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DLN: 93493134021755

Form **990** 

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 cai pplicable	C Name of organization	7-01-2013 , 2013, and ending 06	-30-2014	D Employ	er iden	tification number
	dress ch		INSTITUTE FOR ADVANCED STUDY - LOUIS BAMBERGER & MRS FELIX FULD F	OUNDATION			34988	
_	me chai	_	Doing Business As				2,700	
Init	tıal retui	rn	Number and street (or P.O. hox if mail i	s not delivered to street address) Room/	suite	5.T.I		
Tei	rmınated	d	Einstein Drive Suite	s not delivered to street address) Room,	Suite	E Telepho		
— <sub>Am</sub>	ended i	return	City or town, state or province, country,	and ZIP or foreign postal code		(609)	734-8	208
— <sub>Apı</sub>	plication	pending	Princeton, NJ 08540			<b>G</b> Gross re	eceipts \$	393,638,818
			<b>F</b> Name and address of princip	al officer	H(a)	s this a group	return	for
			Robbert Dıjkgraaf Dırector Eınsteın Drıve			subordinates?		┌ Yes 🗸 No
			Princeton, NJ 08540		Н(b)	Are all subordır	nates	┌ Yes ┌ No
						ncluded?		
<b>I</b> Ta	x-exem	pt status	▼ 501(c)(3)	rt no )   4947(a)(1) or   527		[f"No," attach	a list (	(see instructions)
J W	ebsite	:⊨ ww	w ias edu		H(c)	Group exempti	on nun	nber ►
<b>K</b> For	m of org	ganızatıon	Corporation Trust Association	Other 🕨	<b>L</b> Year	of formation 193	30 <b>M</b>	State of legal domicile NJ
Pa	rt I	Sum	mary					
Governance	F	PURSUI	escribe the organization's mission of TOF ADVANCED LEARNING AND TOBER THAT THE FACILITIES	EXPLOR IN FIELDS OF PURE S				
<u>§</u>	2 0	Check th	nis box দ if the organization disco	ntinued its operations or dispose	d of more th	nan 25% of its	net as	sets
		M	of voting markers of the	hady (Dart VI line 4 - )		ı	a I	2.0
Activities &	1		of voting members of the governing of independent voting members of tl				3 4	28
星	1		mber of individuals employed in cale				5	443
ACI	1		mber of volunteers (estimate if nece			ŀ	6	69
	1		related business revenue from Part				7a	-365,699
	ь	Net unre	lated business taxable income from	Form 990-T, line 34			7b	-866,500
						Prior Year		Current Year
a.	8		butions and grants (Part VIII, line :			26,660,9	_	36,564,851
Rayenue	9		im service revenue (Part VIII, line			5,894,1	_	6,688,932
Hoy.	10		ment income (Part VIII, column (A		·	12,125,5	_	-187,462
_	11 12		revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m		.ne		0	0
	12		· · · · · · · · · · · · ·			44,680,6	58	43,066,321
	13		s and sımılar amounts paıd (Part IX,			11,288,2	45	12,074,169
	14		ts paid to or for members (Part IX, o				0	0
χĝ	15	Saları 5–10)	es, other compensation, employee b	enefits (Part IX, column (A), lines	5	27,545,5	95	33,083,007
Expenses	16a		sional fundraising fees (Part IX, col	umn (A), line 11e)	. —	· · ·	0	0
¥ ÷	ь		ndraising expenses (Part IX, column (D), lir					
ш	17		expenses (Part IX, column (A), line			22,759,4	78	22,538,564
	18	Total	expenses Add lines 13–17 (must e	qual Part IX, column (A), line 25)		61,593,3	18	67,695,740
	19	Reven	ue less expenses Subtract line 18	from line 12	_	-16,912,6	_	-24,629,419
Not Assets or Fund Balances					Begi	nning of Currer Year	nt	End of Year
Set afait	20	Total	assets (Part X, line 16)			794,384,6	33	858,110,199
A AS	21		liabilities (Part X, line 26)			100,433,0	_	98,214,071
20	22		sets or fund balances Subtract line			693,951,5	_	759,896,128
Pa	rt II	Sign	ature Block		•			
my k	nowled arer ha	dge and is any k	perjury, I declare that I have exami belief, it is true, correct, and comple nowledge ** ature of officer					
Her			MASTEN ASSC DIRECTOR FINANCE AND A	DMIN				
		<u> </u>	or print name and title		D-1-		DTT:	
D	_1		rint/Type preparer's name P CPMG LLP	reparer's signature	Date	Check If self-employed	PTIN P00634	378
Paid			irm's name 🕨 KPMG LLP			Firm's EIN 🟲		
	pare Onl		irm's address 🟲 345 Park Avenue			Phone no (608)	734-82	09
USE	. UIII	IV I				1 ' ' '		

New York, NY 101540102

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

✓ Yes No

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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		No
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? <i>If "Yes," complete Schedule D, Part I</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
LO	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	
1	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	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	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	
.2a	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
.3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🕏	13	Yes	
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
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	
.5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
<b>.6</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
. <b>7</b>	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		No
8.	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		No
L <b>9</b>	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		No
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 or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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	Yes	
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? <i>If "Yes," complete Schedule J.</i>	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 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		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	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, complete Schedule L, Part II	26	Yes	
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? <i>If "Yes," complete Schedule L, Part III</i>	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 IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
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? <i>If "Yes," complete Schedule N, Part II</i>	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 "Yes," complete Schedule R, Part I</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	Yes	
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

G I	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	.) No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   222		res	INO
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
a	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			
)	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	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
)	If "Yes," enter the name of the foreign country ▶BD , BF , CA , CJ , VI			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	74 Test, indicate the number of forms 5252 med during the year 1.1.1.1.			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N o
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	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	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	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 )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
)	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Princeton, NJ 08540 (609) 734-8208

Se	ection A. Governing Body and Management			
		$\longrightarrow$	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	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		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	-		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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	-	100	No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R		ıe Cod	
	The section by equeete information about pointing into the short in the section by the sectio		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	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			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Yes	
	ın 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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	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)			
	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		No
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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►AL , AK , AR , CA , CT , DC , FL , GA , H MA , MI , MN , MS , NH , NM , NY , NC , SC , TN , UT , VA , WV , WI			
18	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 MARY J MAZZA Einstein Drive	ie orga	nızatıor	ı

Form 990	(2013	
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#### 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 . . . . . . . . . . . . . . . . .

## 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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t	person is both an officer from the from related c and a director/trustee) organization (W- organizations (W-					(F) Estima amount o compens from t	ated fother sation the				
		for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC		organızatı relatı organıza	ed
1b	Sub-Total			•				Þ						
C	Total from continuation sheet	s to Part VII, S	ection A	١.		•	•	•		2 550 605				F26 FF0
d 	Total (add lines 1b and 1c).  Total number of individuals (in	cluding but not	limited:	• • •	•	licto	d abov	ابد ( ه	ho rocowa	3,558,605		0		526,550
2	\$100,000 of reportable compe	_					u abov	e) w	no receive	a more ti	ıdıı			
													Yes	No
3	Did the organization list any <b>fo</b> on line 1a? <i>If "Yes," complete S</i>								, or highes	t 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									anızatıon • • •	or individual for	<u> </u>		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your fiv	e highest comp												
	compensation from the organiz	ation Report co	mpens	ation	for	the c	alenda	arye	ar ending	with or wi	thin the organizat	tion's	tax year (C	
	N	ame and husiness:	address							Des	crintion of services		Compe	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
C Raymond Sons Inc, 2124 Kimberton Road Kimberton PA 19442	General Contractor	3,615,331
W S Cumby Inc, 938 Lincoln Avenue Springfield PA 19064	General Contractor	960,510
HMR Architects, 821 Alexander Road Suite 115 Princeton NJ 08540	Architect	459,057
Lamanna Electric, PO Box 9348 Trenton NJ 08650	General Contractor	435,198
Meco Constructors Inc, 684 Dunksferry Road Bensalem PA 19020	General Contractor	433,894
2. Total number of independent contractors (including but not limited to these listed above)	who received more than	_

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 ►14

Part V	<b># # 4</b>	Statement o	<b>f Revenue</b> ule O contains a respor	ise or note to any li	ne in this Part \/III	_		
				.se of note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ω £	1a	Federated cam	paigns 1a					
ons, Gifts, Grants Similar Amounts	b	Membership du	es <b>1b</b>					
5 E	c	Fundraising eve	ents <b>1c</b>					
Giffs, illar Ar	d	Related organiz	rations 1d					
i5 [a	e	Government grants		6,340,907				
Sir				30,223,944				
tributic Other	f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above					
를 풍	g	Noncash contribute 1a-1f \$	ons included in lines	1,319,583				
Contributions, and Other Sim	h	Total. Add lines	s 1 a - 1 f	🗼	36,564,851			
				Business Code				
Program Serwce Revenue	2a	Auxiliary Services		532000	6,688,932	4,722,449		1,966,483
94. 184.	b	<u></u>			, ,	, ,		, ,
e F	c	-	_					
e.	d							
ري د	e							
ੂ ਬ	f	All other progra	m service revenue					
ጅ	g	Total. Add lines	s 2a – 2f		6,688,932			
	3		ome (including dividen				365,600	171 122
			ar amounts)	<b>+</b>	-194,576 0		-365,699	171,123
	4 5				0			
	,	Royaldes	(ı) Real	(II) Personal				
	6a	Gross rents	( )	(**)				
	b	Less rental expenses						
	c	Rental income	0	0				
	d	or (loss) Net rental inco	me or (loss)		0			
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	350,126,682	452,929				
	b	Less cost or other basis and sales expenses	350,126,659	445,838				
	c	Gain or (loss)	23	7,091				
	d		s)		7,114			7,114
venue	8a	Gross income f events (not inc \$ of contributions						
Other Revenue	ь	See Part IV, lin	e 18 a penses b					
₹	c		(loss) from fundraising	events 🛌	0			
	9a	Gross income f See Part IV, lin	rom gaming activities le 19 a					
	b	Less direct ex	penses b					
			' (loss) from gamıng actı	vities	0			
	10a	Gross sales of returns and allo						
	b	Less cost of g	oods sold <b>b</b>					
	c		(loss) from sales of inve	-	0			
		Miscellaneous	s Revenue	Business Code				
	11a		_					
	b		_					
	c	A.II						
	d		ue	<u> </u>				
	e		s 11a-11d	•	0			
	12	Total revenue.	See Instructions .	🕨	43,066,321	4,722,449	-365,699	2,144,720

# Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must comp	lete column (A )	
	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	( <b>A</b> ) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	6,058	6,058		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	10,475,988	10,475,988		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	1,592,123	1,592,123		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,205,583	130,000	744,250	331,333
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	18,236,013	10,330,979	6,973,889	931,145
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,318,423	1,657,647		92,890
9	Other employee benefits	10,084,917	7,210,603	2,470,248	404,066
10	Payroll taxes	1,238,071	885,207	303,259	49,605
11	Fees for services (non-employees)				
а	Management	0			_
ь	Legal	293,738		293,738	_
С	Accounting	239,350		239,350	
d	Lobbying	, 0		, i	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	2,147,159		2,147,159	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,727,394	836,634	871,518	19,242
12	Advertising and promotion	0	333,33	0.1,010	
13	Office expenses	1,081,208	271,755	782,418	27,035
14	Information technology	1,002,195	425,474	559,182	17,539
15	Royalties	0	.20,	333,132	11,7003
16	Occupancy	2,239,724	2,019,783	219,941	
17	Travel	2,471,462	2,246,594	163,917	60,951
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	2,210,001	103,517	00,531
19	Conferences, conventions, and meetings	2,281,967	1,334,859	868,390	78,718
20	Interest	1,983,130	1,931,340	· ·	-,:-3
21	Payments to affiliates	0	,,0	12,110	
22	Depreciation, depletion, and amortization	5,125,560	4,839,407	286,153	
23	Insurance	344,728	, ,	344,728	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	,		,	
а	Books & Periodicals	715,888	700,259	14,540	1,089
b	Recruiting	285,385	14,466	270,919	
С	Donor Relations	181,279		139,258	42,021
d	Fellows/Employee Welfare	227,496	140,195	87,036	265
e	All other expenses	190,901	51,102	78,469	61,330
25	Total functional expenses. Add lines 1 through 24e	67,695,740	47,100,473	18,478,038	2,117,229
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)		-		

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	55,125	1	67,881
	2	Savings and temporary cash investments	7,683,555	2	5,507,037
	3	Pledges and grants receivable, net	36,400,104	3	27,283,465
	4	Accounts receivable, net	245,308	4	349,016
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	4 440 000	_	252 252
<u>\$</u>	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			958,639
Se.			0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
_	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	784,471	9	1,215,110
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  161,924,208			
	b	Less accumulated depreciation	74,496,930	10c	82,274,435
	11	Investments—publicly traded securities	60,655,062	11	81,685,643
	12	Investments—other securities See Part IV, line 11	601,930,121	12	647,968,303
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	11,014,648	15	10,800,670
	16	Total assets. Add lines 1 through 15 (must equal line 34)	794,384,633	16	858,110,199
	17	Accounts payable and accrued expenses	7,875,194	17	7,846,617
	18	Grants payable	0	18	0
	19	Deferred revenue	5,316,308	19	3,745,905
	20	Tax-exempt bond liabilities	48,975,000	20	46,955,000
Ø.	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ge		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	289,954	23	219,614
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	37,976,611	25	39,446,935
	26	Total liabilities. Add lines 17 through 25	100,433,067	26	98,214,071
φ		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
ğ	27	Unrestricted net assets	364,283,394	27	384,445,157
<u> </u>	28	Temporarily restricted net assets	147,257,386	28	173,035,092
<u>е</u>	29	Permanently restricted net assets	182,410,786	29	202,415,879
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			<u> </u>
ō	30	Capital stock or trust principal, or current funds		30	
ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
<del>7</del> ₩	33	Total net assets or fund balances	693,951,566	33	759,896,128
Net	34	Total liabilities and net assets/fund balances	794,384,633	34	858,110,199
	J4	i oral naminues and net assets/idila naidiles	194,304,033	54	000, 110, 199

Par	Reconcilliation of Net Assets 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		43,0	066,321
2	Total expenses (must equal Part IX, column (A), line 25)	2		67,6	595,740
3	Revenue less expenses Subtract line 2 from line 1	3		-24,6	529,419
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			51,566
5	Net unrealized gains (losses) on investments	5			373,208
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		2	200,773
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		759,8	396,128
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line 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 review a separate basis, consolidated basis, or both	ved on			
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	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 separate basis, consolidated basis, or both	rate			
	▼ 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 th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	<u> </u>	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: **Software Version:** 

**EIN:** 21-0634988

Name: INSTITUTE FOR ADVANCED STUDY -

LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					_	(D)  Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 11130)	2,1033 11130)	related organizations
MARTIN L LEIBOWITZ	2 0					-				
PRESIDENT & VICE CHAIRMAN		Х		Х						
CHARLES SIMONYI	2 0	x		×						
CHAIRMAN  JAMES H SIMONS	2 0						$\vdash$			
VICE CHAIRMAN		Х		X						
BRIAN F WRUBLE	2 0	Х		х						
TREASURER NANCY S MACMILLAN	2.0			<u> </u>		-	┞			
SECRETARY	2 0	х		×						
VICTORIA B BJORKLUND	2 0	<u> </u>								
TRUSTEE		Х								
MARIO DRAGHI	1 0	X								
TRUSTEE ROGER W FERGUSON JR	2 0						$\vdash$			
TRUSTEE		Х								
E ROBERT FERNHOLZ	1 0	х								
TRUSTEE JOHN HENDRICKS							<u> </u>			
TRUSTEE	1 0	х								
PETER R KANN TRUSTEE	1 0	х								
BENEDICT H GROSS TRUSTEE	1 0	х								
SPIRO LATSIS TRUSTEE	1 0	х								
DAVID F MARQUARDT TRUSTEE	1 0	х								
NANCY B PERETSMAN TRUSTEE	2 0	х								
MARTIN REES TRUSTEE	1 0	х								
DAVID M RUBENSTEIN TRUSTEE	1 0	х								
JAMES J SCHIRO TRUSTEE	1 0	х								
TRUSTEE	2 0	х								
JEFFREY HARVEY TRUSTEE	1 0	х								
WILLIAM SEWELL TRUSTEE UNTIL 5/3/14	1 0	х								
HAROLD SHAPIRO TRUSTEE UNTIL 5/3/14	2 0	х								
PETER SVENNILSON TRUSTEE	1 0	х								
SHELBY WHITE TRUSTEE	1 0	х								
MARINA V N WHITMAN	1 0	х								
TRUSTEE UNTIL 5/3/14	J						<u> </u>			

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde				· · · ·	310	C3, I	.c,	employees, mg		
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (d nan oi n is b dired	ne bo oth a ctor/	ox, u an of trus	inless ficer tee)		(D)  Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former			related organizations
CYNTHIA CARROLL	1 0	l x								
TRUSTEE										
NEIL CHRISS	1 0	x								
TRUSTEE		^								
CARMELA FRANKLIN	1 0	x								
TRUSTEE		^								
SHIRLEY TILGHMAN	1 0	, , , , , , , , , , , , , , , , , , ,								
TRUSTEE FROM 5/3/14		×								
MARGARET LEVI	1 0	,,								
TRUSTEE FROM 5/3/14		×								
ROBBERT DIJKGRAAF	40 0	,		.,				FF0.101		72 524
TRUSTEE / DIRECTOR		X		Х				550,184	0	72,531
JOHN MASTEN	40 0			,,				247.022		F0.600
ASSC DIRECTOR FIN AND ADMIN				Х				347,033	0	58,690
GEORGE MICHAEL GEHRET	40 0									
ASSC DIR DEVLAND PUBLAFFAIRS				Х				273,962	0	57,373
ASHVIN CHHABRA	40 0									
CHIEF INVESTMENT OFFICER						X		726,252	0	44,471
AVICHAI WIGDERSON	40 0									
MATHEMATICS FACULTY						X		329,211	0	59,844
MATIAS ZALDARRIAGA	40 0									
NATURAL SCIENCE FACULTY						X		358,064	0	66,344
HELMUT HOFER	40 0									
MATHEMATICS FACULTY						X		328,916	0	55,349
SCOTT TREMAINE	40 0									
NATURAL SCIENCE FACULTY						X		328,865	0	56,849
PETER GODDARD	40 0	<del>                                     </del>								
FORMER DIRECTOR & PROFESSOR							Х	316,118	0	55,099
TORTIER DIRECTOR ATROLESSOR	J	<u> </u>	<u> </u>	L	1	I .	<u> </u>			<u> </u>

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OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

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

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

Open to Public **Inspection** 

Name of the organization	
NSTITUTE FOR ADVANCED STUDY -	
OUIS BAMBERGER & MRS FELIX FULD FOUNDATION	)

**Employer identification number** 

LOUIS	BAMBE	RGER & M	IRS FELIX FULL	O FOUNDATION					21-0634	988					
	τI			blic Charity Sta						instructions	).				
The o	rgani	zation is	not a priva	te foundation becaus	eitis (For	lines 1 throi	ugh 11, chec	k only one b	oox)						
1	$\sqcap$	A chur	ch, convent	ion of churches, or a	ssociation of	f churches d	lescribed in <b>s</b>	ection 170(	b)(1)(A)(i).	ı					
2	~	A scho	ol described	d in <b>section 170(b)(1</b>	L <b>)(A)(ii).</b> (At	tach Sched	ule E )								
3	$\sqcap$	A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon descr	ıbed ın <b>secti</b> o	on 170(b)(1	)(A)(iii).						
4	$\sqcap$	A medi	cal researc	h organization opera	ted ın conjun	iction with a	hospital des	cribed in <b>se</b>	ction 170(b)	(1)(A)(iii).	Enter the				
	_			ity, and state											
5	ı	_	<u>-</u>	erated for the benefi	_	e or universi	ity owned or o	pperated by	a governme	ntal unit desc	cribed in				
	_			( <b>A)(iv).</b> (Complete P											
6	<u></u>			local government o											
7	Γ	_		at normally receives			support from	n a governm	ental unit or	from the gen	eral public				
8	Г		described in <b>section 170(b)(1)(A)(vi).</b> (Complete Part II ) A community trust described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II )												
9	$\sqcap$	An org	An organization that normally receives (1) more than 331/3% 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 331/3% of													
				oss investment inco											
		acquire	ed by the ord	ganızatıon after June	30,1975 S	ee <b>section</b>	<b>509(a)(2).</b> (0	omplete Pa	rt III )	•					
10	$\Box$	•		ganized and operated	•			•	•	-					
11	Ţ.			ganized and operated							the purposes of				
	•			ly supported organiz											
				bes the type of supp											
				<b>b</b> Type II <b>c</b>											
e	Γ			ox, I certify that the											
				ion managers and ot	her than one	or more pul	blicly support	ed organiza	itions descri	bed in sectio	n 509(a)(1) or				
f			n 509(a)(2) organization	received a written de	etermination	from the IR	S that it is a	Tyne I Tyr	ne II or Typ	e III sunnort	ing organization				
•			this box	received a writter a	cccimmacion	inom the in	(S that it is a	1,7001,17	JC 11, 01 1 yp	c III Support					
g		Since A	August 17, 2	2006, has the organ	ızatıon accep	oted any gift	t or contribut	ion from any	of the						
			ng persons?												
				rectly or indirectly o			_	persons de	escribed in (i		Yes No				
		-		governing body of th		_	n?			110					
			*	er of a person descr							(ii)				
				lled entity of a perso						11g	(iii)				
h		Provide	e the follown	ng information about	the support	ed organızat	tion(s)								
(i	) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) Is	the	(vii) A mount of				
-	uppoi			organization	organizati		the organ	zation	organiza		monetary				
or	ganiz	ation		(described on	col (i) lıs		ın col (i)		col (i) or	·	support				
				lines 1 - 9 above	your gove		suppo	rt?	In the l	J S ?					
				or IRC section (see	docume	int'									
				instructions))	<u> </u>	1	<b>+</b> .,	T	+	T	$\dashv$				
					Yes	No	Yes	No	Yes	No	<del>                                     </del>				
											+				
Total									+						

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	( <b>b)</b> 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 15 is 33	8 1/3% or more	
	box and <b>stop here.</b> The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	<b>-2013.</b> If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	<b>-2012</b> . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	<b>▶</b> ┌
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		<b>▶</b> □
18	<b>Private foundation.</b> If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 ) ction B. Total Support						
	ndar year (or fiscal year beginning	( ) 2000	(1) 2010	( ) 2011	(1) 2012	( ) 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2012	(5,232	
9	in)  A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (	on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Performance (line 8, column ( 2 Schedule A, Paragraphic Performance)  colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or  13, column (f))  ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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

Part IV	<b>Supplemental Information.</b> 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									
Retu	ırn Reference	Explanation							
		Schodulo A / Form 000 o	000 E7) 201						

Schedule A (Form 990 or 990-EZ) 2013

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## DLN: 93493134021755

OMB No 1545-0047

**Supplemental Financial Statements** 

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

► 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. ▶ Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

INS	me of the organization TITUTE FOR ADVANCED STUDY -		Emp	loyer identifica	tion numbe	er
	IS BAMBERGER & MRS FELIX FULD FOUNDATION			0634988		
Pa	rt I Organizations Maintaining Donor Adv organization answered "Yes" to Form 990		unds	or Accounts	. Complet	te if the
	organization answered Tes to Form 990	(a) Donor advised funds		(b) Funds and o	other accou	ınts
1	Total number at end of year			(-, : ::::::::::::::::::::::::::::::::::		
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
1	Aggregate value at end of year					
5	Did the organization inform all donors and donor advise funds are the organization's property, subject to the or		or advi	sed	┌ Yes	
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?	onor advisors in writing that grant funds			┌ Yes	□ No
Pai	rt II Conservation Easements. Complete if	the organization answered "Yes" to	o Forn	n 990. Part IV		·
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 Complete lines 2 a through 2d if the organization held a	or education) Preservation of an Preservation of a c	ertifie	d historic struc	ture	
	easement on the last day of the tax year	Γ		Held at the	End of the	Voar
а	Total number of conservation easements	ľ	2a	Heid at the	Liid Oi Tile	Teal
b	Total acreage restricted by conservation easements	ŀ	2b			
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c			
d	Number of conservation easements included in (c) acc	` '				
u	historic structure listed in the National Register	quined diter 0/1//00/, and not on a	2d			
3	Number of conservation easements modified, transfer	red, released, extinguished, or terminate	d by th	ne organization	durıng	
	the tax year 🛌					
1	Number of states where property subject to conservat	on easement is located ►				
5	Does the organization have a written policy regarding		— dling of	violations, and	_	_
	enforcement of the conservation easements it holds?				☐ Yes	Г No
5	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easen	nents c	luring the year		
	A mount of expanses uncurred in monitoring increasing	, and anfaraing concernation accomments	. dum.n.	a the week		
7	Amount of expenses incurred in monitoring, inspecting  \$\blue\$	g, and emorcing conservation easements	s durini	y the year		
3	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 17	70(h)(4)(B)(ı)	☐ Yes	┌ No
9	In Part XIII, describe how the organization reports colbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financial				
ar	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Similar <i>i</i>	Assets.	
La	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or rese	arch in furthera		
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	ts held for public exhibition, education,				lic
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		
	(ii) Assets included in Form 990, Part X			<b>►</b> \$	2	03,508
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		r finan	cial gain, provid	de the	_
а	Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	ollections of Art	t, His	torio	al Trea	sures, or O	the	r Similar As	sets (contin	ued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, cl	neck a	ny of the	following that a	are a	significant use	of its	
а	Public exhibition		d	<u>~</u>	Loan or e	xchange progr	ams			
b	Scholarly research		е	$\Gamma$	Other					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expla	ain hov	w they	further th	ne organization	's ex	empt purpose ı	n	
5	During the year, did the organization solicit								-, F	
Dar	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrange								Yes 🔽	NO
	Part IV, line 9, or reported an ai						u i	c3 (0 101111 )	,	
1a	Is the organization an agent, trustee, custon included on Form 990, Part X?	dian or other interm	edıary	forco	ontributior	ns or other ass	ets r		Yes	No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	wing ta	able	_				
						-	_	An	nount	
C	Beginning balance						1c			
d	Additions during the year					-	1d			
e •	Distributions during the year					-	1e			—
f	Ending balance					L	1f			
2a	Did the organization include an amount on F	orm 990, Part X, lin	ie 21?	'					「Yes 「	No —
b	If "Yes," explain the arrangement in Part XI					-			<u> '</u>	
Pa	rt V Endowment Funds. Complete	If the organizatio		were Prior ye		to Form 990, :)Two years back	_		(e)Four years I	hack
1a	Beginning of year balance	682,549,779	(5)		75,875	586,578,150	<del></del>	551,269,546	513,69	
ь	Contributions	21,495,122		10,5	36,512	75,553,975		7,927,706	3,06	7,916
c	Net investment earnings, gains, and losses	88,037,490		63,9	55,315	11,018,004		60,869,634	63,11	.1,223
d	Grants or scholarships									
e	Other expenditures for facilities and programs	50,823,171		28,2	17,923	36,874,254		33,488,736	28,60	6,894
f	Administrative expenses	741,259,220		692 5	49,779	636,275,875		586,578,150	551,26	0 546
g	End of year balance	, ,		-				380,378,130	331,20	9,346
2	Provide the estimated percentage of the cui	rent year end balan 49 430 %	ce (lır	ne 1g,	column (a	i)) held as				
a	Board designated or quasi-endowment	49 430 %								
Ь	Permanent endowment ► 27 300 %									
С	Temporarily restricted endowment ► 23 The percentages in lines 2a, 2b, and 2c sho	270 % uld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organiz	zatıon	that a	re held an	d administere	d for	the	<u>, I .</u>	_
	organization by  (i) unrelated organizations							3a(	i) Yes No	
	(ii) related organizations			·				3a(		
b	If "Yes" to 3a(II), are the related organization		d on S	ched	ule R? .			3Ł	<del></del>	_
4	Describe in Part XIII the intended uses of t	he organızatıon's er	ndowm	ent fu	nds					
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		the o	rganı	zatıon aı	nswered 'Yes	' to	Form 990, Pa	rt IV, line	
	Description of property				Cost or othe (investmen			(c) Accumulated depreciation	(d) Book va	alue
1a	Land					377	7,470		377	7,470
b	Buildings					122,142	2,553	48,621,88	5 73,520	0,668
c	Leasehold improvements									
d	Equipment					32,485	5,104	29,849,75	8 2,635	5,346
	Other					6,919	9,081	1,178,13	_	0,951
Tota	I. Add lines 1a through 1e (Column (d) must	equal Form 990, Part	X, colu	ımn (E	3), line 10(	c).)	•	<b>≻</b>	82,274	
								Schedule D	(Form 990)	2013

	plete 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	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) LIMITED PARTNERSHIPS	152,438,300	F
(B) HEDGE AND OFFSHORE FUNDS	495,530,003	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	647,968,303	
Part VIII Investments—Program Related. Co.	/ /	
See Form 990, Part X, line 13.	1	
(a) Description of investment	(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 )		
Part IX Other Assets. Complete if the organization  (a) Descrip		, Part IV, line 11d See Form 990, Part X, line 15  (b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. Complete if the organ		
Form 990, Part X, line 25.	nzation answered Tes to	o romi 550, raitiv, interite of 111. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
SPLIT-INTEREST AGREEMENTS	2,347,588	
POSTRETIREMENT BENEFIT OBLIG ASSET RETIREMENT OBLIGATION	15,086,961 1,035,257	
BOND SWAP LIABILITY	4,275,176	
TAXABLE BOND ISSUE AND UNAMORT	16,701,953	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	39,446,935	
Total (column (2) mast equal rollin 550, rate A, col (b) line 25)	39,440,935	

Par		evenue per Audited Financial Sta vered 'Yes' to Form 990, Part IV, line		nts With Revenue	per F	Return Complete If
1		r support per audited financial statements			1	131,493,143
2		t not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a	90,373,208		
b	Donated services and use of fa	acılıtıes	2b			
С	Recoveries of prior year grants	5	2c		1	
d	Other (Describe in Part XIII )		2d	200,773	1	
e	Add lines <b>2a</b> through <b>2d</b> .		-		2e	90,573,981
3	Subtract line <b>2e</b> from line <b>1</b> .				3	40,919,162
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a	2,147,159		
b	Other (Describe in Part XIII )		4b			
c	Add lines <b>4a</b> and <b>4b</b>		·		4c	2,147,159
5	Total revenue Add lines <b>3</b> and	<b>4c.</b> (This must equal Form 990, Part I, line	e 12 )		5	43,066,321
Par		xpenses per Audited Financial St swered 'Yes' to Form 990, Part IV, lın			s pei	r <b>Return.</b> Complete
1		raudited financial statements			1	65,548,581
2	Amounts included on line 1 bu	t not on Form 990, Part IX, line 25				
а	Donated services and use of fa	acılıtıes	2a			
b	Prior year adjustments		2b		1	
C	Otherlosses		2c			
d	Other (Describe in Part XIII )		2d			
e	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	65,548,581
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	.   4a	2,147,159		
b	Other (Describe in Part XIII )		4b			
c	Add lines <b>4a</b> and <b>4b</b>				4c	2,147,159
5	Total expenses Add lines <b>3</b> ar	nd <b>4c.</b> (This must equal Form 990, Part I, li	ne 18 )		5	67,695,740
Par	XIII Supplemental Inf	ormation				•
Part		Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d an				ide any additional
	Return Reference	Explanation				
	DULE D, PART III, LINE 1A - BOOK COLLECTION	THE INSTITUTE HOLDS A COLLECTIO RESEARCH, IN ACCORDANCE WITH TH BOOK COLLECTION IS INCLUDED IN T	HE MIS	SION STATEMENT A V	/ALU/	ATION OF THE RARE
	DULE D, PART V - WMENT FUND	THE INSTITUTE'S ENDOWMENT FUNDS	S PRO\	/IDE ONGOING SUPPO	RT F	OR ITS EXEMPT
	DULE D, PART X - RTAIN TAX POSITIONS	THE INSTITUTE IS EXEMPT FROM FED (3) OF THE INTERNAL REVENUE CODE REVENUE SERVICE PUBLICATION 78 CHARITY UNDER SECTION 509(A) OF COULD BE DEEMED UNRELATED BUSILIABILITY MANAGEMENT REVIEWS TO LIABILITIES USING A THRESHOLD OF	THE II THE II THE C NESS I RANSA	CODE) AND IS LISTED NSTITUTE HAS BEEN C ODE THERE ARE CERT NCOME AND WOULD R CTIONS TO ESTIMATI	IN THELASS	HE INTERNAL SIFIED AS A PUBLIC FRANSACTIONS THAT T IN A TAX ENTIAL TAX

ESTIMATION THAT THERE ARE NO MATERIAL TAX LIABILITIES THAT NEED TO BE

CHANGE IN FAIR VALUE OF BOND SWAP LIABILITY \$200,773

RECORDED

SCHEDULE D, PART XI, LINE 2D

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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As Filed Data -

DLN: 93493134021755

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

**SCHEDULE E** 

(Form 990 or 990-EZ)

**Schools** 

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization INSTITUTE FOR ADVANCED STUDY -LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION **Employer identification number** 

010	21-0634988			
Pa	rtI		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4 a	Does the organization maintain the following?  Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
c	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
Ŀ	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	I Scholarships or other financial assistance?	5d		No
	Educational policies?	5e		No
	Use of facilities?  Athletic programs?	5f		No
Ī	Other extracurricular activities?	5 <u>g</u> 5h		No
r	If you answered "Yes" to any of the above, please explain If you need more space, use Part II	<u> </u>		No_
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II  Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	ا عم ۷	

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also complete this part to provide any other additional information (see instructions)

Return Reference	Explanation			
SCH E, LINE 3 - NONDISCRIMINATORY POLICY	ADVERTISEMENTS ARE PUBLISHED IN EDUCATIONAL CHRONICLES AND JOURNALS NOTICES ARE ALSO POSTED AT COLLEGES AND UNIVERSITIES			
SCHEDULE E, LINE 6A FINANCIAL AID OR ASSISTANCE FROM GOVERNMENTAL AGENCY	GRANTS ARE RECEIVED FROM VARIOUS GOVERNMENTAL AGENCIES INCLUDING THE DEPARTMENT OF ENERGY, THE NATIONAL AERONAUTICS AND SPACE ADMINISTRATION, THE NATIONAL SCIENCE FOUNDATION AND THE NATIONAL ENDOWMENT FOR THE HUMANITIES			

Schedule E (Form 990 or 990-EZ) 2013

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As Filed Data -

DLN: 93493134021755

OMB No 1545-0047

Statement of Activities Outside the United States

2013

Department of the Treasury
Internal Revenue Service

SCHEDULE F

(Form 990)

► Complete if the organization answered "Yes" to 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.

Open to Public Inspection

	e of the organization				Employer ident	ification number
	TITUTE FOR ADVANCED STUDY IS BAMBERGER & MRS FELIX FU		O N		21-0634988	
Pa	General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	ation answered
1	<b>For grantmakers.</b> Does the o other assistance, the grantee	_			_	nd
	to award the grants or assista		_	•		✓ Yes
2	For grantmakers. Describe in assistance outside the United Activites per Region (The follow	l States.				ts and other
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1	) See Add'l Data			. eg.e,		
( 2	)					
( 3	)					
( 4	)					
( 5	)					
	Sub-total					459,279,051
ı	Total from continuation sheets to Part I					
	c <b>Totals</b> (add lines 3a and 3b)					459,279,051

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

(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	( <b>g)</b> A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
( 2)								
( 3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
( 12)								
( 13)								
( 14)								
( 15)								
( 16)								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized a
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities . . . . . . . . . . . . .

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 addit	ional space is ne	eeded.				
(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	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
( 2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
( 12)							
(13)							
(14)							
( 15)							
( 16)							
( 17)							
( 18)							
	1			l .			

## 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)	দ	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	।ন	Νo
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)	[৵	Yes	Γ	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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	্ব	Yes	Г	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)	굣	Yes	Г	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).	Г	Yes	굣	No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page 5

## Part V Supplemental Information

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).

## 990 Schedule F. Sunnlemental Information

Return Reference	Explanation
SCHEDULE F, PART I	The Institute for Advanced Study's grants are awarded by the Science Initiative Group (SIG), an IAS-based team dedicated to fostering science in developing countries. Since 2008, SIG's attention has been devoted primarily to development and implementation of the Carnegi e-IAS Regional Initiative in Science and Education (RISE). RISE aims to strengthen higher education in Sub-Saharan Africa by increasing the population of qualified faculty teaching in Africa's universities. RISE prepares PhD- and MSc-level scientists and engineers throu gh university-based research and training networks in selected disciplines. Its primary emphases are on preparing new faculty to teach in African universities and on upgrading the qualifications of current faculty. RISE networks provide comprehensive graduate training programs, where students and faculty seeking advanced degrees can take advantage of the complementary instruction and research opportunities available at each institution within the network. Networks also enable researchers from multiple universities to use specialized scientific instrumentation that may be available at only one of the sites, or to pool resou round the Carnegie Corporation of New York RISE networks were selected through a competitive process. Selection criteria included scientific merit, training capacity, research activities, evidence of institutional support, added value of the network versus separate support to individual institutions, and potential for sustainability. An especially important crite rion was a strategy for retaining at universities in the region faculty members who have received their training through RISE. Detailed application materials were submitted as part of the selection process, as described on the RISE website at http://sig ias edu/rise. Grantees are required to submit narrative and detailed financial reports twice yearly. Signe diagreements with the grantees provide that audits may be conducted if there is any reason to suspect that funds are not being used properly.

# 990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I	THE INVESTMENT EXPENDITURES REPORTED IN SCHEDULE F, PART I, LINE 3 COLUMN (F) IS THE MARKE T VALUE AS OF JUNE 30, 2014 AS THIS IS HOW THE INVESTMENTS ARE ACCOUNTED FOR ON THE INSTITUTE'S AUDITED FINANCIAL STATEMENTS

## **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 21-0634988

Name: INSTITUTE FOR ADVANCED STUDY -

LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION

## Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
Russia and the Newly Independent States			Program Services	SCHOLAR COLLABORATION	4,965
East Asia and the Pacific			Program Services	SCHOLAR COLLABORATION	27,713
Europe (Including Iceland and Greenland)			Program Services	SCHOLAR COLLABORATION	274,502

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region	
Middle East and North Africa			Program Services	SCHOLAR COLLABORATION	6,730	
North America			Program Services	SCHOLAR COLLABORATION	14,138	
South America			Program Services	SCHOLAR COLLABORATION	3,100	

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
South Asia			Program Services	SCHOLAR COLLABORATION	349
Sub-Saharan Africa			Program Services	SCHOLAR COLLABORATION	56,323
Europe (Including Iceland and Greenland)			Grantmakıng		67,078

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
Sub-Saharan Africa			Grantmakıng		1,525,045
Central America and the Caribbean			Investments		441,111,845
North America			Investments		16,187,263

Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States												
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)					
		Europe (Including Iceland and Greenland)	STIPEND	55,010	WIRE		N/A	N/A					
		Europe (Including Iceland and Greenland)	STIPEND	12,068	WIRE		N/A	N/A					
		Sub-Saharan Africa	EDUCATIONAL	225,035	WIRE		N/A	N/A					
		Sub-Saharan Africa	EDUCATIONAL	400,000	WIRE		N/A	N/A					

Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States												
(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 non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)					
		Sub-Saharan Africa	EDUCATIONAL	200,000	WIRE		N/A	N/A					
		Sub-Saharan Afrıca	EDUCATIONAL	300,000	WIRE		N/A	N/A					
		Sub-Saharan Africa	EDUCATIONAL	400,010	WIRE		N/A	N/A					

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2013

OMB No 1545-0047

Schedule I (Form 990)

## **Grants and Other Assistance to Organizations,** Governments and Individuals in the United States

Department of the Treasury Internal Revenue Service		_					
Name of the organization		· · · · · · · · · · · · · · · · · · ·				Employer identification	on number
NSTITUTE FOR ADVANCED STU OUIS BAMBERGER & MRS FELIX						21-0634988	
		l Assistance				•	
the selection criteria used to	Attach to Form 990 Service  Information about Schedule I (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a> .  Employer identification number of the grants or assistance, the grantees' eligibility for the grants or assistance, and action criteria used to award the grants or assistance?						
							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	section		cash	valuation (book, FMV, appraisal,	,	
2 Enter total number of section	501(c)(3) and govern	 ment organizations list	ed in the line 1 table .			<b>.</b>	
3 Enter total number of other or	ganızatıons lısted ın th	e line 1 table				<b>.</b> ▶	

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Fellowship Grants to Members	187	10,475,988		N/A	N/A

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
SCHEDULE I, PART I	EACH YEAR, THE INSTITUTE FOR ADVANCED STUDY SELECTS APPROXIMATELY 190 MEMBERS FROM AN AVERAGE OF MORE THAN 1,500
	APPLICANTS MEMBERS ARE SELECTED BY THE FACULTY OF EACH SCHOOL, AND COME TO THE INSTITUTE FOR PERIODS AS SHORT AS
	ONE TERM OR AS LONG AS SEVERAL YEARS YOUNG SCHOLARS AND APPLICANTS FROM NON-TRADITIONAL BACKGROUNDS WHO HAVE
	OUTSTANDING PROMISE ARE CONSIDERED, AS ARE SENIOR SCHOLARS WHOSE REPUTATIONS ARE ALREADY WELL ESTABLISHED THE
	MAJOR CONSIDERATION IN THE APPOINTMENT PROCESS IS THE EXPECTATION THAT EACH MEMBER'S PERIOD OF RESIDENCE AT THE
	INSTITUTE WILL RESULT IN WORK OF SIGNIFICANCE AND ORIGINALITY MANY MEMBERS PURSUE RESEARCH RELATED TO SPECIFIC
	INTERESTS OF ONE OR MORE OF THE FACULTY IN OTHER INSTANCES, THE RESEARCH OF MEMBERS IS IN AREAS NOT CURRENTLY
	REPRESENTED BY A MEMBER OF THE FACULTY APPLICATIONS MUST BE SUBMITTED DURING THE ACADEMIC YEAR PRECEEDING THE
	YEAR IN MEMBERSHIP APPLICATION MATERIALS AND GUIDELINES ARE AVAILABLE FROM EACH OF THE FOUR SCHOOLS ON OUR WEB
	SITE SCHOOL OF HISTORICAL STUDIES, SCHOOL OF MATHEMATICS, SCHOOL OF NATURAL SCIENCES, AND SCHOOL OF SOCIAL
	SCIENCE OUR WEB SITE ALSO CONTAINS INFORMATION ON OUR SPECIAL PROGRAMS INCLUDING PROGRAM FOR WOMEN AND
	MATHEMATICS, INSTITUTE OF ADVANCED STUDY/PARK CITY MATHEMATICS INSTITUTE, AND PROSPECTS IN THEORETICAL PHYSICS

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

**Compensation Information** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization INSTITUTE FOR ADVANCED STUDY -LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION **Employer identification number** 

21-0634988

Pa	<b>TEL</b> Questions Regarding Compensation	n						
					Yes	No		
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II.							
	First-class or charter travel	<u>  -                                   </u>	Housing allowance or residence for personal use					
	▼ Travel for companions	Γ	Payments for business use of personal residence					
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees					
	Discretionary spending account	<u>~</u>	Personal services (e g , maid, chauffeur, chef)					
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses do			1b	Yes			
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			_	Yes			
	an octors, trastically, and octo, and		meeter, regarding the reamb effected in the 14	2	res			
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all ti used by a related organization to establish compens	hat appl	•					
	▼ Compensation committee	Г	Written employment contract					
	✓ Independent compensation consultant	굣	Compensation survey or study					
	Form 990 of other organizations	Sultant  Compensation survey or study  Approval by the board or compensation committee  d in Form 990, Part VII, Section A, line 1a with respect to the filing organization						
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization					
а	Receive a severance payment or change-of-control	paymen	nt?	4a		Νo		
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo		
C	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo		
	Only 501(c)(3) and 501(c)(4) organizations only me	ust comp	plete lines 5-9.					
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of							
а	The organization?			5a		No		
b	Any related organization?			5b		No		
	If "Yes," to line 5a or 5b, describe in Part III							
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any					
а	The organization?			6a		No		
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 payments not described in lines 5 and 6? If "Yes,"			7	Yes			
8	Were any amounts reported in Form 990, Part VII,							
	subject to the initial contract exception described in							
	ın Part III			8		Νo		
9	If "Yes" to line 8, did the organization also follow th section 53 $4958-6(c)$ ?	e rebutta	able presumption 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)(I)-(III) 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>(B)</b> Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)ROBBERT DIJKGRAAF TRUSTEE / DIRECTOR	(i) (ii)	505,442 0	0	44,742 0	35,821 0	34,308 0	620,313	0
(2)JOHN MASTEN ASSC DIRECTOR FIN AND ADMIN	(i) (ii)	341,671 0	0	5,362 0	35,821 0	20,734 0	<b>4</b> 03,588 0	0
(3)GEORGE MICHAEL GEHRET ASSC DIR DEVL AND PUBL AFFAIRS	(i) (ii)	267,546 0	0	6, <b>41</b> 6 0	35,821 0	19,734 0	329,517 0	0 0
(4)ASHVIN CHHABRA CHIEF INVESTMENT OFFICER	(i) (ii)	225,853 0	500,000 0	399 0	31,600 0	11,815 0	769,667 0	0
(5)AVICHAI WIGDERSON MATHEMATICS FACULTY	(i) (ii)	327,421 0	0	1,790 0	35,821 0	23,729	388,761 0	0
(6)MATIAS ZALDARRIAGA NATURAL SCIENCE FACULTY	(i) (ii)	354,588 0	0	3, <b>4</b> 76 0	35,821 0	25,229 0	419,114 0	0
(7)HELMUT HOFER MATHEMATICS FACULTY	(i) (ii)	327,213 0	0	1,703 0	35,821 0	19,234 0	383,971 0	0
(8)SCOTT TREMAINE NATURAL SCIENCE FACULTY	(i) (ii)	325,713 0	0	3,152 0	35,821 0	20,734 0	385,420 0	0
(9)PETER GODDARD FORMER DIRECTOR & PROFESSOR	(i) (ii)	308,796 0	0	7,322 0	35,821 0	18,984 0	370,923 0	0

#### Part III Supplemental Information

 $Provide \ the \ information, explanation, or \ descriptions \ required \ for \ Part \ I, \ lines \ 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and \ for \ Part \ II$ 

Also complete this part for any additional information

The state of the s											
Return Reference	Explanation										
HOUSING	THE INSTITUTE OWNS A RESIDENCE IMMEDIATELY ADJACENT TO THE CAMPUS WHERE IT REQUIRES THE DIRECTOR TO RESIDE IAS PROVIDES MAINTENANCE AND HOUSE-KEEPING SERVICES FOR THE PROPERTY IAS TREATS SUCH HOUSING AS NON-TAXABLE HOUSING PROVIDED FOR THE CONVENIENCE OF THE EMPLOYER UNDER INTERNAL REVENUE CODE SECTION 119 THE VALUE OF THE HOUSING IS INCLUDED IN THE DIRECTOR'S NON-TAXABLE BENEFITS IN COLUMN D OF SCHEDULE J THE DIRECTOR ALSO RECEIVES SOME PERSONAL AND COMPANION TRAVEL, AN AUTOMOBILE, AND PROFESSIONAL FINANCIAL PLANNING SERVICES, ALL OF WHICH ARE TREATED AS TAXABLE AND INCLUDED IN HIS FORM W-2 AMOUNTS ABOVE										
	TWO INVESTMENT OFFICE EMPLOYEES RECEIVE INCENTIVE COMPENSATION BASED ON THEIR INDIVIDUAL JOB PERFORMANCE AND ON THE RELATIVE PERFORMANCE OF IAS' ENDOWMENT COMPARED WITH MARKET INDICES AND MARKET COMPARISON GROUPS										

Schedule J (Form 990) 2013

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 21-0634988

Name: INSTITUTE FOR ADVANCED STUDY -

LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
ROBBERT DIJKGRAAF TRUSTEE / DIRECTOR	(I) (II)		0	44,742	35,821 0	34,308	620,313	0
JOHN MASTEN ASSC DIRECTOR FIN AND ADMIN	(I) (II)		0	5,362	35,821 0	20,734	403,588	0
GEORGE MICHAEL GEHRET ASSC DIR DEVL AND PUBL AFFAIRS	(I) (II)		0	6,416	35,821 0	. 19,734 0 0	329,517 0 0	0
ASHVIN CHHABRA CHIEF INVESTMENT OFFICER	(I) (II)		500,000	399	31,600 0	11,815	769,667	0
AVICHAI WIGDERSON MATHEMATICS FACULTY	(I) (II)		0	1,790	35,821 0	23,729	388,761	0
MATIAS ZALDARRIAGA NATURAL SCIENCE FACULTY	(I) (II)		0	3,476	35,821 0	. 25,229	419,114	0
HELMUT HOFER MATHEMATICS FACULTY	(I) (II)		0	1,703	35,821 0	19,234	383,971	0
SCOTT TREMAINE NATURAL SCIENCE FACULTY	(I) (II)		0	3,152	35,821 0	20,734	385,420	0 0
PETER GODDARD FORMER DIRECTOR & PROFESSOR	(I) (II)		0	7,322	35,821 0	18,984	370,923	0

DLN: 93493134021755

2013

OMB No 1545-0047

Schedule K (Form 990)

**Supplemental Information on Tax Exempt Bonds** ▶ 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. ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection** 

Internal Revenue Service Name of the organization

Part I Bond Issues

Department of the Treasury

INSTITUTE FOR ADVANCED STUDY -

LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION

**Employer identification number** 

21-0634988

(a) Issuer name		(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		` ` `	Pool ncing
							Yes	No	Yes	No	Yes	No
A	NJ EDU FAC AUTH IAS ISSUE 2006 SERIES B	22-1829511	64605LQ92	07-19-2006	29,600,000	ADVANCE REFUNDING - SEE PART V		Х		Х		Х
В	NJ EDU FAC AUTH IAS ISSUE 2006 SERIES C	22-1829511	64605L7Q5	03-15-2007	20,000,000	CAPITAL IMPROVEMENTS		Х		Х		X
С	NJ EDU FAC AUTH IAS ISSUE 2008 SERIES C	22-1829511	646065PY2	04-17-2008	11,818,513	CURRENT REFUNDING - SEE PART V		×		Х		Х

Pa	rt III Proceeds					
		A	В	С	D	
1	A mount of bonds retired	4,100,000	3,000,000	7,363,513		
2	A mount of bonds legally defeased	0	0	0		
3	Total proceeds of issue	25,500,000	17,000,000	4,455,000		
4	Gross proceeds in reserve funds	0	0	0		
5	Capitalized interest from proceeds	0	0	0		
6	Proceeds in refunding escrows	0	0	0		
7	Issuance costs from proceeds	473,908	266,350	236,370		
8	Credit enhancement from proceeds	0	0	0		
9	Working capital expenditures from proceeds	0	0	0		
10	Capital expenditures from proceeds	0	20,548,393	0		
11	Other spent proceeds	0	0	0		
12	Other unspent proceeds	0	0	0		
13	Year of substantial completion					

	Yes	No	Yes	No	Yes	No	Yes	No
Vere the bonds issued as part of a current refunding issue?		Х		Х	Х			
Vere the bonds issued as part of an advance refunding issue?	Х			Х		Х		
las the final allocation of proceeds been made?	Х		Х		Х			
Does the organization maintain adequate books and records to support the final illocation of proceeds?	Х		Х		Х			
1	/ere the bonds issued as part of an advance refunding issue? as the final allocation of proceeds been made? sees the organization maintain adequate books and records to support the final	/ere the bonds issued as part of a current refunding issue?  /ere the bonds issued as part of an advance refunding issue?  x as the final allocation of proceeds been made?  x eves the organization maintain adequate books and records to support the final	/ere the bonds issued as part of a current refunding issue?  /ere the bonds issued as part of an advance refunding issue?  x  as the final allocation of proceeds been made?  yees the organization maintain adequate books and records to support the final	/ere the bonds issued as part of a current refunding issue?  /ere the bonds issued as part of an advance refunding issue?  /ere the bonds issued as part of an advance refunding issue?  // as the final allocation of proceeds been made?  // X  // Y  // Y	Vere the bonds issued as part of a current refunding issue?  Vere the bonds issued as part of an advance refunding issue?  X  X  X  X  X  X  X  X  X  X  X  X  X	Vere the bonds issued as part of a current refunding issue?  Vere the bonds issued as part of an advance refunding issue?  X  X  X  X  X  X  X  X  X  X  X  X  X	Vere the bonds issued as part of a current refunding issue?  Vere the bonds issued as part of an advance refunding issue?  X  X  X  X  X  X  X  X  X  X  X  X  X	Vere the bonds issued as part of a current refunding issue?  Vere the bonds issued as part of an advance refunding issue?  X  X  X  X  X  X  X  X  X  X  X  X  X

Part IIII Private Business Use

	,	Α		В		C		<u>D</u>	
	Ţ	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?				Х				
		_							

Schedule K (Form 990) 2013

Part III Private Business Use (Continued)

-61	Private Business Use (Continued)								
			4		В	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?				х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?				х				
С	Are there any research agreements that may result in private business use of bond-financed property?				Х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %				
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								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?			Х					
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								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?				Х				
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?			x					

Part IV Arbitrage

		Α		В	В		С		
		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?								
а	Rebate not due yet?		Х				Х		
ь	Exception to rebate?		Х				Х		
С	c No rebate due?		Х				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?	X		Х			X		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	×			X		X		
b	<b>b</b> Name of provider SEE PART V			0		0			
С	Term of hedge 21								
d	Was the hedge superintegrated?	x							
е	Was the hedge terminated?	X							
	Schedule K (Form 990) 2013						1 990) 2013		

Part IV	Arbitrage	(Continued)
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		Α		В		С		D	
		Yes	Yes No		No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×		X		X		
b	Name of provider	0		0			0		
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?	х		х			X		
7	Has the organization established written procedures to monitor the requirements of section 148?		x		X		X		

#### Part V Procedures To Undertake Corrective Action

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?

A		В	С			D	
Yes	No	Yes	No	Yes	No	Yes	No
	x		x		x		
	,		,		,		

Part VI	Supplemental Info	<b>ormation.</b> Provide additional	l information for resp	onses to questions o	on Schedule K (see ins	tructions).

	Return Reference	Explanation Explanation
		1 BOND ISSUE A, COLUMN (F) NJ EDU FAC AUTH IAS ISSUE 2006 SERIES B - THIS ISSUE ADVANCE REFUNDED A PORTION OF THE NEW
		JERSEY EDUCATIONAL FACILITIES AUTHORITY BONDS, INSTITUTE FOR ADVANCED STUDY ISSUE 1997 SERIES G AND 2001 SERIES A 2
CC LI	EDULE K, PART I	BOND ISSUE C, COLUMN (F) NJ EDU FAC AUTH IAS ISSUE 2008 SERIES C - THIS ISSUE CURRENTLY REFUNDED THE NEW JERSEY
эспі	EDOLE K, PAKI I	EDUCATIONAL FACILITIES AUTHORITY BONDS, INSTITUTE FOR ADVANCED STUDY ISSUE 1997 SERIES F AND 1997 SERIES G THE
		DIFFERENCE BETWEEN THE PROCEEDS LISTED IN PART II LINE 3 AND THE ISSUE PRICE IN PART I COLUMN (E) IS DUE TO INVESTMENT
		FEARNINGS SCHEDULE K PART IV COLUMN (A) - JUNE 30, 2013 FOR THE 2006 B BOND COLUMN (B) - JUNE 30, 2013 FOR THE 2008 C BOND.

DLN: 93493134021755

**Employer identification number** 

OMB No 1545-0047

Open to Public Inspection

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

Name of the organization INSTITUTE FOR ADVANCED STUDY -

LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION 21-0634988 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (d) Corrected? (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction person and organization Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (d) Loan to (a) Name of (b) (c) Purpose of (e)O riginal (f)Balance (g) In (h) (i)Written ınterested Relationship loan or from the principal due default? Approved agreement? organization? person with amount by organization board or committee? Τо From Yes No Yes Yes No 710,056 654 256 (1) PETER MORTGAGE Χ Yes Yes GODDARD Total 654, 256 Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested (b) Relationship between (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance interested person and the person organization

Business Transactions In			20 201 20						
Complete if the organization answered "Yes" on Form 990, Part IV, line 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) Sh of organiz reveni	: zatıon's				
				Yes	No				

#### Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Schedule L (Form 990 or 990-EZ) 2013

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DLN: 93493134021755

OMB No 1545-0047

**SCHEDULE M** (Form 990)

Department of the Treasury

# **Noncash Contributions**

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

Open to Public <u>Inspection</u>

Internal Revenue Service ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization INSTITUTE FOR ADVANCED STUDY -LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION

**Employer identification number** 

21-0634988

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	<b>(d</b> Method of d noncash contrib	etermı	_	ts
1	Art—Works of art			19				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	5	519,583	FMV			
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests							
	Qualified conservation							
1.5	contribution—Historic							
14	Qualified conservation							
	contribution—Other							
	Real estate—Residential .	X	1	800,000	FMV			
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens Archeological artifacts							
	-							
	Other ► () Other ► ()							
	Other ►()							
	Other ( )							
	Number of Forms 8283 received	by the orga	nization during the tax yea	r for contributions				
	for which the organization comple				29			
				_			Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that			
	it must hold for at least three ye	ars from th	e date of the initial contribu	ition, and which is not requi	red to be used			
	for exempt purposes for the enti	re holding p	period?			30a		Νo
b	If "Yes," describe the arrangem	ent in Part :	II					
31	Does the organization have a gif	t 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 r	noncash			
	contributions?					32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report	an amount	: in column (c) for a type of	property for which column (a	a) is checked,			
	describe in Part II							

Part II Supplem

**Supplemental Information.** 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.

Return Reference

Explanation

Schedule M (Form 990) (2013)

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As Filed Data -

DLN: 93493134021755

OMB No 1545-0047

2013

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.

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

Name of the organization INSTITUTE FOR ADVANCED STUDY -LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION Employer identification number

21-0634988

Return	Explanation	
Reference		
	Form 990 Part III Line 1a - ORGANIZATION'S MISSION	The institute for Advanced Study (the Institute) is one of the world's leading centers for theoretical research and intellectual inquiry. The institute exists to encourage and supp ort fundamental research in the sciences and humanities: the original, often speculative, thinking that produces advances in Knowledge that change the way we understand the world it provides for the mentoring of scholars by Faculty, and it offers all who work here the freedom tolences and humanities studied at the Institute in Institute is a private, and it offers all who work here the freedom tolences and humanities studied at the Institute in Institute is a private, and it is a provided to the provided of the provided for the foreign and the sister Caroline Bamberger Fuld, and established through the vision of the founding Director Abraham Flexner Past Faculty have included Albert Einstein, who remained at the institute until his death in 1955, and distinguished scientists and scholars such as Kurt Godel, J. Robert Oppennheimer, Erwin Pano fsky, Homer A. Thompson, John Von Neumann, George Kennan and Hermann Weyl PROGRAM. SERVICE FORM 990, PART III, LINE AA Work at the Institute takes place in four schools. Historical Studies, Mathematics, Natural Sciences, and Social Science Currently, a permanent facult y of twenty-seven emment academics guides the work of the schools and each year awards fe llow ships to some 190 visiting members, from about one hundred universities and research institutions throughout the world. Dr. Robbert Digigraaf is the current Director of the init stute Robbert Digigraaf is anterhematical physicist who has made significant contribution is to string theory and the advancement of science education. For his contributions to science, Digigraaf was awarded the Spinoza Prize, the highest scientific award in the Netherlands, in 2003, and was named a Kinght of the Order of the Netherlands Lions in 2012. Digigraaf is a distinguished public policy adviser and passionable advocate for science and the arts. Digit provi

Return Explanation Reference		
	Form 990 Part III Line 1a - ORGANIZATION'S MISSION	Group (SIG), an international team of scientific leaders and supporters dedicated to fost ering science in developing countries. The Institute also has an Artist-in-Residence program that provides an annual servies of concerts and lectures for the Institute and broader community.

Return Reference	Explanation
Form 990 Part VI Line 6	The Corporation has no members its Board of Trustees oversees and is responsible for the affairs and operations of the corporation. New Trustees are elected by the current Trustees of the Institute

Return Reference	Explanation
Form 990 Part VI Line 11b	The return is prepared by KPMG, the Institute's independent accounting firm, based on information provided by the Institute and in consultation with the Institute's staff. The draft prepared by the accounting firm is then carefully reviewed by the Institute's management and staff. Changes are made as appropriate. The Board of Trustees of the Institute has delegated the review of the Form 990 to the Audit Committee of the Board of Trustees. The Audit Committee reviews the Form 990 and discusses any recommended changes with management of the Institute. The Form 990 is reviewed, in its entirety, including Schedule B, by the Institute's Board of Trustees. The terms of two gifts listed in Schedule B required confidentiality, however, and, therefore, although those two donors were listed in the Schedule B provided to the Board, the amounts of their individual gifts were not

Return Reference	Explanation
Form 990 Part VI Line 12c	Pursuant to the bylaws, each Trustee is required to sign a conflict of interest statement annually which commits them to disclosing, in the course of their participation in deliberations of the Board of Trustees or its Committees, any conflicts of interest with respect to matters under consideration. The Trustees, therefore, will recuse himself/herself from any Board or Committee meeting as required to avoid a conflict generated by any material financial interest, affiliation or other material relationship or interest.

Return Reference	Explanation
Form 990 Part VI Line 14	Under the Institute's document retention policy, the Institute's practice is to retain documents for seven years

Return Reference	Explanation
Form 990, Part VI Line 15a - Compensation	All Staff Positions The Institute's policy is to pay reasonable compensation under Section 4958 to attract and retain a high caliber of employees to carry out its educational mission. The Institute periodically conducts a review to determine the reasonable compensation ranges for comparable positions at similarly situated organizations, and sets compensation within the range of reasonable compensation. No interested party is permitted to participate in any review or decision. Director and Associate Directors. The Institute participates in a survey of top administrative positions at similar institutions every 24 months. This survey, conducted by Mercer, reviews cash and non-cash compensation benefits and trends. Based on this survey data, the Associate Director for Finance and Administration, along with the HR Manager, prepare a memo for the Compensation Committee of the Board of Trustees with data from the survey and, generally, a range of possible recommendations for the salary action of for the Director. For the two Associate Directors' salaries, the Director, along with the HR manager, prepares a memo for the Board, again with data for comparable positions at similar institutions, and the Director makes a recommendation on the salary increase for each of these positions. The Compensation Committee of the Board, which is comprised of independent persons, reviews the recommendations and determines the action to be taken. The Committee documents its decision on all three positions in writing to the Human Resources Manager. Investment Office The Institute participates in a survey annually conducted by Mercer for investment offices of foundations and universities. The survey provides wages and benefits (including incentive structures) for key investment office personnel at institutions with endow ments comparable in size and complexity to the Institute. The Associate Director for Finance and Administration, in consultation with the Director and the HR Manager, prepares a set of recommendations for review by the C

Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	The Organization does not currently make its governing documents or conflict of interest policy available to the public. Audited Financial statements are available on the Institute's website

Return Reference	Explanation
FORM 990, PART XI, LINE 5 - OTHER CHANGES	CHANGE IN FAIR VALUE OF BOND SWAP LIABILITY 200,773

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R** 

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

DLN: 93493134021755

OMB No 1545-0047

Open to Public **Inspection** 

Schedule R (Form 990) 2013

(f)

**Related Organizations and Unrelated Partnerships** 

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

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

(c)

Cat No 50135Y

(e)

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization **Employer identification number** INSTITUTE FOR ADVANCED STUDY -LOUIS BAMBERGER & MRS FELIX FULD FOUNDATION 21-0634988

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity			
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	tions Complete if tax year.	the organization ar	nswered "Yes"	on Form 990, P	art IV, line 34 becau	se it had	l one	<b>:</b>
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity (if section 501)	status (f) Status Direct control (c)(3)) entity	ng Sec	(g)	1 12(b trolle
		or foreign country)		(ii acction 301)	(c)(5))	(13	3) con entit	v?
		or foreign country)		(iii section 501)	(c)(3)) Chilly		entit es	y?
		or roreign country)		(III Section 301)	(c)(d)) Chity		entıt	y?
		or loteigh country)		(II Section 501)	(c)(d)) Chiliy		entıt	y?
		or loteigh country)		(II Section 301)	(C)(J)) Chity		entıt	y?
		or loteigh country)		(II Section 501)	(C)(G)) CHEEY		entıt	y?
		or loteigh country)		(II SECTION SOLI	(C)(J)) Chiliy		entıt	y?
		or loteigh country)		(II SECTION SOLI	(C)(G)) Chility		entıt	y?

<b>(a)</b> Name, address, and related organizati	EIN of Ion	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Dırect controllır entity	(e) Predom Income(re unrela excluded tax un sections 514	inant elated, ted, d from nder s 512-	(f) Share of total incon	(g) Share of end-of-year assets	( <b>h</b> Disprop allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or	<b>(k</b> ) Percen owner	ıtage
									Yes	No		Yes	No		
Identification of Related line 34 because it had one  (a)  Name, address, and EIN of related organization			s a corp I Ile oreign	ooration		Type (C cor			Share	(g) of end- year assets	(h	) tage	9	(i) Section 5 (b)(13 controlle entity	B) ed
(1) IAS - POOLED INCOME	CHARITABLE	NJ		IAS	<u> </u>	TRUST				29,3	62 69 000	) %		<b>Yes</b> Yes	No
EUND EINSTEIN DRIVE PRINCETON, NJ 08540 12-6439543												, ,			

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule										
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed 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		No			
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			
е	Loans or loan guarantees by related organization(s)				1e		No			
f	Dividends from related organization(s)				1f					
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)				1i		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			
ı	l Performance of services or membership or fundraising solicitations for related organization(s)									
m	m Performance of services or membership or fundraising solicitations by related organization(s)									
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			
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No			
q	Reimbursement paid by related organization(s) for expenses				1q		No			
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			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line		· •							
		(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amo	unt in	volved				

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

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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 instructions regarding exclusion for certain investment partnerships													
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>	_	(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
		·					<u> </u>						

Schedule R (Form 990) 2013

### Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013