0 0 172,000 19 Conferences, conventions, and meetings . . . 0 172,000 20 16,000 0 16,000 Payments to affiliates 21 335,000 22 Depreciation, depletion, and amortization . 454,000 6,000 113,000 23 90,000 90,000 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) SCIENCE PROGRAMS 0 121,000 0 121,000 b C d 71,000 All other expenses 2,000 е 14,000 55,000 Total functional expenses. Add lines 1 through 24e 25 72,016,000 56,126,000 4,641,000 11,249,000 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

A Beginning of year Rind of y	Par	tΧ	Check if Schedule O contains a response to any question in the	nıs Par	t X			
2 Savings and temporary cash investments						(A)		(B)
3 Pledges and grants receivable, net 106,861,000 3 103,516.0		1	Cash—non-interest-bearing			268,000	1	0
4 Accounts receivable, net 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		2	Savings and temporary cash investments			8,496,000	2	8,777,000
4 Accounts receivable, net 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		3	Pledges and grants receivable, net			106,961,000	3	103,516,000
Solution Complete Complete		4					4	
Section 4958 (7)(3), persons described in section 4958 (7)(3)(B), and contributing employees beneficiary organizations (see instructions) Complete Part II of Schedule L		5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete F	dırect Part II	ors, trustees, key of		5	
Prepared expenses and deferred charges 9 9	its	6	section $4958(f)(1)$), persons described in section $4958(c)(3)$ employers and sponsoring organizations of section $501(c)(9)$	nd contributing tary employees'		-		
Prepared expenses and deferred charges 9 9	χ. Θ	7	Notes and loans receivable net					
9 Prepaid expenses and deferred charges 10a 2nd, buildings, and equipment cost or other basis 10a 10,970,000 10b 3,002,000 8,301,000 10c 7,988,600 11 11 Investments—publicly traded securities 16,237,000 11 16,859,600 12 489,696,600 13 11 11 11 11 11 12 13 13	4							
10a Land, buildings, and equipment cost or other basis 10a 10,970,000 8,301,000 10c 7,968.8 11 Investments—publicly traded securities 16,237,000 11 16,859.6 12 Investments—other securities See Part IV, line 11 449,047,000 12 489,656.6 13 Investments—program-related See Part IV, line 11 3 14 16,869.6 14 Intangible assets 14 15 Other assets 14 15 Other assets 14 15 Other assets 16,237,000 15 2,682.6 18 Grants payable and accrued expenses 3,523,000 17 5,017.6 18 Grants payable 18 Grants payable 18 Grants payable 18 Grants payable 18 19 Deferred revenue 19 19 20 Tax-exempt bond liabilities 18 Escrow or custodial account liability 15 Complete Part IV of Schedule 12 Complete Part IV of Schedule 14 Complete Part IV of Schedule 15 Complete Part IV of Schedule 16 Complete Part IV of Schedule 17 Complete Part IV of Schedule 18 Complete Part IV of Schedule 18 Complete Part IV of Schedule 19 Complete Part IV of Schedule 10 Complete Part IV		_						
11 Investments—publicity traded securities 16,237,000 11 16,899 12 Investments—publicity traded securities 16,237,000 11 16,899 13 Investments—publicity traded securities 16,237,000 12 489,656,000 14 Intengible assets 13 14 15,662 15 Other assetts 14 15 16,899 16 Total assetts 14 16,899 17 Accounts payable and accrued expenses 3,523,000 17 5,017,000 18 Grants payable 18 19 19 19 Deferred revenue 19 19 20 Tax-exempt bond liabilities 19 19 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule 12 22 23 Secured mortgages and notes payable to unrelated third parties 227,000 23 227,000 23 Secured mortgages and notes payable to unrelated third parties 24 19 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 12,589,000 25 12,737,000 26 26,811,000 27 18,201,000 28 157,465,000 29 463,363,000 20 20,		_	Land, buildings, and equipment cost or other basis					
11 Investments—publicity traded securities 16,237,000 11 16,859,00 12 489,656,00 13 Investments—other securities See Part IV, line 11 449,047,000 12 489,656,00 13 Investments—program-related See Part IV, line 11 13 14 15 Other assets See Part IV, line 11 2,646,000 15 2,662,00 16 629,438,00 16 629,438,00 17 5,017,00 18 670,438,00 17 5,017,00 18 670,438,00 19 7,017,00 19		Ь	·	10b	3,002,000	8,301,000	10c	7,968,000
12 Investments—other securities See Part IV, line 11 449,047,000 12 489,686,000 13 13 17 14 15 15 15 15 16 16 17 18 18 18 19 19 19 19 19			·				16,859,000	
13					449,047,000		489,656,000	
14					, ,		<u> </u>	
15								
16 Total assets. Add lines 1 through 15 (must equal line 34)						2.646.000		2,662,000
17						, ,		629,438,000
18 Grants payable 18 19 Deferred revenue 19 19 19 19 19 19 19 1						, ,		5,017,000
Pure 1991 Deferred revenue						-,,		
20 Tax-exempt bond liabilities								
21 Escrow or custodial account liability Complete Part IV of Schedule D						8 830 000		8,830,000
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	_					2,222,222		
Unsecured notes and loans payable to unrelated third parties	<u>, ao</u>		Loans and other payables to current and former officers, direc	tors, t				
Unsecured notes and loans payable to unrelated third parties	æ		persons Complete Part II of Schedule L				22	
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		23	Secured mortgages and notes payable to unrelated third parti	es .		227,000	23	227,000
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties				24	
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete P	art X c		40 500 000		10 707 000
Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets								
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	<u></u>	26	Organizations that follow SFAS 117 (ASC 958), check here ▶			25, 169,000	26	26,811,000
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	Ę		_ ,			60.004.5==		40.004.005
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	<u> </u>							-18,201,000
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	ă		·					
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	Ē	29	·			454,782,000	29	463,363,000
30 Capital stock or trust principal, or current funds				here ►	and			
33 Total net assets or fund balances		30	Capital stock or trust principal, or current funds				30	
33 Total net assets or fund balances	Ř	31	Paid-in or capital surplus, or land, building or equipment fund				31	
33 Total net assets or fund balances 566,787,000 33 602,627,0 34 Total liabilities and net assets/fund balances 591,956,000 34 629,438,0		32	Retained earnings, endowment, accumulated income, or other	funds			32	
- 34 Total liabilities and net assets/fund balances	₹	33	Total net assets or fund balances			566,787,000	33	602,627,000
		34	Total liabilities and net assets/fund balances			591,956,000	34	629,438,000

Par	t XI Reconcilliation 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		71,4	123,000
2	Total expenses (must equal Part IX, column (A), line 25)	2		72,0	16,000
3	Revenue less expenses Subtract line 2 from line 1	3		- 5	593,000
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		566,7	787,000
5	Net unrealized gains (losses) on investments	5		36,4	133,000
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		602,6	527,000
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Software ID: 12000197 **Software Version:** v1.00

EIN: 13-1623886

AMERICAN COMMITTEE FOR THE WEIZMANN Name:

INSTITUTE OF SCIENCE INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (E) Name and Title Position (do not check Reportable Reportable Estimated amount Average of other hours more than one box. compensation compensation unless person is both from the from related compensation per an officer and a organization (Worganizations (Wfrom the week director/trustee) 2/1099-MISC) 2/1099-MISC) organization and (list related any Office Individual Highest compensated employee hours Institutional organizations director employee related organızatıons trustee below Trustee dotted line) 2 Richard Aarenau Board Member 0 Х 0 2 Χ 0 0 Board Member O 2 Х 0 0 0 Board Member 0 7 Pennie Abramson 0 0 Χ 0 President 0 2 Donald Altman 0 0 0 Х Board Member 0 2 Cindy Anderson 0 0 Х 0 Board Member 0 4 Steven Anixter 0 0 0 Χ Board Member 0 3 Sally Leafman Appelbaum 0 0 Χ 0 Board Member 2 Robert H Asher Х 0 0 0 2 Robert Belfer Χ 0 0 0 Board Member 0 2 Marshall Bennett Х 0 0 0 Board Member 0 5 Paul A Berkman Χ 0 0 0 Board Member 0 2 Howard B Bernick 0 0 0 Board Member 0 2 0 0 0 Х Board Member 0 7 Lawrence S Blumberg 0 Χ 0 0 Chairman 0 2 Penny Blumenstein 0 0 0 Χ Board Member 0 2 Х 0 0 0 Board Member 0 2 0 0 0 Х Board Member 0 Brent Cohen 0 0 0 Х Board Member 0 2 Judith Cohen 0 0 0 Х Board Member 0 2 Lester Crown 0 0 0 Х Board Member 0 2 Melvin Allen Dick 0 Х 0 0 Board Member 0 2 Karen Davidson Х 0 0 0 Board Member 0 4 Russell Dekker Χ 0 0 0 Board Member 0 2 Joyce Eisenberg Keefer Board Member

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the per from related compensation organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Q#10€ Highest compensated employee Individual trustaa or director Institutional hours organizations for employee related organızatıons below Trustee dotted line) 2 Marshall S Ezralow Χ 0 0 0 Board Member 0 4 Samuel Ekstein 0 0 0 Х Board Member 2 David Fairweather 0 0 0 Х Board Member 0 4 Jane Fairweather Χ 0 0 0 Board Member 0 2 Lori A Feinberg Kany 0 0 0 Χ Board Member 0 2 Daniel Feldman 0 0 0 Х Board Member 0 2 Janice Feinberg 0 0 0 Х Board Member 0 2 Robert Ferguson Х 0 0 0 Board Member 0 2 Alan A Fischer Χ 0 0 Board Member 0 2 Laura Flug 0 0 0 Х Board Member 0 2 Michael Forman Χ 0 0 0 Board Member 0 4 Sonya Friedman 0 0 Χ Board Member 0 2 Peter Friedman 0 0 0 Х Board Member 0 5 Paul Gardner 0 Χ 0 0 Vice Chair Financial Resource Development 0 4 Peter Gelbwaks Χ 0 0 0 Board Member 0 2 David Geller 0 0 0 Х Board Member 0 2 Bram Goldsmith 0 0 0 Х Board Member 0 3 Scott David Greenberg Χ 0 0 0 Vice Chair Finance and Administration 0 2 Meyer Grodetsky Χ 0 0 0 Board Member 0 2 Akıva Gross 0 0 0 Х Board Member 0 2 Patricia Gruber Х O 0 0 Board Member O 2 Paul Guerin Х 0 0 0 Board Member 0 2 0 0 0 Х Board Member 0 2 Phyllis Gurwin 0 0 Х 0 Board Member 0 2 David Haas 0 0 Board Member 0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the per from related compensation organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Q#10€ Highest compensated employee ndividual trustaa or director Institutional hours organizations for employee related organızatıons below Trustee dotted line) 2 Harold Haftel Χ 0 0 0 Board Member 0 2 Lında Hayman 0 0 0 Х Board Member 2 Daniel Hirsch 0 0 0 Х Board Member 0 2 Yossie Hollander Χ 0 0 0 Board Member 0 2 Arlyn Imberman 0 0 0 Χ Board Member 0 2 Nancy Jacobson 0 0 0 Х Board Member 0 2 Jon Kaufman 0 0 0 Х Board Member 0 2 Gershon Kekst Х 0 0 0 Board Member 0 2 Donald Kırk Χ 0 0 Board Member 0 2 Harvey Knell 0 0 0 Х Board Member 0 2 Bernard Koff Χ 0 0 0 Board Member 0 2 Richard Laster 0 0 Χ Board Member 0 2 Arnold Leibowitz 0 0 0 Х Board Member 0 2 Tova Leidesdorf 0 Χ 0 0 Board Member 0 2 Jay Levy Χ 0 0 0 Board Member 0 4 Richard Lipkin 0 0 0 Х Board Member 0 4 Robert B Machinist 0 0 0 Х Chairman Emeritus 0 2 Rhoda R Mancher Χ 0 0 0 Board Member 0 4 Larry Marks Χ 0 0 0 Board Member 0 4 Ellen Merlo 0 0 0 Х Vice Chair 0 2 Ira Millman Х 0 0 0 Board Member O 5 Ira Mondry Х 0 0 0 Vice Chair 0 4 Gladys Monroy 0 0 0 Х Board Member 0 2 David S Moross 0 0 0 Х Board Member 0 7 Andrew R Morse 0 0 Vice Chair finance and Administration 0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the per from related compensation organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Q#10€ Highest compensated employee Individual trustaa or director Institutional hours organizations for employee related organızatıons below Trustee dotted line) 4 Lon Morton Χ 0 0 0 Board Member 0 2 Ilene Nathan 0 0 0 Х Board Member 2 Jeff Nathan 0 0 0 Х Board Member 0 4 Charles Noparstak Χ 0 0 0 Board Member 0 2 Gil Omenn 0 0 0 Χ Board Member 0 2 Marc J Oppenheimer 0 0 0 Х Board Member 0 2 Rosalind Perlmutter 0 0 0 Х Board Member 0 2 Richard Perry Х 0 0 0 Board Member 0 2 Bruce Pollack Χ 0 0 Board Member 0 2 Deborah Ratner Salzberg 0 0 0 Х Board Member 0 2 Steven Romick Χ 0 0 0 Board Member 0 4 Beth N Rom-Rymer 0 0 Х Board Member 0 2 0 0 0 Х Board Member 0 2 Tom Rykoff 0 Χ 0 0 Board Member 0 2 Marla Schaefer Χ 0 0 0 Board Member 0 2 Sara Schupf 0 0 0 Х Board Member 0 2 Donald L Schwarz 0 0 0 Х Board Member 0 2 John Schwartz Χ 0 0 0 Board Member 0 2 Fela Shapell Χ 0 0 0 Board Member 0 2 David Shapell 0 0 0 Х Board Member 0 2 Merry Sherman Х O 0 0 Board Member O 2 Frederick Simmons Х 0 0 0 Board Member 0 2 Jonathan Sohnis 0 0 0 Х Board Member 0 2 Coco Soodek 0 0 Х 0 Board Member 0 2 Maury L Spanier 0 0 Board Member 0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the per from related compensation organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Q#10€ Highest compensated employee Individual trustaa or director Institutional hours organizations for employee related organızatıons below Trustee dotted line) 2 Gregg M Steinberg Χ 0 0 0 Board Member 0 2 Raymon Sterman 0 0 0 Х Board Member 2 Menachem Sternberg 0 0 0 Х Board Member 0 2 Rick Stone Χ 0 0 0 Board Member 0 2 Stephen L Stulman 0 0 0 Χ Board Member 0 2 0 0 0 Х Board Member 0 2 Daniel Sussman 0 0 0 Х Board Member 0 2 David Teplow Х 0 0 0 Board Member 0 6 Theodore Teplow Χ 0 0 Board Member 0 2 Antonio Villalon 0 0 0 Х Board Member 0 4 Saul Waring Χ 0 0 0 Board Member 0 2 Edna Weiss 0 0 Х Board Member 0 2 Edna Weissman 0 0 0 Х Board Member 0 2 William Weksel 0 Χ 0 0 Board Member 0 2 David C Wiener Χ 0 0 0 Board Member 0 5 Norman Weizenbaum 0 0 0 Х Board Member 0 2 Adam Wolfensohn 0 0 0 Х Board Member 0 2 Elaine Wolfensohn Χ 0 0 0 Board Member 0 2 Alejandro Zaffaroni Χ 0 0 0 Board Member 0 2 Stanley R Zımmerman 0 0 0 Х Board Member 0 2 Lois Zoller Х O 0 0 Board Member O 2 Roy J Zuckerberg Х 0 0 0 Board Member 0 2 Helen Diller 0 0 0 Х Board Member 0 2 Mark Hankın 0 0 0 Х Board Member 0 4 Lız Jaffe 0 0 Secretary 0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors **(C)** Position (do not check (B) (A) (D) (E) (F) Name and Title Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related compensation per organization (Wweek an officer and a organizations (Wfrom the 2/1099-MISC) 2/1099-MISC) organization and director/trustee) (lıst

	(list	director/trustee)				2/1099-MISC)	2/1099-MISC)	organization and related		
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
Matthew Landau Board Member	2 0	Х						0	0	0
Dr Bessie Lawrence Board Member	2	х						0	0	0
Beverly Mutchnik Board Member	2 0	Х						0	0	0
Irene Rosenblum Board Member	2 0	Х						0	0	0
David Stone Board Member	2 0	Х						0	0	0
Dennis Weiss Board Member	2	Х						0	0	0
Irving Weissman Board Member	2	Х						0	0	0
MARSHALL LEVIN EXECUTIVE VICE PRESIDENT	35 0			Х				723,411	0	155,971
MARK FELDMAN SENIOR VICE PRESIDENT	35 0			Х				274,852	0	49,373
BONNIE DIAMOND SENIOR VICE PRESIDENT	35 0			Х				202,590	0	44,651
HENRY PAVONY CHIEF FINANCIAL OFFICER THRU 9/30/12	35 0			Х				352,746	0	37,757
JANIS RABIN REGIONAL DIRECTOR	35 0				х			249,276	0	29,500
HERMAN NEIDITCH VICE PRESIDENT	35 0				х			239,390	0	28,602
STEVEN MEYERS VICE PRESIDENT	35 0				х			239,307	0	35,446
LEE BROWN REGIONAL DIRECTOR	35 0				х			230,822	0	41,814
JEFFREY SUSSMAN VICE PRESIDENT	35 0				х			226,282	0	27,643
RICHARD ENSLEIN REGIONAL DIRECTOR	35 0					х		193,515	0	24,452
ELAINE YANIV REGIONAL DIRECTOR	35 0					х		177,203	0	23,076
ELLEN HOFSTATTER VICE PRESIDENT	35 0					х		176,791	0	23,287
STACY SULMAN VICE PRESIDENT	35 0					х		171,057	0	37,111
DAPHNA RUBY REGIONAL DIRECTOR	35 0					х		165,202	0	22,411
HAROLD ADLER FORMER SENIOR VICE PRESIDENT	0						х	289,745	0	34,716
JAY LEIPZIG FORMER VICE PRESIDENT	0						×	49,000	0	0

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AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC.

As Filed Data -

DLN: 93493101003214

OMB No 1545-0047

Public Charity Status and Public Support

(Form 990 or 990EZ) Department of the Treasury

SCHEDULE A

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

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

Open to Public Inspection

Internal Revenue Service

2

Name of the organization

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

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

Employer identification number 13-1623886

			instructions))	Yes	No	Yes	No	Yes	No		
O.			instructions))				I	<u> </u>			
•	i) Name of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is organizat col (i) lis your gove docume	ion in ted in rning	(v) Did ye the orga in col (i) supp	nızatıon) of your	(vi) Is organize col (i) or in the	atıon ın rganızed	1	nount o etary port
h	Provid	e the followi	ng information about	the support	ed organiza	ition(s)					
	(iii) A	35% contro	lled entity of a perso	n described in (i) or (ii) above?							
	(ii) A	family memb	er of a person descr	bed in (i) ab	ove?					g(ii)	
	and (II	ı) below, the	governing body of th	e supported	organizati	on?	•	,	11	lg(i)	
9	followi	ng persons?							ıı)	Yes	No
	If the check	this box	received a written do						e III suppo	rtıng organı	zation,
•	other t	han foundat	ox, I certify that the ion managers and ot								
	the bo a	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons									
Ĺ	<u> </u>		ganized and operated ganized and operated	•		•	•	. , . ,		t the purpo:	ses of
0		-	ganization after June ganized and operated	•			•				
	-	-	oss investment inco				-		1 tax) from t	ousinesses	
	•		rities related to its ex	•	=		· ·				
•			at normally receives					•	-	-	SS
3	descri A com	bed in sectio munity trust	on 170(b)(1)(A)(vi). described in section	(Complete F 170(b)(1)(Part II) A)(vi) (Co	mplete Part	II)		_	·	
5 7			·local government or at normally receives	=					from the go	noral nublic	_
			(A)(iv). (Complete P				.: 470(1)	(4)(4)(
	_	•	erated for the benefi	_	e or univers	ity owned or	operated b	y a governme	ntal unit des	scribed in	
5			aratad tar tha hanafi								

Page 2

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning)

Se	ection A. Public Support			tests listed self	, μ	piete i dit III.)	
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")	49,827,000	37,318,000	46,816,000	51,886,000	58,565,000	244,412,000
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	C	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	C	0	0	0	0	0
4	Total. Add lines 1 through 3	49,827,000	37,318,000	46,816,000	51,886,000	58,565,000	244,412,000
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0
6	Public support. Subtract line 5						244,412,000
	from line 4						
	ection B. Total Support endar year (or fiscal year			Т	Г		
Cale	beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	49,827,000	37,318,000	46,816,000	51,886,000	58,565,000	244,412,000
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,287,000	7,060,000	6,828,000	6,449,000	7,052,000	33,676,000
9	Net income from unrelated business activities, whether or not the business is regularly carried on	-293,000	-1,069,000	-198,000	-82,000	-159,000	-1,801,000
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	969,000	1,092,000	465,000	70,000	494,000	3,090,000
11	Total support (Add lines 7 through 10)						279,377,000
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12	
13	First five years. If the Form 990 is this box and stop here						ization, check
Se	ection C. Computation of Pu	blic Support F	ercentage				
14	Public support percentage for 201	2 (line 6, column	(f) dıvıded by lıne	11, column (f))		14	87 485 %
15	Public support percentage for 201	1 Schedule A, Pa	rt II, lıne 14			15	87 78 %
16a	33 1/3% support test—2012. If the				ine 14 is 33 1/3%	or more, check th	
	and stop here. The organization quality 33 1/3% support test—2011. If the box and stop here. The organization 10%-facts-and-circumstances test	organization did on qualifies as a pi :— 2012. If the org	not check a box oublicly supported anization did not	n line 13 or 16a, organization check a box on lir	ne 13, 16a, or 16	b, and line 14	▶□
b	is 10% or more, and if the organization Part IV how the organization reganization 10%-facts-and-circumstances test	ets the "facts-and :— 2011. If the org	d-cırcumstances' anızatıon dıd not	test The organi: check a box on lir	zation qualifies as ne 13, 16a, 16b, o	s a publicly suppo or 17a, and line	
18	15 is 10% or more, and if the orga Explain in Part IV how the organiz- supported organization Private foundation. If the organiza	ation meets the "f	acts-and-circums	stances" test Th	e organization qua	alifies as a public	▶ □
	instructions			•			▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012 Pag	je 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10 Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
Facts And Circumstances Test	
Explanation	
OTHER INCOME- IS INCOME DERIVED FROM SPECIAL FUNDRAISING EVENTS	

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493101003214

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

	ME OF THE OFGANIZATION FRICAN COMMITTEE FOR THE WEIZMAN	NN INSTITUTE OF SCIENCE INC		[[ipioyer iden	cirication number
		A Complete if the organization is exempt under section rovide a description of the organization's direct and indirect political campal political expenditures columber hours B Complete if the organization is exempt under section there the amount of any excise tax incurred by the organization under section there the amount of any excise tax incurred by organization managers under the organization incurred a section 4955 tax, did it file Form 4720 for this as a correction made? "Yes," describe in Part IV C Complete if the organization is exempt under section therefore the amount directly expended by the filing organization for section 527 therefore the amount of the filing organization's funds contributed to other organization exempt function activities Otal exempt function expenditures Add lines 1 and 2 Enter here and on Form the filing organization file Form 1120-POL for this year? Therefore the names, addresses and employer identification number (EIN) of all seganization made payments For each organization listed, enter the amount product of political contributions received that were promptly and directly deleganate segregated fund or a political action committee (PAC). If additional		13	-1623886	
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c) or is a se	ction 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign act	ıvıtıes ın Part I	V	
2	Political expenditures				.	\$
3	Volunteer hours					
Do.	Commisso if the or			-)/2)		
					<u> </u>	
1						\$
2	•			14955	•	\$
3		section 4955 tax, did it file Form 4/2	o for this year?			, ,
4a						│ Yes │ No
b Date	•	ganization is exempt under	section 501/	c) except s	ection 50	1(c)(3)
	•					±(c)(s).
1 2						>
2	exempt function activities	organization's lunds contributed to other	iei organizations	s for section 52	<i>′</i> ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17	b ►	¢
4	Did the filing organization file F	Form 1120-POL for this year?				↑ Yes
5	organization made payments f amount of political contribution	For each organization listed, enter the ns received that were promptly and di	e amount paid fro rectly delivered	m the filing org to a separate p	anızatıon's f olıtıcal orga	unds Also enter the nızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount filing organ funds If non-	nization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-
				1		

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶ □	if the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address,	EIN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	11,000	
c	Total lobbying expenditures (add lines 1a and 1b	p)	11,000	
d	O ther exempt purpose expenditures		72,005,000	
e	Total exempt purpose expenditures (add lines 1	72,016,000		
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
q	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
_	Subtract line 1g from line 1a If zero or less, enti		0	
	Subtract line 1f from line 1c If zero or less, ente		0	
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 472	0 reporting	□ Ves □ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) Total beginning in) Lobbying nontaxable amount 1,000,000 1,000,000 1,000,000 1,000,000 4,000,000 Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) 7,000 12,000 7,000 11,000 Total lobbying expenditures 37,000 250,000 Grassroots nontaxable amount 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge S
	Week Week was a second of the	(6	a)		(b)	
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	1	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c)(5), (or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

DLN: 93493101003214

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Na	ne of the organization RICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE IN		Employer identification number
MITE	VICTOR CONTINUED FOR THE MATTERIAMIN THROUGH OL SCIENCE IN		13-1623886
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.	
_		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		L
5	Did the organization inform all donors and donor advise funds are the organization's property, subject to the or		r advised Yes No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?		
Pai	t II Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education) Preservation of an	historically important land area ertified historic structure
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in th	ne form of a conservation
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified history	oric structure included in (a)	2c
d	Number of conservation easements included in (c) accomistoric structure listed in the National Register	quired after 8/17/06, and not on a	2d
3	Number of conservation easements modified, transfer	red, released, extinguished, or terminated	d by the organization during
	the tax year 🛌		
4	Number of states where property subject to conservat	ion easement is located 🕨	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		— ling of violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easem	ents during the year
7	A mount of expenses incurred in monitoring, inspecting \$ \blue{F} \\$	g, and enforcing conservation easements	during the year
3	Does each conservation easement reported on line 2 (and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sect	(ion 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financial:	
ar	TIII Organizations Maintaining Collection Complete if the organization answered "Y		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote to	ets held for public exhibition, education, o	r research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ets held for public exhibition, education, o	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ -\$
	(ii) Assets included in Form 990, Part X		▶ \$115,000
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		► \$
ь			. ↓ ▶ \$ 0
_	Assets included in Form 990, Part X		- →

	Organizations Maintaining Co	niections of Art	ւ, nis	LOFIC	<u> </u>	easure	:S, UI U	tnei	Similar	<u>Asse</u>	ts (cc	<u>ntinuea)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, ch	neck a	ny of th	ne follow	ng that a	re a	sıgnıfıcant	use of	ıts	
а	Public exhibition		d	Γ	Loan o	rexcha	nge progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's c Part XIII	ollections and expla	ain hov	v they	further	the org	anızatıon	's ex	empt purpo	se in		
5	During the year, did the organization solicit								ılar	_		_
	assets to be sold to raise funds rather than								" - -		Yes	✓ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answere	u "Y	es" to For	m 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						other ass	ets r	iot	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	ving ta	ble		_					
							_			Amou	nt	
С	Beginning balance							1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21?							Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II Check here if the	expla	natior	has b	een prov	vided in P	art X	III			Г
Pa	rt V Endowment Funds. Complete											
		(a)Current year	(b)	Prior ye					hree years ba			ears back
1a	Beginning of year balance	538,770,000		537,11			79,241,000		444,174,			1,058,000
Ь	Contributions	11,317,000		21,24	6,000		17,938,000		13,526,	500	1	3,404,000
С	Net investment earnings, gains, and losses	45,077,000		3,61	4,000	ı	64,945,000		45,651,	000	-9	5,035,000
d	Grants or scholarships	0			0		0			0		0
e	Other expenditures for facilities and programs	22,952,000		23,20	1,000		25,013,000		24,110,	000	2	5,253,000
f	Administrative expenses	0			0		0			0		0
g	End of year balance	572,212,000		538,77	0,000	5.	37,111,000		479,241,	000	44	4,174,000
2	Provide the estimated percentage of the cur	rent year end balan	ce (lın	e 1g,	column	ı (a)) he	ld as					
а	Board designated or quasi-endowment 🕨	5 %										
b	Permanent endowment 🕨 81 %											
С		4 %										
-	Temporarily restricted endowment $ ightharpoonup 1$	4 %										
-	Temporarily restricted endowment ► 1 The percentages in lines 2a, 2b, and 2c sho											
3a	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse	uld equal 100%	ation :	that a	e held	and adr	ministered	d for	the			
	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by	uld equal 100% ssion of the organiz	ation '	that aı	e held	and adr	mınıstered	d for	the Γ	2-(:)	Yes	No
	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	uld equal 100% ssion of the organiz			e held	and adr	mınıstered	d for	[3a(i)	Yes	No
3 a	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	uld equal 100% ssion of the organiz						l for	[3a(ii)	Yes	
3 a	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	uld equal 100% ssion of the organiz	 d on S	 chedu	 le R?			l for	[Yes	No
3a b 4	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations If "Yes" to 3a(II), are the related organization	uld equal 100% ssion of the organiz ins listed as require the organization's er	· · · · · · · · · · · · · · · · · · ·	chedu ent fui	 le R?	 		d for	[3a(ii)	Yes	No
3a b 4	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the	uld equal 100% ssion of the organiz ins listed as require the organization's er	· · · · · · · · · · · · · · · · · · ·	ent fui	 le R?	0.		ther	[3a(ii) 3b		No
3a b 4 Par	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIII the intended uses of t	uld equal 100% ssion of the organiz ins listed as require the organization's er	· · · · · · · · · · · · · · · · · · ·	ent fui	ile R? Ids Ine 10	0.		ther	(c) Accumu	3a(ii) 3b		No No
3a b 4 Par	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIII the intended uses of the state of the property Description of property	uld equal 100% ssion of the organiz ins listed as require the organization's er	· · · · · · · · · · · · · · · · · · ·	ent fui	ile R? Ids Ine 10	O. Other (I		ther	(c) Accumu	3a(ii) 3b	(d) Bo	No No ok value
3a b 4 Par 1a	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations	uld equal 100% ssion of the organiz ins listed as require the organization's er	· · · · · · · · · · · · · · · · · · ·	ent fui	ile R? Ids Ine 10	O. other ment)	b) Cost or o	ther	(c) Accumu	3a(ii) 3b lated on	(d) Bo	No No ok value
3a b 4 Par 1a b c	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIII the intended uses of the state of the s	uld equal 100% ssion of the organiz ins listed as require the organization's er	· · · · · · · · · · · · · · · · · · ·	ent fui	ile R? Ids Ine 10	O. Other nent) 0 0	b) Cost or o	ther er) 0,000	(c) Accumu depreciation	3a(ii) 3b lated on	(d) Bo	No No ok value 0 7,215,000
3a b 4 Par 1a b c d	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIII the intended uses of the strict of property Land, Buildings, and Equipment Description of property Land	uld equal 100% ssion of the organiz ins listed as require the organization's er	· · · · · · · · · · · · · · · · · · ·	ent fui	ile R? Ids Ine 10	0. other nent) (1	b) Cost or o basis (other	ther er) 0,000	(c) Accumu depreciation	3a(ii) 3b lated on	(d) Bo	No No No ok value 0 7,215,000

(a) Description of security or category		
	(b) Book value	(c) Method of valuation
(Including name of security)		Cost or end-of-year market value
(1) Financial derivatives	0	F F
(2)Closely-held equity interests (3)Other	0	Г
(A) WEIZMANN GLOBAL ENDOWMENT FUND	489,269,000	F
(B) OTHER	387,000	F
	.+	
	489,656,000	
Part VIII Investments—Program Related. Se		(a) Mathad of valuation
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		,
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. See Form 990, Part X, I		<u>, </u>
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1	(5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25.	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes	X, line 25. (b) Book value	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25.	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes DUE TO AFFILIATE	X, line 25. (b) Book value 2,670,000 10,067,000	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	106,172,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	36,433,000
3	Subtract line 2e from line 1	3	69,739,000
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	1,684,000
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	71,423,000
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	70,332,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	l .	
а			
	Donated services and use of facilities		
b	Donated services and use of facilities		
b c			
_	Prior year adjustments		
c	Prior year adjustments 2b 0 Other losses 2c 0	2e	0
c d	Prior year adjustments 2b 0 Other losses	2e	70,332,000
c d e	Prior year adjustments 2b 0 Other losses 2c 0 Other (Describe in Part XIII) 2d 0 Add lines 2a through 2d		
c d e	Prior year adjustments 2b 0 Other losses 2c 0 Other (Describe in Part XIII) 2d 0 Add lines 2a through 2d Subtract line 2e from line 1		<u> </u>
c d e 3	Prior year adjustments		
c d e 3 4	Prior year adjustments		

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
SchD_P03_S00_L04	Schedule D, Part III, Line 4	ON DISPLAY FOR PUBLIC VIEWING AT THE WOLFSON HOUSE AT THE WEIZMANN INSTITUTE LOCATED IN REHOVOT, ISRAEL
SchD_P05_S00_L01a	Schedule D, Part V, Line 1a	BOARD DESIGNATED AND TEMPORARY RESTRICTED FUND BALANCES WERE UPDATED FOR PRIOR YEARS
SchD_P05_S00_L04	Schedule D, Part V, Line 4	THE FUNDS ARE ENDOWED ACCORDING TO DONORS' DESIGNATION OF THE FUNDS AND THE ALLOWABLE SPENDING RATE IS TRANSMITTED TO THE WEIZMANN INSTITUTE WITH INSTRUCTIONS FOR ITS DESIGNATED PURPOSE
SchD_P10_S00_L02	Schedule D, Part X, Line 2	US GAAP REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED ON A MORE LIKELY THAN NOT THRESHOLD THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN THE ORGANIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE ANY UNCERTAIN POSITIONS FOR THE OPEN YEARS THE EARLIEST TAX PERIOD FOR WHICH STATUE OF LIMITATIONS ARE OPEN IS JUNE 20, 2010
SchD_P11_S00_L04b	Schedule D, Part XI, Line 4b	THE INVESTMENT EXPENSES ARE NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS, AMOUNTS ARE GROSSED UP ON THE FORM 990
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	THE INVESTMENT EXPENSES ARE NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS, AMOUNTS ARE GROSSED UP ON THE FORM 990

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493101003214

OMB No 1545-0047

No

2012

Open to Public Inspection

SCHEDULE F Stat

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.

Department of the Treasury Internal Revenue Service

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

Employer identification number

Part I	General Information on Activities Outside the United States.	Complete	ıf the organization answered
	"Yes" to Form 990 Part IV line 14b	-	_

- **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	Middle East and North Africa	0		Grantmaking	TRANSMITTAL	56,040,000
_						
	Sub-total					
Ь	Total from continuation sheets to Part I					
c	Totals (add lines 3a and 3b)	0	0			56,040,000

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Middle East and North Africa	BASIC SCIENTIFIC RESEARCH	56,040,000	WIRE TRANSFER	C	N/A	
2			ent organizations list or which the grantee						2

Schedule F (Form 990) 2012

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			1	'			
		†	 I				
		+ +	 I	<u> </u>	†		†
		+ +		-	+		
		+	<u> </u>	-	+	 	+
	<u> </u>			'	<u> </u>	 	
	<u> </u>				<u> </u>	<u> </u>	
						<u> </u>	
				<u> </u>			
			 I	'			
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	 						+
	<u> </u>					 	
							
			<u> </u>				
			 I	,			
			1				

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	~	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	্ব	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	ত	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	্	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Γ	Yes	V	Νo

Schedule F (Form 990) 2012

Part V Supplemental Information

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

Identifier	ReturnReference	Explanation
SchF_P01_S00_L02		GRANTS ARE TRANSMITTED TO THE WEIZMANN INSTITUTE OF SCIENCE AND THE FEINBERG GRADUATE SCHOOL LOCATED IN REHOVOT, ISRAEL ON MONTHLY BASIS WITH SPECIFICATIONS RELATING TO THE DESIGNATION FOR THE USE OF FUNDS THE INSTITUTE CONFIRMS THAT THE MONIES ARE USED FOR THE INTENDED PURPOSE

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DLN: 93493101003214

Employer identification number

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

AMERICAN COMMITTEE FOR	THE WEIZMANN INS	TITUTE	OFSCIE	NCE INC		
					13-1623886	
Part I Fundraising Act	ivities. Complete	ıf the oı	rganızatı	ion answered "Yes" t	o Form 990, Part IV	, line 17.
a	citations a written or oral agree Form 990, Part VII) o t paid individuals or e	ment with or entity ntities (f	e f g n any Indi In connec	Solicitation of non Solicitation of gov Special fundraising vidual (including officer	-government grants ernment grants g events s, directors, trustees undraising services?	▽ Yes □ N ndraiser is
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais cust cont	Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
SANKY COMMUNICATIONS INC 589 8TH AVE	PROFESSIONAL FUNDRAISING CONSULTING AND SUPPORT		No	0	93,000	-93,000
NEW YORK, NY 10018						
Total	·		>	0	93,000	-93,000
3 List all states in which the licensing	organization is registe	ered or li	censed to	solicit funds or has be	en notified it is exempt	from registration or
All States						

		G (Form 990 or 990-EZ) 2012				Page 2				
Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contributi							
			(a) Event #1 CHICAGO ANNUAL GALA (event type)	(b) Event #2 NEW YORK GALA (event type)	(c) Other events 4 (total number)	(d) Total events (add col (a) through col (c))				
₽	1	Gross receipts	357,000	567,000	317,000	1,241,000				
Revenue	2	Less Contributions	283,000	464,000	0	747,000				
<u>~</u>	3	Gross income (line 1 minus line 2)	74,000	103,000	317,000	494,000				
	4	Cash prizes	0	0	0	o				
ဟ	5	Noncash prizes	0	0	0	o				
Expenses	6	Rent/facility costs	0	0	0	o				
ă	7	Food and beverages .	95,000	117,000	51,000	263,000				
Direct	8	Entertainment	0	0	0	0				
ā	9	Other direct expenses .	118,000	179,000	128,000	425,000				
	10	Direct expense summary Add line	es 4 through 9 ın column	(d)		(688,000)				
	11	Net income summary Combine li	ne 3, column (d), and line	10	•	-194,000				
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir	ganızatıon answered ' ne 6a	"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than				
venue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
Revenue	1	Gross revenue								
ses	2	Cash prizes								
çeu	3	Non-cash prizes								
Direct Expenses	4	Rent/facility costs								
즈	5	Other direct expenses								
	6	Volunteer labor	Г Yes	Г Yes	☐ Yes ☐ No					
		Direct expense summary Add lines								
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	mn (d)	<u> </u>					
9 a b	Ist	ter the state(s) in which the organiza the organization licensed to operate 'No," explain	gaming activities in each	n of these states?						
		re any of the organization's gaming l 'Yes," explain				· · 「Yes 「No				

oes	the organization operate gaming	g activities with nonmembers?	· · · · · · · · · · · · · · · · · · Yes No
.2	Is the organization a grantor, b	eneficiary or trustee of a trust o	r a member of a partnership or other entity
	formed to administer charitable	gaming?	
3	Indicate the percentage of gam	iing activity operated in	
а	The organization's facility .		13a
b	An outside facility		
4	Enter the name and address of	the person who prepares the org	ganization's gaming/special events books and records
	Name 🟲		
	Address ►		
		· · · · · · · · · · · · · · · · · · ·	
	Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization ▶ \$		
L 6			
	Name •		
	Description of services provide	ed 🏲	
	☐ Director/officer		<u>_</u>
.7	· ·	· - · · ·	
	•	der state law to make charitable	e distributions from the gaming proceeds to
	retain the state gaming license	۶	· · · · · · · · · · · · · · · · · · ·
	5 5		
	in the organization's own exemp	pt activities during the tax year	> \$
Part	columns (III) and (v),	and Part III, lines 9, 9b, 10	Ob, 15b, 15c, 16, and 17b, as applicable. Also complete this
	Identifier	Return Reference	Explanation
SchG			SANKY COMMUNICATIONS, INC IS A PROFESSIONAL FUNDRAISING CONSULTANT FOR THE ORGANIZATION AND THERE IS NO DIRECT REVENUE ASSOCIATED WITH

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AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC

DLN: 93493101003214

OMB No 1545-0047

Schedule J (Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Compensation Information

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

Employer identification number

13-1623886

Ċ	Questions Regarding Compensation				
				Yes	No
1a	Check the appropiate box(es) if the organization provided any of the 990, Part VII, Section A, line 1a Complete Part III to provide any i				
	First-class or charter travel Housing	g allowance or residence for personal use			
	☐ Travel for companions ☐ Paymer	nts for business use of personal residence			
	Tax idemnification and gross-up payments Health	or social club dues or initiation fees			
	Discretionary spending account Persona	al services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow reimbursement or provision of all of the expenses described above?		1b		
2	Did the organization require substantiation prior to reimbursing or al directors, trustees, and the CEO/Executive Director, regarding the i		2		
3	Indicate which, if any, of the following the filing organization used to organization's CEO/Executive Director Check all that apply Do not used by a related organization to establish compensation of the CEO	check any boxes for methods			
	▼ Compensation committee	employment contract			
		nsation survey or study			
	Form 990 of other organizations Approv	al by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section or a related organization	n A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified	retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-based compensat	ion arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applica	able amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete line	s 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the compensation contingent on the revenues of	organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the compensation contingent on the net earnings of				
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the payments not described in lines 5 and 6? If "Yes," describe in Part 1		7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured p				
	subject to the initial contract exception described in Regulations sein Part III	ction 53 4958-4(a)(3)? If "Yes," describe			
_			8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable pressection 53 4958-6(c)?	umption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
SchJ_P01_S00_L04	· · · · · ·	THE FOLLOWING INDIVIDUALS RECEIVED A PAYMENT FROM NON QUALIFIED SUPPLEMENTAL PENSION PLAN MARSHALL LEVIN - 251,312 HENRY PAVONY - 21,961 HAROLD ADLER - 13,497 JAY LEIPZIG-49,000

Schedule J (Form 990) 2012

Software ID: 12000197 **Software Version:** v1.00

EIN: 13-1623886

Name: AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
(A) Name		(B) Breakdown of	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form		
f		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ		
MARSHALL LEVIN	(I) (II)		, o	266,091	125,359 0	30,612 0	879,382 0	0		
HENRY PAVONY	(I) (II)		0	30,421	36,625 0	1,132 0	390,503	0		
HAROLD ADLER	(I) (II)		0	19,287	23,240	11,476 0	324,461	0		
MARK FELDMAN	(I) (II)		0 0	4,518	25,425 0	23,948 0	324,225	0		
BONNIE DIAMOND	(I) (II)		0	833	18,900 0	25,751 0	247,240	0		
JANIS RABIN	(I) (II)		0	8,352	21,834 0	7,651 0	278,761	0		
HERMAN NEIDITCH	(I) (II)		0	5,212	21,515 0	7,087 0	267,992	0		
STEVEN MEYERS	(I) (II)		0	8,382	21,924 0	13,522	274,753	0		
LEE BRO WN	(I) (II)		0 0	1,485	21,578 0	20,236 0	272,636	0		
JEFFREY SUSSMAN	(I) (II)		0	1,416	20,556 0	7,087 0	253,925	0		
RICHARD ENSLEIN	(I) (II)		0	6,477 0	17,365 0	7,087 0	217,967	0		
ELAINE YANIV	(I) (II)		0	3,073	15,989 0	7,087 0	200,279	0		
ELLEN HOFSTATTER	(I) (II)		0	3,122	16,200 0	7,087 0	200,078	0		
STACY SULMAN	(I) (II)		0	480	16,875 0	20,236 0	208,168	0 0		
DAPHNA RUBY	(I) (II)		0	5,334	14,760 0	7,651 0	187,613	0		
JAY LEIPZIG	(I) (II)		0	49,000	0	0	49,000	0		

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DLN: 93493101003214

2012

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OMB No 1545-0047

Schedule K **Supplemental Information on Tax Exempt Bonds** (Form 990)

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization

Inspection Employer identification number

AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC 13-1623886 **Bond Issues** Part I (h) On (i) Pool (g) Defeased behalf of financing (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose ıssuer Yes No Yes No Yes No NY CITY INDUSTRIAL **DEVELOPMENT AGENCY** FINANCING THE COST OF 8,830,000 ACQUISITION OF CIVIC FACILITY REVENUE 13-2906040 64971CX41 04-02-2004 Х Χ Χ **BOND SERIES A** CONDOMINIUM ANDB Part II **Proceeds** Α В С D Amount of bonds retired Amount of bonds legally defeased Total proceeds of issue 3 8,830,000 Gross proceeds in reserve funds 4 Capitalized interest from proceeds 5 Proceeds in refunding escrows 6 Issuance costs from proceeds 7 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 Capital expenditures from proceeds 10 8,653,400 Other spent proceeds 11 Other unspent proceeds 12 176,600 Year of substantial completion 2005

13	.5 Tear of Substantial completion		0.5						
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		Х						
15	Were the bonds issued as part of an advance refunding issue?		Х						
16	Has the final allocation of proceeds been made?	Х							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	Х							
Par	Private Business Use								

			A	В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						
For P	For Panerwork Reduction Act Notice, see the Instructions for Form 990.		`at No 5019	93F			Sch	edule K (For	m 990) 2012

Sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)		,							
				A	В			C		D
2-	Are there any management or service contracts that may result in private	hueinaee uea	Yes	No	Yes	No	Yes	No	Yes	No
3a	of bond-financed property?	business use	Х							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fine property?			Х						
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use bother than a section 501(c)(3) organization or a state or local government			0%	•	%		9/	, o	9/6
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501 (c)(3) organization, or a state or local government			0%		%		0/	o o	%
6	Total of lines 4 and 5			0%		%		9/	o l	%
7	Does the bond issue meet the private security or payment test?			X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a $501(c)(3)$ organization since the bonds were issued?			х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%	•	%		9/	′o	%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?			х						
Б-	-									
26	t IV Arbitrage	Α			В		С		D	
		Yes	No	Yes	No	Yes		No	Yes	No
1	Has the Issuer filed Form 8038-T?		Х							
2	If "No" to line 1, did the following apply?			· ·		I	I	I		
<u>а</u>	Rebate not due yet?		Х				I			
<u>ь</u>	Exception to rebate?	×								
С	No rebate due?		Х							
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed					.				
3	Is the bond issue a variable rate issue?		Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
ь	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
е	Was a hedge terminated?									

SchK_P05_S00_L00

Schedule K, Part V

Pa	rt IV Arbitrage (Cont	inued)								
		•	А		В		С		D	
			Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds inve	ested in a guaranteed investment		х						
b	Name of provider									
С	Term of GIC									
d	Was the regulatory safe h value of the GIC satisfied	arbor for establishing the fair market ?								
6	Were any gross proceeds period?		х							
7	Has the organization esta the requirements of section		х							
Pa	rt V Procedures To	Undertake Corrective Action	·							<u></u>
			Α		В	l .	С		D	
			Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?			Х						
		17.6		1 6 .				1 1 1/ /	 	
P	art VI Supplementa	Il Information. Complete this part t	<u>o provide additior</u>	ial informati	on for respoi	nses to ques	tions on Sch	edule K (see	e instructions).
	Ident if ier	Return Reference				Explar	nation			
Sch	K_P04_S00_L02b	Schedule K, Part IV, Line 2b	THE FUNDS WERE NOT REINVESTED IN A HIGHER YIELDING INVESTMENT							

THE ORGANIZATION IS IN THE PROCESS OF DEVELOPING WRITTEN PROCEDURES

Schedule K (Form 990) 2012

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DLN: 93493101003214

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

2012

Open to Public Inspection

Name of the orga AMERICAN COMMITT	nization EE FOR THE WEIZMAN	N INSTITUTE OF		Em	ploye	r identif	fication	number	•			
	- D			04/-1/21 -		04/-1/41		-162				
	s Benefit Tran te ıf the organizatı										l O b	
	of disqualified pers			between dis		(c) Descrip					d) Corre	cted?
1 (4) (44)	or alb qualified pero			l organizatio		(3) 2 2 2 2 1 1 1			, 400, 611		res	No
2 Enter the am	ount of tax incurre	d by organiza	ition mana	aers or disa	ualified perso	ns during the	vearu	ınders	section			
4958									- \$ -			
3 Enter the am	ount of tax, if any,	on line 2, abo	ove, reimbi	ursed by the	organization				► \$			
									•			
	ns to and/or F plete if the organiz				E7 Dawt // L	na 30n ar Fa	~~ OO	0 Da	+ T\/ l.m.	. 26 .	r.f.th.a	
	nization reported a					11e 36a, 01 F0	יפפ וווו	o, Pai	L I V , IIII	e 26, 0	ı ii tile	
(a) Name of	(b) Relationship				(e)Original	(f)Balance	(g)) I n	(h)	(i)Wrı	tten
interested	with organization		or from t	he	principal	due	defa	ult?	Appro	ved	agreen	
person			organızatı	on?	amount				by boa			
			То	From	1		Yes	No	commi Yes	No	Yes	No
			10	FIOIII			165	NO	165	140	res	INO
					1					<u> </u>	_	
										1	_	
					1					1	_	
					1						_	
					1						_	
 Γotal			▶ \$		1			ı	1	1	ר	
	ts or Assistan	ce Benefit		erested P	ersons.				1			
	plete if the organ					IV, line 27.						
(a) Name of inte		atıonshıp bet			assistance	(d) Type of		tance	(e)	Purpos	e of assi	stance
person		ted person ar	nd the									
		organization										
			L									

Part IV Business Transactions I Complete if the organizatio			e 28a, 28b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?		
				Yes	No	
(1) GERALD AND LAWRENCE BLUMBERG LLP	LAWRENCE BLUMBERG IS PAST CHAIR OF THE ORGANIZATION	74,230	LEGAL SERVICES PROVIDED		No	

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation					
SchL_P04_S00_L00	Schedule L, Part IV	LEGAL SERVICES PROVIDED TO THE ORGANIZATION AT A DISCOUNTED RATE					

Schedule L (Form 990 or 990-EZ) 2012

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DLN: 93493101003214

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Noncash Contributions

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

Employer identification number

					13-1623886			
Pa	rt I Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	((Method of c noncash contri		_	ts
	Aut Maula afaut			1 g				
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	37	1.235.751	cost at market			
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
.2	Securities—Miscellaneous							
L3	Q ualified conservation contribution—Historic							
	structures							
	Qualified conservation contribution—Other							
	Real estate—Residential							
	Real estate—Commercial							
	Real estate—O ther							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ► ()							
	Other ► ()							
	Other ► () Other ► ()							
	Number of Forms 8283 received	by the orga	I enization during the tay yea	r for contributions				
	for which the organization comple				29			
				_	1		Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	rs from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
Ь	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	ft acceptan	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	e third part	ies or related organizations	to solicit, process, or sell i	noncash			
	contributions?					32a	Yes	
Ь	If "Yes," describe in Part II							
33	If the organization did not report	t an amount	: in column (c) for a type of	property for which column (a) is checked,			
	describe in Part II		, , , , , , , , , , , , , , , , , , , ,		•			

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
SchM_P01_S00_L32b		THE ORGANIZATION USES THIRD PARTY BROKERAGE FIRM UBS TO PROCESS AND SELL PUBLICLY TRADED SECURITIES DONATED TO ORGANIZATION

Schedule M (Form 990) (2012)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493101003214

OMB No 1545-0047

2012

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Employer identification number

13-1623886

ldentifier	Return Reference	Explanation
F990_P06_S0A_L02	Form 990, Part VI, Section A, Line 2	
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	THE FORM 990 IS REVIEWED BY SENIOR MANAGEMENT, GRANT THORNTON AND THE CHAIRMAN OF THE BOARD
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	ON AN ANNUAL BASIS A QUESTIONNAIRE IS SENT OUT TO ALL OFFICERS, DIRECTORS AND TRUSTEES TO IDENTIFY ANY INTEREST THAT COULD GIVE RISE TO CONFLICTS ALL CONFLICTS WILL BE ADDRESSED BY THE EXECUTIVE COMMITTEE
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	COMPENSATION OF OFFICERS AND KEY EMPLOYEES IS APPROVED AND REVIEWED BY THE EXECUTIVE COMMI TTEE FOR REASONABLENESS AS COMPARED TO COMPENSATION PACKAGES OFFERED IN THE NON-PROFIT IND USTRY BY PEER INSTITUTIONS
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	COPIES OF AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, GOVERNING DOCUMENTS AND FORM 990 SENT TO DONORS UPON REQUEST
F990_P11_S00_L05	Form 990, Part XI, Line 5	OTHER CHANGES IN NET ASSETS IS UNREALIZED GAIN FOR THE YEAR

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493101003214

2012

OMB No 1545-0047

Open to Public . Inspection

Schedule R (Form 990) 2012

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC				13-16	23886			
Part I Identification of Disregarded Entities (Com	plete if the organization	answered "Yes" to	Form 990, Pa					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year asse	ets I	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during		the organization a	nswered "Yes"	to Form 990), Part IV,	, line 34 because i	t had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	tion Public ch	(e) arity status 501(c)(3))	(f) Direct controlling entity	Section (13) co en	ontrolle itity?
(1) WEIZMANN INSTITUTE OF SCIENCE PO BOX 26 REHOVOT ISRAEL 76100 IS	SCIENTIFIC RESEARCH FOR THE BENEFIT OF HUMANITY	IS	501 (C)3	7		N/A	Yes	No No
(2) FEINBERG GRADUATE SCHOOL OF THE WEIZMANN INSTITUTE 633 THIRD AVE NEW YORK, NY 10017	GRADUATE SCHOOL IN THE FIELDS OF SCIENCES AND MATHEMATICS	IS	501(C)3	2		N/A		No

Cat No 50135Y

Part III Identification of Related because it had one or more	Organizations Taxable related organizations trea	as a Partn oted as a part	ership tnershւր	(Comp durin	plete g the	ıf the or tax yea	ganız ır.)	zation an	swered "Y	es" to	Form	n 990, Part	IV, lı	ne 3	4
(a) Name, address, and EI related organization	N of	(b) Primary activity	(c) Legal domicile (state or foreign country)	enti	ct Iling	(e) Predominincome(re unrelate excluded tax und sections 9	lated, ed, from der 512-	(f) Share of total incom		(h Disprop allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or	(k) Percentag ownership
						,				Yes	No		Yes	No	
Part IV Identification of Related Inne 34 because it had one or										swere	d "Ye	s" to Form	990,	Part	iV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Lega domic (state or f countr	il ile oreign			(d) controlling entity	Type (C co	(e) of entity rp, S corp, trust)	(f) Share of tota Income		(g) re of en of-year assets	d- Percen owner	tage		(i) Section 512 (b)(13) controlled entity?
(1) CHARITABLE REMAINDER ANNUITY TRUST (18) 633 THIRD AVE	ANNUITY TRUST	NY			N/A		Т								Yes No
NEW YORK, NY 10017 (2) CHARITABLE REMAINDER UNITRUST TRUST (18) 633 THIRD AVE NEW YORK, NY 10017	UNITRUST	NY			N/A		Т								

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more r	related organizations li	sted in Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
b	Gift, grant, or capital contribution to related organization(s)				1b	Yes	
c	Gift, grant, or capital contribution from related organization(s)				1c		No
d	Loans or loan guarantees to or for related organization(s)				1d		No
e	Loans or loan guarantees by related organization(s)				1e		No
f	Dividends from related organization(s)				1f		No
g	Sale of assets to related organization(s)				1g		No
h	Purchase of assets from related organization(s)				1h		No
i	Exchange of assets with related organization(s)				1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I	Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No_
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
0	Sharing of paid employees with related organization(s)				10		No
	Development would be related assessment on (a) for assessment				1n		No
	Reimbursement paid to related organization(s) for expenses				1p 1q		No
q	Reimbursement paid by related organization(s) for expenses				14		
r	Other transfer of cash or property to related organization(s)				1r		No
s	Other transfer of cash or property from related organization(s)				1s		No
_	Total control of the second state of the secon						
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete (a)	(b)	(c)	(d)			
	Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amo	unt II	nvolved	
1) W	EIZMANN INSTITUTE OF SCIENCE	С	56,040,000				

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

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

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

revenue) that was not a related organization. See instri										,			
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managıng partner?	ıl	(k) Percentage ownership
			514)	Yes	No			Yes	No			No	
(1) WEIZMANN GLOBAL ENDOWMENT FUND	INVESTMENT MANAGEMENT	NY	Related		No	103,627,000	471,033,000		No	-159,000		No	22 %
110 EAST 42ND STREETNEW YORK, NY 10017													

Additional Data Return to Form

Software ID: 12000197

Software Version: v1.00

EIN: 13-1623886

Name: AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE INC

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)								
Identifier	Return Reference	Explanation						