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SEE SCHEDULE O FOR THE REASON FOR FILING AN AMENDED RETURN

_{50m} 990

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 private foundations)

01(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0047

2013

Open to Public

Internal Revenue Service ► Information about Form 990 and its instructions is at www.us gov/form990 Inspection A For the 2013 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable AMERICAN FRIENDS OF THE ISRAEL Address change DEMOCRACY INSTITUTE INC. Name change 13-3348313 Doing Business As Instial Number and street (or P.O box if mail is not delivered to street address) Room/suite E Telephone number Termin-404-240-7700 1266 W PACES FERRY RD 615 X Amende G Gross receipts \$ 8,831,738. City or town, state or province, country, and ZIP or foreign postal code Applica-tion pending ATLANTA, GA 30327 H(a) Is this a group return F Name and address of principal officer JAY KAIMAN Yes X No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status X 501(c)(3) 501(c) (」 4947(a)(1) or 527 (insert no.) If "No," attach a list (see instructions) U_website: ► N/A H(c) Group exemption number ▶ Other > Year of formation: 1986 M State of legal domicile: NY K Form of organization: X Corporation Trust Association Part I∣ Summary Briefly describe the organization's mission or most significant activities: THE PURPOSE OF THE AMERICAN Governance, FRIENDS OF THE ISRAEL DEMOCRACY INSTITUTE, INC. IS TO PROMOTE AND Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 0 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 8,187,788 8,831,738. Contributions and grants (Part VIII, line 1h) RECEIVED Revenue 0. 0. Program service revenue (Part VIII, line 2g) Š 0. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, 2111e) JUN 2 2 2015 0 0. Õ 8,831,738. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 8,119,146. 8,176,730. Grants and similar amounts paid (Part IX, column (A), lines 1(3) OGDEN IN Ō. 0. Benefits paid to or for members (Part IX, column (A), line 4) 51,948. 52,856. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 100,725. 106,414. 16a Professional fundraising fees (Part IX, column (A), line 11e) 213,673. **b** Total fundraising expenses (Part IX, column (D), line 25) 329,067 317,734. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 8,607,483 8,647,137. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) <419,695. 184,601. Revenue less expenses Subtract line 18 from line 12 Assets or I d Balances Beginning of Current Year **End of Year** 252,932. 323,823. 20 Total assets (Part X, line 16) 101,574. 215,284 21 Total liabilities (Part X, line 26) Set Engl 222,249. 37,648. Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perury, Adeclare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Meclafation of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Sign 6/15/16 NAMAÍ A JAY EXEC. DIRECTOR Here Type or plut name and title Print/Type preparer's name Preparer's signature: Paid GREGORY W. HAYES P00054246 self-employed Firm's name MOORE STEPHENS TILLER LLC 58-0673524 Preparer Firm's EIN Firm's address 1960 SATELLITE BOULEVARD Use Only Phone no. 770-995-8800 DULUTH, GA 30097

332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

Form **990** (2013)

X Yes

	1990 (2013) DEMOCRACI INSTITUTE INC. 15-35465.	13 Page 2
Pai	rt III Statement of Program Service Accomplishments	[1
<u> </u>	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission	rmrmm
	THE PURPOSE OF THE AMERICAN FRIENDS OF THE ISRAEL DEMOCRACY INST	
	INC. IS TO PROMOTE AND SUPPORT IN THE UNITED STATES AND ELSEWHER	
	NONPARTISAN ANALYSIS, STUDY AND RESEARCH ON GOVERNMENT AND ECONOL	41C
	REFORM CONDUCTED BY A NONPROFIT CHARITABLE AND EDUCATIONAL	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	enses
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper	
	revenue, if any, for each program service reported	iscs, and
	(Code) (Expenses \$ 8,375,242. including grants of \$ 8,176,730.) (Revenue \$	
70	RESEARCH - ISRAEL DEMOCRACY INSTITUTE, PO BOX 4702 JERUSALEM ISRAEL	ART. /
	91040	<u> </u>
	71040	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
7.0	/ (Liberises 4) / (Liberises 4) / (Liberises 4)	
		
		
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$))
		
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 8,375,242.	
	·	orm 990 (2013)

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, 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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			3,7
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44.		Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
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	11d		х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	 -	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
٠	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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	ļ	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	Х
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	445	х	
4-	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b	<u> </u>	-
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	 -		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	1	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18]	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			,.
	complete Schedule G, Part III	19	 	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	₩	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	ļ

Form 990 (2013) DEMOCRACY INSTITUTE INC.

Part IV | Checklist of Required Schedules (continued)

•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	0.4		v
	government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
22	Did the organization report more than \$5,000 of grants or 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		х
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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			i
	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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u></u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			İ
	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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			i
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			1
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Ь—	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		1	٠,,
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	—	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			3,
	contributions? If "Yes," complete Schedule M	30	├	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			١,,
	If "Yes," complete Schedule N, Part I	31	├	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		1	1,,
	Schedule N, Part II	32	 	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			.
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	١		_V
	Part V, line 1	34	 	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	┼ <u>^</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	l	1	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	\vdash	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			_ v
	If "Yes," complete Schedule R, Part V, line 2	36	+-	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			x
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	+^-
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		X	
	Note. All Form 990 filers are required to complete Schedule O	38	_	(2013)
		rom	ロ ママリ	(∠∪ (3)

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	Check if Schedule O contains a response or note to any line in this Part V			
•	Chock is deficient a cooperiod of flote to any line in this tart v		<u>v.</u> 1	<u></u>
4-	Enter the number reported in Box 3 of Form 1096. Enter $\cdot 0 \cdot$ if not applicable		Yes	No
	Enter the Hamber reported in 1997 of 1 and 1997 of 1			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming.			
С	(gambling) winnings to prize winners?	1c	х	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	10		
Za	filed for the calendar year ending with or within the year covered by this return 2a 0			
.	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
20	The state of the s	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
48	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country:	70		
ь	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
E.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
b	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			_
Ja	any contributions that were not tax deductible as charitable contributions?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A_
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting ${ m N/A}$			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966? N/A	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter			ļ
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders N/A 11a	1	1	
ь	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	40-		ł
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year $N/A = 12b$	12a	<u> </u>	-
	,	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? N/A	13a	┝	
а	To the organization monitor to the organization of the organizatio	138	 	
L	Note. See the instructions for additional information the organization must report on Schedule O			
Ø	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			
_		1	1	
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u> </u>	 -
	II Tes, rias it med a Form 120 to report these payments in 110, provide an expandition in concesse of	_	990	(2013)
	Form 990 (2013)			

Form 990 (2013) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 4			
	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.		:	
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	D. 11	40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	406		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Ha	21	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
٠	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►GA , NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılat	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, are	id finai	ncial	
	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 of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ition 🕨		
	FREDERICK S SLAGLE, CFO - 404-240-7700			
	1266 W PACES FERRY RD, NO. 615, ATLANTA, GA 30327	r	. 000	(0010)
33200	3 10-29-13	rorn	コンプ	(2013)

Form 990 (2013) DEMOCRACY INSTITUTE INC.

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

Check if Schedule O contains a response or note to any line in this Part VII
--

- 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."

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

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Name and Title	Check this box if neither the organization n						nsat			(5)	
Average hours per week (list any hours for related organizations below line) 11) BERNARD MARCUS 12) RICHARD GOODMAN 12) RICHARD GOODMAN 13) FRED MARCUS 14) ABE SOFAER 15) IRECTOR 16) IRECTOR 17) JERSET FERRIS 10.000 10) IRECTOR 17) JESSE FERRIS 10.000 10) IRECTOR 17) JESSE FERRIS 10, 000 100 IRECTOR 17) JESSE FERRIS 10, 000 100 IRECTOR 17) JESSE FERRIS 10, 000 18) Jesse ferritan on the organization from the organization of the compensation from the organization (W.2/1099-MISC) 20) Compensation from the organization (W.2/1099-MISC) 20) Compensation (W.2/1099-MISC) 21) Compensation (W.2/1099-MISC) 21) Co	(A)	(B))) Pos	5) Ition	1		(D)	(E)	(F)
Week (list any hours for related organizations below line) September 1 September 2 September	Name and Title	, -	(do	not c	heck	more than one			1		
(ist any hours for related organizations below line) (I) BERNARD MARCUS (II) BERNARD MARCUS (III) BERNARD MARCUS (III) BERNARD GOODMAN (III) DIRECTOR (III) STATE OF THE PROPERTY OF THE PROP			offi	, unle cer an	ss pe id a d	rson irecto	is bot or/trus	n an tee)	1		
1			a	Γ.							
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1			trust	altru		yee	mpe		'		-
1			lenp	ng fi	, .	뒽	est co oyee	بة			organizations
1 BERNARD MARCUS		line)	Indiv	Instit	Office	Key	High	Form			
Column C	(1) BERNARD MARCUS	0.50							_		
X 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	CHAIRMAN		X				ļ	_	0.	0.	0.
(3) FRED MARCUS	(2) RICHARD GOODMAN	0.50					ŀ				
X	DIRECTOR		X		ļ	_	<u> </u>		0.	0.	0.
(4) ABE SOFAER		0.50	ļ								_
X		0.50	X	ļ			├-		0.	0.	0.
(5) FREDERICK S SLAGLE (6) JAY KAIMAN (6) JAY KAIMAN (7) JESSE FERRIS (10.00) 3.00 X 0.00 0.00 0.00		0.50	↓							١	0.
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(6) JAY KAIMAN 3.00 X 0. 0. (7) JESSE FERRIS 10.00		3.00	┨		v				n.	0.	0.
EXECUTIVE DIRECTOR X 0. 0. (7) JESSE FERRIS 10.00		3.00	-	├	 ^	┢	\vdash	\vdash	1		
(7) JESSE FERRIS 10.00		3.00	1		$ _{\mathbf{x}}$	l			0.	l o.	0.
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	DEVELOPMENT DIRECTOR		1		X		ļ		72,000.	0.	0.
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332007 10-29-13

Section A.

Form	990 (2013) DEMOCRA	N FRIENDS	יטיו	ΓE:	I	IC.	• •			13-33	348:	313	Pa	ıge 8
Par	t VII Section A. Officers, Directors, Tr (A) Name and title	(B) Average hours per	(do	not c	, and Cost heck to ss period a d	C) Ition more rson i	than (one h an	(D) Reportable compensation	(E) Reportable compensatio	- 1	Est am	(F) imate ount o	_
		week (list any hours for related organizations below line)	tee or director	Institutional frustee	Officer		Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	3	comp fro orga and	other pensation the m the nization relate nization	e on ed
1b	Sub-total					<u> </u>		•	72,000.		0.			0.
	Total from continuation sheets to Part Total (add lines 1b and 1c) Total number of individuals (including but compensation from the organization		nose	liste	ed al	bove	e) wh	► No re	72,000. eceived more than \$100	0,000 of reportabl	0. 0. e			0.
3	Did the organization list any former offic line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the	r such individual										3	Yes	No X
5	and related organizations greater than \$ Did any person listed on line 1a receive or rendered to the organization? If "Yes," co	150,000? <i>If</i> "Yes or accrue compe	." cc nsat	mpl ion	ete S from	Sche any	e <i>dul</i> e / unr	e J i	for such individual			5		X X
1	ction B. Independent Contractors Complete this table for your five highest the organization. Report compensation f										ipensa			•
<u>YE</u> I	(A) Name and busine	ss address		_					(B) Description of s LECTURES,	services	C	(C omper		n
		JERUSAL	EM	<u>, </u>	ISI	RA]	EL	- 1	EDUCATIONAL,	RESEARC		120	0,0	00
														
								—						

Form **990** (2013)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

AMERICAN FRIENDS OF THE ISRAEL DEMOCRACY INSTITUTE INC. 13-3348313 Form 990 (2013) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (C) Related or Total revenue Unrelated exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues 1c c Fundraising events 1d d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and 1f 8,831,738 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 8,831,738. h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) ▶ 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a

8,831,738.

d All other revenue e Total, Add lines 11a-11d

Total revenue See instructions.

b

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Form 990 (2013)

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	omplete column (A)	
	Check if Schedule O contains a respon	ise or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
Ū	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	8,176,730.	8,176,730.		
4	Benefits paid to or for members	0,110,1301	0/2/0//000		
5	Compensation of current officers, directors,				
5					
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	42 200		21 604	21 604
7	Other salaries and wages	43,388.		21,694.	21,694.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	4 200		4-000	
9	Other employee benefits	4,280.		4,280.	4 200
10	Payroll taxes	4,280.			4,280.
11	Fees for services (non-employees)		İ	ĺ	2 5 5 4
а	Management	3,664.			3,664.
b	Legal	80.		80.	
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	100,725.			100,725.
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	87,900.	'	15,900.	_72,000.
12	Advertising and promotion				
13	Office expenses	21,454.	164.	10,723.	10,567.
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	38,104.	37,679.		425.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	41,754.	40,361.	1,393.	
20	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization	1,458.		1,458.	
22		2,413.		2,413.	
23	Insurance Other expenses. Itemize expenses not covered	2,313.		2,110	
24	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 0.)				
a	CONSULTANTS & CONSULTIN	120,000.	120,000.	-	
b	MEALS & ENTERTAINMENT	318.		-	318.
C	BANK CHARGES	231.		231.	
ď	MEALS & ENTERTAINMENT	199.	199.		
		159.	109.	50.	··
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	8,647,137.	8,375,242.	58,222.	213,673.
25		0,041,137.	0,3/3,242.	30,222.	213,013.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
-	Check here if tollowing SOP 98-2 (ASC 958-720)			<u> </u>	n- 000 (na : -:
33201	0 10-29-13				Form 990 (2013)

Pa	rt X	Balance Sheet				
$\overline{\cdot}$		Check if Schedule O contains a response or note to any line in this P	art X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		221,577.	1	287,760.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		29,167.	4	35,333.
	5	Loans and other receivables from current and former officers, director				
		trustees, key employees, and highest compensated employees. Com				
	ļ	Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defin				
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and co				
	1	employers and sponsoring organizations of section 501(c)(9) voluntai	- 1			
s		employees' beneficiary organizations (see instr) Complete Part II of S			6	
Assets	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
		Land, buildings, and equipment cost or other				
			0,227.	,		
	Ь		9,497.	2,188.	10c	730.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets	-	14		
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		252,932.	16	323,823.
	17	Accounts payable and accrued expenses		84,284.	17	79,574.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	1		21	
S	22	Loans and other payables to current and former officers, directors, tr				
Ξ		key employees, highest compensated employees, and disqualified p	ersons.	•		
Lıabilities		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties		131,000.	24	22,000.
	25	Other liabilities (including federal income tax, payables to related thir	d			
	1	parties, and other liabilities not included on lines 17-24) Complete Pa	art X of		l	
	1	Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		215,284.	26	101,574.
			X and			
es		complete lines 27 through 29, and lines 33 and 34.		25 640	[
auc	27	Unrestricted net assets		37,648.	27	222,249.
Bal	28	Temporanly restricted net assets		<u> </u>	28	
P	29	Permanently restricted net assets	. —	ļ	29	
Ŀ		Organizations that do not follow SFAS 117 (ASC 958), check here	• ▶∟			
, o		and complete lines 30 through 34.				
sets	30	Capital stock or trust principal, or current funds			30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	i	27 640	32	222 240
_	33	Total net assets or fund balances		37,648. 252,932.	33	222,249.
	34	Total liabilities and net assets/fund balances		434,334.	34	323,823.

Form 990 (2013)

AMERICAN FRIENDS OF THE ISRAEL

Form	990 (2013) DEMOCRACY INSTITUTE: INC.	13-334	#82T2	Pa	ge 12
Pai	t XI Reconciliation of Net Assets				
<u> </u>	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,83		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,64		
3	Revenue less expenses Subtract line 2 from line 1	3			01.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3	<u>7,6</u>	48.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	22	<u>2,2</u>	<u>49.</u>
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	1 1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	l i		
	separate basis, consolidated basis, or both.		- 1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	<u> </u>	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,	1 1		ļ
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> X</u>	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	ar sudita, avalore who is Schodula O and describe any stops taken to undergo such audits		3h		1

Form **990** (2013)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Open to Public Inspection

Name of the organization

AMERICAN FRIENDS OF THE ISRAEL DEMOCRACY INSTITUTE INC.

Employer identification number 13-3348313

Part Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(IV). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). \mathbf{x} An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 11 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. d Type III · Non functionally integrated b Type II c ____ Type III · Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(ni) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (vi) Is the (iv) Is the organization (v) Did you notify the (iii) Type of organization (vii) Amount of monetary (i) Name of supported (ii) EIN organizátion in col. in col. (i) listed in your organization in col. (described on lines 1-9 organization support (i) organized in the U.S.? governing document? above or IRC section (1) of your support? (see instructions)) Yes No Yes Yes No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

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

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

sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not				n 405 506	0.074.533	40.435.045
	include any "unusual grants ")	8,077,920.	8,893,638.	8,444,735.	8,187,788.	8,831,738.	42,435,819.
2	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to	· 					
	the organization without charge						
4	Total. Add lines 1 through 3	8,077,920.	8,893,638.	8,444,735.	8,187,788.	8,831,738.	42,435,819.
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)						1,668,284.
	Public support. Subtract line 5 from line 4			i.			40,767,535.
	ction B. Total Support				<u>-</u>		
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	8,077,920.	8,893,638.	8,444,735.	8,187,788.	8,831,738.	42,435,819.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the					1	
	business is regularly carried on				·		
10	Other income Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV)						
44	Total support. Add lines 7 through 10						42,435,819,
	Gross receipts from related activities,	etc (see instructi				12	· · · · · · · · · · · · · · · · · · ·
	First five years. If the Form 990 is for			d. fourth, or fifth ta	ı x vear as a sectio		
	organization, check this box and stop			_,	,		ightharpoons
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (line 6, column (f) d	ivided by line 11, o	olumn (f))		14	96.07 %
	Public support percentage from 2012					15	91.28 %
16a	33 1/3% support test - 2013. If the	organization did no	ot check the box o	n line 13, and line 1	4 is 33 1/3% or n	nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	i .			ightharpoons
t	33 1/3% support test - 2012. If the	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						▶□
178	a 10% -facts-and-circumstances tes	t - 2013. If the org	ganization did not d	check a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstar	ices" test, check th	nis box and stop h	ere. Explain in Pai	rt IV how the organ	nization
	meets the "facts-and-circumstances"	•	•		-		▶ ∟
k	10% -facts-and-circumstances tes						
	more, and if the organization meets t						•
	organization meets the "facts-and-cire						▶⊨
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b			
					Sche	edule A (Form 990	or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 DEMOCRACY INSTITUTE INC.

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

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

Section A. Public Support	olovi, plodago domi					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants ")				i	<u> </u>	
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in any activity that is related to the		ĺ				
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-		,		 	 "	
ization's benefit and either paid to						
or expended on its behalf				1		
·				 	 	<u> </u>
5 The value of services or facilities						
furnished by a governmental unit to		1	1			
the organization without charge				 	 	
6 Total. Add lines 1 through 5			 	 		
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons			 	 	 	
b Amounts included on lines 2 and 3 received from other than disqualified persons that		ł	1	}	1	}
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year			ļ	ļ	 	
c Add lines 7a and 7b		ļ		 		ļ
8 Public support (Subtract line 7c from line 6)		<u> </u>	L	<u> </u>	<u></u>	<u>L</u>
Section B. Total Support			· · · · · · · · · · · · · · · · · · ·			
Calendar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6					<u> </u>	
10a Gross income from interest,			1			
dividends, payments received on securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses		1		1		
acquired after June 30, 1975			<u> </u>	1		<u> </u>
c Add lines 10a and 10b		<u> </u>				
11 Net income from unrelated business		1	1	 	1 -	
activities not included in line 10b,				1		
whether or not the business is regularly carried on		1		1		
12 Other income Do not include gain		 	<u> </u>	 	 	<u> </u>
or loss from the sale of capital				1		!
assets (Explain in Part IV)		 	 	 	 	1
Total support. (Add lines 9, 10c, 11, and 12)First five years. If the Form 990 is for	the organization	e first second the	rd fourth or fifth	tay year as a soot	ion 501(c)(3) orosa:	zation
check this box and stop here	trie organization	a mar, second, ini	ra, rourin, or min	ian year as a sect	on so regard	
Section C. Computation of Publ	ic Support Pe	rcentage				
			column (ft)		15	
15 Public support percentage for 2013 (I			Column (ijj		16	%
16 Public support percentage from 2012 Section D. Computation of Invest					1 191	
 					17	
17 Investment income percentage for 20	•		ne is, column (I))		18	%
18 Investment income percentage from 2			on line 4.4	o 15 is	<u> </u>	
19a 33 1/3% support tests - 2013. If the	-					I/ IS NOT
more than 33 1/3%, check this box a						▶□
b 33 1/3% support tests - 2012. If the						. —
line 18 is not more than 33 1/3%, che		, -	=		· ·	
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check			▶
332023 09-25-13				So	hedule A (Form 99	90 or 990-EZ) 2013

AMERICAN FRIENDS OF THE ISRAEL

Schedule A	(Form 990 or 990-EZ) 2013 DEMOCRACY INSTITUTE INC.	13-3348313 Page
Part IV	(Form 990 or 990 EZ) 2013 DEMOCRACY INSTITUTE INC. Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17	a or 17b, and Part III, line 12
	Also complete this part for any additional information (See instructions)	a o, 11 o, ano 1 a 1 m, mo 12
	7130 complete this part for any additional information (See instructions)	
		····
		
	The state of the s	
		
·		
_		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

Employer identification number

Inspection

OMB No 1545 0047

AMERICAN FRIENDS OF THE ISRAEL

DEMOCRACY INSTITUTE INC.

13-3348313

Pai	organizations Maintaining Donor Advise		S OF ACCOUNTS. Complete if the
	organization answered Tes Torronn 350, Partiv, Illie	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an h	storically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 17	O(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		└─ Yes └─ No
9	In Part XIII, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describe	s the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o		Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthei	rance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

Sche	AMERICAN dule D (Form 990) 2013 DEMOCRACY				AEL		13-	3348313	Bage 2
	t III Organizations Maintaining Coll				easures, o	or Other			
Ь	Using the organization's acquisition, accession,								
3	(check all that apply)	and other records,	, or look	any or mo	ionowing the	t aro a orgi		110 0011011	Romo
а	Public exhibition	d	\Box	oan or excl	hange progra	ıms			
b	Scholarly research	e		Other	nungo progra	5			
c	Preservation for future generations	Ü							
	Provide a description of the organization's collection	tions and explain l	how th	ev further th	ne organizatio	on's exemp	ot purpose in	Part XIII.	
5	During the year, did the organization solicit or rec								
Ū	to be sold to raise funds rather than to be mainta							Yes	☐ No
Par						'Yes" to Fo	rm 990. Part		
	reported an amount on Form 990, Part X,	-		- · · · · · · · · · · · · · · · · · · ·				,,	
1a	Is the organization an agent, trustee, custodian of		arv for o	contribution	s or other as	sets not in	cluded		
	on Form 990, Part X?							Yes	☐ No
h	If "Yes," explain the arrangement in Part XIII and	complete the follo	owina t	able					
_	The root, on plant the all all golden are all all all all all all all all all al							Amount	
С	Beginning balance						1c		
	Additions during the year						1d		
	Distributions during the year						1e	*	
f	Ending balance						1f		
	Did the organization include an amount on Form	990. Part X. line 2	12				I	Yes	No
	If "Yes," explain the arrangement in Part XIII Ch			n has been	provided in f	Part XIII			
Par									
	(a) Current year	(b) P	nor year	(c) Two year	rs back (d) Three years b	ack (e) Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs			_					
f	Administrative expenses								
g	End of year balance							<u> </u>	
2	Provide the estimated percentage of the current	year end balance	(line 1	g, column (a	a)) held as				
а	Board designated or quasi-endowment >		%						
b	Permanent endowment >	%							
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c should of								
3a	Are there endowment funds not in the possession	on of the organizat	tion tha	it are held a	ınd admınıste	ered for the	organization		
	by								Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(iı)	
b	If "Yes" to 3a(ii), are the related organizations lis							3b	
4	Describe in Part XIII the intended uses of the or		vment	funds					
Pai	t VI Land, Buildings, and Equipmer								
	Complete if the organization answered "\	Yes" to Form 990,	Part IV	, line 11a. S	See Form 990), Part X, Iır	ne 10	T	
	Description of property	(a) Cost or oth	1		t or other		umulated	(d) Bool	k value
		basis (investme	ent)	basis	(other)	depr	eciation		
1a	Land								
ь	Buildings	ļ <u>-</u> -					_	ļ	

Schedule D (Form 990) 2013

730. 730.

9,497.

10,227.

c Leasehold improvements

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

d Equipment

Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11b See Form 990,	Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of	valuation: Cost or end	f-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				·
(B)				
(C)			·	
(D)			****	
(E)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	· - .			
Part VIII Investments - Program Related.			· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered "Yes"	to Form 990 Part IV.	line 11c. See Form 990	Part X. line 13	
(a) Description of investment	(b) Book value	(c) Method of	valuation Cost or end	I-of-year market value
(1)				
(2)				
(3)				
(4)				· •·
(5)				
				
(7)				
(8)				
(9)	<u> </u>			'
Total (Col. (b) must equal Form 990, Part X, col (B) line 13.)			·	
Part IX Other Assets.	L			
Complete if the organization answered "Yes"	to Form 990 Part IV	line 11d. See Form 990	Part X line 15	
	Description	inte Tra Oce Form 550,	Tarrx, into 10	(b) Book value
				(-,
(1)				
(2)				
(3)	 -			
		-		
			· · · · · · · · · · · · · · · · · · ·	
(6)				
(7)				-
(8)				
(9) Total. (Column (b) must equal Form 990, Part X, col (B) lin	0.15.)			
Part X Other Liabilities.	6 13)		<u></u>	
Complete if the organization answered "Yes"	to Form 000 Part IV	line 110 or 11f See For	m 000 Part Y line 25	
(-) D(1	to rollingso, raitiv,	(b) Book value	11 330, 1 41 7, 11 6 23	<u></u>
		(0) 2001 14.00	-	
(1) Federal income taxes			-	
(2)			┥	
(3)			4	
<u>(4)</u>			-{	
(5)			-	
			-	
			-	
(8)			-	
(9)	0.05.)	<u> </u>	-	
Total. (Column (b) must equal Form 990, Part X, col (B) lin		-4-4-4-		Ala-A
2. Liability for uncertain tax positions. In Part XIII, provide				
organization's liability for uncertain tax positions under	FIN 48 (ASC 740) C	neck nere if the text of the		
			Sch	edule D (Form 990) 2013

AMERICAN FRIENDS OF THE ISRAEL 13-3348313 Page 4 DEMOCRACY INSTITUTE INC. Schedule D (Form 990) 2013 Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 8,831,738. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 2a b Donated services and use of facilities 2b 2c c Recoveries of prior year grants d Other (Describe in Part XIII) 2d 2e e Add lines 2a through 2d 8,831,738 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b b Other (Describe in Part XIII) 4c c Add lines 4a and 4b 8,831 738. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 8,647,137. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a a Donated services and use of facilities **b** Prior year adjustments 2b 2c c Other losses 2d d Other (Describe in Part XIII) 2e e Add lines 2a through 2d 3 8,647 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b b Other (Describe in Part XIII) 4c c Add lines 4a and 4b 8,647 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. 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 PART X, LINE 2: EXPLANATION: AUDIT NOTE: "GAAP PROVIDES GUIDANCE FOR HOW UNCERTAIN TAX PRESENTED, AND DISCLOSED IN THE POSITIONS SHOULD BE RECOGNIZED, MEASURED, ORGANIZATION'S FINANCIAL STATEMENTS. THE ORGANIZATION'S MANAGEMENT HAS EVALUATED THE IMPLICATIONS OF THESE STANDARDS AND HAS NOT IDENTIFIED ANY UNCERTAIN TAX POSITIONS FOR THE ORGANIZATION; THEREFORE, NO TAX EXPENSE OR ACCRUALS FOR UNCERTAIN TAX POSITIONS ARE INCLUDED IN THE ACCOMPANYING

332054 09-25-13

FINANCIAL STATEMENTS."

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www irs.gov/form990.

2013
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Name of the organization

AMERICAN FRIENDS OF THE ISRAEL

Employer identification number

Έľ	MOCRACY INSTI	TUTE INC	•		13-33483	13
Pai	t I General Infor	mation on A	ctivities Out	tside the United States. Comple	ete if the organization answered "	Yes" on
	Form 990, Part IV		· - · · · · · · · · · · · · · · · · · ·			
1	-	-		ds to substantiate the amount of its gra		٠ استا
	the grantees' eligibility for	or the grants or a	issistance, and	the selection criteria used to award the	grants or assistance?	Yes No
_						4 J 4
2		ribe in Part V the	organization's	procedures for monitoring the use of its	s grants and other assistance ou	tside the
_	United States	fallannaa Dad	I leas 2 table of	an be duplicated if additional space is r	anded)	
3	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
	(a) negion	offices	employees.	(by type) (e g , fundraising, program	is a program service,	expenditures
		in the region	agents, and independent	services, investments, grants to	describe specific type	for and investments
			contractors in region	recipients located in the region)	of service(s) in region	in region
	····		irregion		· · · · · · · · · · · · · · · · · · ·	1
						Ì
IDE	LE EAST AND					
ORT	H AFRICA -	o	0	GRANTS		8,176,730.
					4	
		,				
						İ
						
		1				
						Ì
		ł	İ			
						
						1
	 					
3 =	Sub-total	- 0	0			8,176,730.
-	Total from continuation		<u> </u>			
-	sheets to Part I		0			0.
С	Totals (add lines 3a					
	and 3b)	0	0			8,176,730.
		A M	Ale - I A	-Ai 4 Fa 000	Cahadula E	(Farm 000) 2012

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

Schedule F (Form 990) 2013

AMERICAN FRIENDS OF THE ISRAEL DEMOCRACY INSTITUTE INC.

recipient who received more than \$5,000 Part II can be duplicated if additional space is needed

Page 2

13-3348313

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	TO PROMOTE AND SUPPORT IN THE UNITED STATES AND ELSEWHERE, THE NONPARTISAN	8,176,730.	CASH 8,176,730.DISBURSEMENT	0.		
							,	
								:
2 Enter total number of the IRS, or for which	f recipient organization the grantee or couns	ons listed above that are	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-e	xempt by		τ
3 Enter total number of other organizations or entities	f other organizations	or entities				•		2

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2013

332072 10-03-13

AMERICAN FRIENDS OF THE ISRAEL DEMOCRACY INSTITUTE INC.

Schedule F (Form 990) 2013 DEMOCRACY INSTITUTE INC.

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

Part III can be duplicated if additional space is needed

13-3348313

(h) Method of valuation (book, FMV, appraisal, other)		•	•		1,1
(g) Description of non-cash assistance					
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

AMERICAN FRIENDS OF THE ISRAEL

13-3348313 DEMOCRACY INSTITUTE INC. Schedule F (Form 990) 2013 Page 4 Part IV Foreign Forms Was the organization a US transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Yes X No Corporation (see Instructions for Form 926) Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With Yes X No. a U.S. Owner (see Instructions for Forms 3520 and 3520-A) 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 Yes X No Certain Foreign Corporations (see Instructions for Form 5471)

qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund Yes X No (see Instructions for Form 8621)

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

Was the organization a direct or indirect shareholder of a passive foreign investment company or a

Foreign Partnerships (see Instructions for Form 8865)

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)

Schedule F (Form 990) 2013

Yes X No

Yes X No

Schedule F (Form 990) 2013 DEMOCRACY INSTITUTE INC.	13-3348313 Page 5
Part V Supplemental Information	
Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accou	nting method, amounts of
investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method)	
(estimated number of recipients), as applicable. Also complete this part to provide any additional info	rmation .
PART I, LINE 2:	
EXPLANATION: GRANTS ARE ONLY MADE TO THE ISRAEL DEMOCRACY	INSTITUTE A
RECOGNIZED ISRAELI CHARITABLE ENTITY.	
PART II, COLUMN (D):	
(A) REGION:	
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI	, EGYPT,
(D) PURPOSE OF GRANT: TO PROMOTE AND SUPPORT IN THE UNITE	ED STATES AND
ELSEWHERE, THE NONPARTISAN ANALYSIS, STUDY AND RESEARCH (ON GOVERNMENT AND
ECONOMIC REFORM CONDUCTED BY A NONPROFIT CHARITABLE AND E	EDUCATIONAL
ORGANIZATION IN ISRAEL, THE ISRAEL DEMOCRACY INSTITUE, AN	ND THE
DISSEMINATION OF THE RESULTS OF SUCH WORK TO THE GENERAL	PUBLIC.

SCHEDULE G

(Form 990 or 990-EZ)

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.

➤ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open To Public Inspection

Name of the organization

AMERICAN FRIENDS OF THE ISRAEL Emplo

Employer identification number

	CY INSTITUTE INC.				13-3348	313
Part I Fundraising Activities required to complete this part	i. Complete if the organization answert	ered "Y	es" to	Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
1 Indicate whether the organization rai a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written key employees listed in Form 990, F b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the	e X Solicita f Solicita g Special or oral agreement with any individua Part VII) or entity in connection with p lividuals or entities (fundraisers) purs	tion of tion of fundra I (includer profess	non-g gover lising i ding o lional f	overnment grants nment grants events fficers, directors, tru- fundraising services?	stees or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(III) fundr have c or con contribu	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
LILI NAVEH - 119 MONTE		Yes	No			
AVENUE, PIEDMONT, CA 94611	FUNDRAISING	100	x	300,000.	26,000.	274,000.
DAVID ALTSHULER COMPANY, INC.	 	 				
- 63 VINE ROAD, LARCHMONT, NY	FUNDRAISING CONSULTING		х	0.	60,000.	<60,000.
		<u> </u>				
		-				<u> </u>
Total			<u> </u>	300,000.		214,000.
3 List all states in which the organizati or licensing	on is registered or licensed to solicit	contrit	oution	s or has been notifie	d it is exempt from re	egistration
GA, NY						
_						
						
						
	<u> </u>					
						

Schedule G (Form 990 or 990-EZ) 2013

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

SEE PART IV FOR CONTINUATIONS

AMERICAN FRIENDS OF THE ISRAEL

Sch Pa	edu rt	le G (Form 990 or 990-EZ) 2013 DEMOCRA II Fundraising Events. Complete if the	CY INSTITUTE ne organization answere	E . INC . d "Yes" to Form 990, Part	13 – IV, line 18, or reported	3348313 Page 2 more than \$15,000
•		of fundraising event contributions and gr	oss income on Form 99	0-EZ, lines 1 and 6b. List o		ots greater than \$5,000
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
ø			(event type)	(event type)	(total number)	col (c))
Revenue						
Re	1	Gross receipts				
	2	Less Contributions				
	3	Gross income (line 1 minus line 2)			· · · · ·	
	4	Cash prizes				
se	5	Noncash prizes	ļ. 			
Direct Expenses	6	Rent/facility costs				
Orect E	7	Food and beverages				
ן	8	Entertainment				
	9	Other direct expenses				
	10	,			>	
Pa		Net income summary Subtract line 10 from I Gaming. Complete if the organization	ine 3, column (d) answered "Yes" to Forn	n 990. Part IV. line 19. or r	reported more than	<u> </u>
<u> </u>		\$15,000 on Form 990 EZ, line 6a				
Ф			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(4, 5, 1, 9)	bingo/progressive bingo	(0, 0	col (a) through col (c))
æ		0				
_	1	Gross revenue		 		
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direc	4	Rent/facility costs				
	5	Other direct expenses	1		 	
	_	Valuatasulahas	Yes %		Yes %	
	6	Volunteer labor	∟ No	No No	L No	
	7	Direct expense summary Add lines 2 throug	h 5 ın column (d)		•	
	8	Net gaming income summary Subtract line 7	7 from line 1, column (d)			
		iter the state(s) in which the organization opera	•	-1-10		Yes No
		the organization licensed to operate gaming at "No," explain				└── Yes └── No
•	, .,	"No," explain				
		ere any of the organization's gaming licenses r				└ Yes
t) if '	"Yes," explain				
	_					
		19.12.13			Schodule C /Fo	rm 990 or 990-EZ) 2013

AMERICAN FRIENDS OF THE ISRAEL

Schedule G (Form 990 or 990 EZ) 2013 DEMOCRACY INSTITUTE INC.	13-3348313 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in	1 1
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and rec	
14 Enter the name and address of the person who propared the organization of gamma, openial events about a literature	
Name	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization > \$ and the an	nount
of gaming revenue retained by the third party ▶\$	
c If "Yes," enter name and address of the third party	
Name ▶	
Address ▶	
16 Gaming manager information	
Name	
Gaming manager compensation > \$	
Description of services provided	
Description of services provided P	
<u> </u>	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spe	nt in the
organization's own exempt activities during the tax year > \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), an	d Part III, lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instru	
Octob	ulo G (Form 990 or 990-F7) 2012

SCHEDULE 0

(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 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

AMERICAN FRIENDS OF THE ISRAEL Emplo DEMOCRACY INSTITUTE INC.

Employer identification number 13-3348313

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SUPPORT IN THE UNITED STATES AND ELSEWHERE, THE NONPARTISAN ANALYSIS,
STUDY AND RESEARCH ON GOVERNMENT AND ECONOMIC REFORM CONDUCTED BY A
NONPROFIT CHARITABLE AND EDUCATIONAL ORGANIZATION IN ISRAEL, THE ISRAEL
DEMOCRACY INSTITUE, AND THE DISSEMINATION OF THE RESULTS OF SUCH WORK
TO THE GENERAL PUBLIC.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ORGANIZATION IN ISRAEL, THE ISRAEL DEMOCRACY INSTITUE, AND THE
DISSEMINATION OF THE RESULTS OF SUCH WORK TO THE GENERAL PUBLIC.
FORM 990, PART VI, SECTION A, LINE 2:
EXPLANATION: BERNARD MARCUS - CHAIRMAN
FRED MARCUS - DIRECTOR
BERNARD AND FRED MARCUS ARE FATHER AND SON.
BERNARD MARCUS - CHAIRMAN
FREDERICK SLAGLE - CFO
FREDERICK SLAGLE IS AN EMPLOYEE OF THE MARCUS FAMILY OFFICE, LLC OF WHICH
MR. MARCUS IS OWNER.
BERNARD MARCUS - CHAIRMAN
JAY KAIMAN - EXECUTIVE DIRECTOR
JAY KAIMAN IS AN EMPLOYEE OF THE MARCUS FAMILY OFFICE, LLC OF WHICH MR.
MARCUS IS OWNER.

Name of the organization AMERICAN FRIENDS OF THE ISRAEL DEMOCRACY INSTITUTE INC.

Employer identification number 13-3348313

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: A COPY OF THE FORM 990 IS GIVEN TO THE EXCEUTIVE COMMITTEE OF THE ORGANIZATION PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: THE ORGANIZATION ENGAGES IN A MINIMAL AMOUNT OF TRANSACTIONS

EACH YEAR. DUE TO THE LIMITED AMOUNT OF TRANSACTIONS, THE ORGANIZATION IS

ABLE TO MAKE A DETERMINATION WITH RESPECT TO EACH TRANSACTION AS TO WHETHER

OR NOT IT INVOLVES A RELATED PARTY AND WHETHER OR NOT THERE COULD BE A

CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION: THE ORGANIZATION HAS TYPICALLY USED AN OUTSIDE RECRUITMENT

AGENCY WHEN HIRING TOP MANAGEMENT POSITIONS. COMPENSATION IS APPROVED BY

THE PRESIDENT & THE EXECUTIVE COMMITTEE OF THE BOARD. IN CONJUCTION WITH

THAT THE ORGANIZATION USES COMPARATIVE INDUSTRY DATA TO DETERMINE PROPER

COMPENSATION LEVELS.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: GOVERNING DOCUMENTS AND INTERNAL POLICIES ARE GIVEN TO

EMPLOYEES WHEN THEY ARE HIRED BY THE ORGANIZATION AND ARE AVAILABLE WITHIN

THE ORGANIZATION'S OFFICE TO THOSE WHO FALL UNDER THEIR COVENENTS, BUT AS

PROPRIETARY INFORMATION OF THE ORGANIZATION, THEY AND THE FINANCIAL

STATEMENTS ARE NOT MADE AVAILABLE TO THE GENERAL PUBLIC.

FORM 990, PART XII, LINE 2(C)

EXPLANATION: THE PROCESS BY WHICH THE ORGANIZATION CHOOSES AND AUDITOR

AND REVIEWS THE FINANCIALS HAS NOT CHANGED FROM THE PRIOR YEAR.

332212 09-04-13 Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization AMERICAN FRIENDS OF THE ISRAEL DEMOCRACY INSTITUTE INC.	Employer identification number 13-3348313
REASON FOR FILING AN AMENDED RETURN:	
EXPLANATION: FORM 990, SCHEDULE A, PART II, LINE 5 ANI	D LINE 15 HAVE
BEEN AMENDED TO REFLECT:	
(I) THE CORRECT EXCESS CONTRIBUTIONS AMOUNT ON LINE 5,	, AS A PUBLIC
CHARITY WAS INADVERTENTLY INCLUDED IN THE TOTAL IN THE	E ORIGINAL FILING,
AND	
(II) THE CORRECT PUBLIC SUPPORT % FROM THE PRIOR YEAR,	, WHICH ALSO
INADVERTENTLY INCLUDED A PUBLIC CHARITY IN THE LINE 5	EXCESS
CONTRIBUTIONS TOTAL.	