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Form **990**

Return of Organization Exempt From Income Tax

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

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

2013

Department of the Treasury Internal Revenue Service ► Do not enter Social Security numbers on this form as it may be made public.

Open to Public Inspection

<u>A I</u>	For the	e 2013 calendar year, or tax year beginning JUL 1, 2013 and en	iding J	UN 30, 201 <u>4</u>			
	Check if applicable	C Name of organization		D Employer identific	ation number		
	Addre chang						
	Name chang		_	30-0664947			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Ro	om/suite	E Telephone number			
	Termir			202-5	735 <u>-2573</u>		
	Amene			G Gross receipts \$	2,959,007.		
	Applic			H(a) Is this a group re			
	pendir	F Name and address of principal officer JACOB BAIME		for subordinates?	Yes X No		
		SAME AS C ABOVE		H(b) Are all subordinates ind	cluded? Yes No		
Τ.	Tax-ex	empt status X 501(c)(3)	527		ist (see instructions)		
		e: ► WWW.ISRAELCC.ORG		H(c) Group exemption	number 🕨		
K	orm of	organization: X Corporation	L Year o		State of legal domicile: DC		
	art I	Summary					
a	1	Briefly describe the organization's mission or most significant activities SEE PA	ART I	II, LINE 1.			
Governance		•					
rna	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net as:	sets		
OVE	3	Number of voting members of the governing body (Part VI, line 1a)		3	7		
Ö	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	7		
es {	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	0		
ž	6	Total number of volunteers (estimate if necessary)		6	7		
į	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
₹.	b_	Net unrelated business taxable income from Form 990-T, line 34		7b	0.		
A Revenue My CActivities &			¬ L	Prior Year	Current Year		
0	8	Contributions and grants (Part VIII, line 1h) RECEIVED		1,151,298.	2,953,056.		
Į,	9	Drogram convoc rovenus (Port \/III line Or)	ပ္က 🗌	0.	0.		
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	81 🗀	0.	0.		
H	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	IRS-OS(7,340.	5,951.		
		Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	≝I ┌─	1,158,638.	2,959,007.		
E		Grants and similar amounts paid (Part IX, column (A), lines (18))	1	244,736.	183,650.		
೮	4.4	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
Expenses 7	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,055,551.	760,393.		
S	16a	Professional fundraising fees (Part IX, column (A), line 11e)		16,875.	3,438.		
xpe	b	Total fundraising expenses (Part IX, column (D), line 25) 40,975	5.				
Ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		858,543.	908,618.		
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,175,705.	1,856,099.		
	19	Revenue less expenses Subtract line 18 from line 12		-1,017,067.	1,102,908.		
Net Assets or Fund Balances			Beg	ginning of Current Year	End of Year		
sets	20	Total assets (Part X, line 16)		919,715.	1,948,873.		
tAS de B	21	Total liabilities (Part X, line 26)		202,567.	128,817.		
캺	22	Net assets or fund balances Subtract line 21 from line 20		717,148.	<u>1,820,056.</u>		
	art II	Signature Block					
		lties of perjury, I declare that I have examined this return, including accompanying schedules ar			knowledge and belief, it is		
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer	has any knowledge.			
		- Dalot Brine		1/14	/15		
Sig	n	Signature of officer		Date			
Her	e	JACOB BAIME, EXECUTIVE DIRECTOR					
	-	Type or print name and title					
	!	Print/Type preparer's name Preparer's signature		late Check	PIN		
Paid		DAVID F. GRALING CFA DRING F. BALL CF	<u> </u>	/-/-/3 self-employer			
-	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	52-1392008		
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N					
		BETHESDA, MD 20814-2930		Phone no. (3 (<u>)1) 951-9090</u>		
May	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		

Other program services (Describe in Schedule O) 808,540 . including grants of \$

IN PERSON MEETINGS, AND PUBLIC SPEAKING ENGAGEMENTS.

183,650.) (Revenue \$

1,664,602 Total program service expenses ▶

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<u>4e</u>

		<u>0664947</u>	<u> P</u>	age 3
Pa	rt 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)?			İ
	If "Yes," complete Schedule A	1	X	Ļ
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates to	for		
	public office? If "Yes," complete Schedule C, Part I	3	ļ	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in	effect		
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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 98-197 If "Yes," complete Schedule C, Part III	_ 5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right	to		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,	Part I 6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			1
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian fo	ır		
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	,		
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, perma	anent		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or	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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	ı		
	Part X, line 16º If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, busine	ss,		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,0	200		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X_	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u></u>	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, line			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	L	х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х

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20a

20a $\,$ Did the organization operate one or more hospital facilities? If "Yes," complete Schedule $\,H\,$

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, 22 X column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 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 X Schedule K If "No", go to line 25a 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disgualified 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 Х 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, Х complete Schedule L, Part II 26 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 X of any of these persons? If "Yes," complete Schedule L, Part III 27 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): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Х b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV 28c X Х 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 X If "Yes," complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 Х Part V. line 1 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 Х If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Х 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

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Note, All Form 990 filers are required to complete Schedule O

Form 990 (2013) ISRAEL ON CAMPUS COALITION Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to contains.

	Check it Scriedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 64			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	_X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_ X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	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		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	Ì		
	any contributions that were not tax deductible as charitable contributions?	6a	_	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	ł		
	were not tax deductible?	6b		
7	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_		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7¢		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			
		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting N/A organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
	Did the organization make any taxable distributions under section 4966? N/A	00		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9a 9b		
10	Section 501(c)(7) organizations. Enter	30		
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter	1		İ
а	Gross income from members or shareholders N/A 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
-	amounts due or received from them)			İ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		<u> </u>
-	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1		
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			990	(2013)

ISRAEL ON CAMPUS COALITION 30-0664947 Form 990 (2013) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions \mathbf{x} Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 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? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official 15a X 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed >CA, FL, GA, IL, MD, MA, MI, NJ, NY, OK, PA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Other (explain in Schedule O) ___ Own website ____ Another's website 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 State the name, physical address, and telephone number of the person who possesses the books and records of the organization JACOB BAIME - 202-735-2573

20001

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

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

(A)	Check this box if neither the organization nor any related organization comp (A) (B) (C)		npel	isal	(D)	(E)	(F)			
Name and Title	Average			Pos	itior			Reportable	Reportable	Estimated
Name and Title	hours per	(do not check more than or box, unless person is both					compensation	compensation	amount of	
	week					or/trus		from	from related	other
	(list any	ig.		l				the	organizations	compensation
	hours for	Individual trustee or director				EG		organization	(W-2/1099-MISC)	from the
	related	stee o	ustee			ensa		(W-2/1099-MISC)		organization
	organizations	al tru:	a t		loyee	S e				and related
	below	n Nid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	Ē	E	₩.	ξ.	풀통	<u> </u>		-	
(1) TINA PRICE	3.00	ļ								•
BOARD CHAIR		Х	<u> </u>	X	-			0.	0.	0.
(2) HOWARD WOHL	1.00		ł							
TREASURER		X	<u> </u>	X	ļ			0.	0.	0.
(3) LISA EISEN	2.00	1							_	_
SECRETARY		X	<u> </u>	Х	<u> </u>			0.	0.	0.
(4) ADAM MILSTEIN	1.00		l							
DIRECTOR		X	ļ					0.	0.	0.
(5) HAROLD GRINSPOON	1.00									
DIRECTOR		X						0.	0.	0.
(6) STACY SCHUSTERMAN	1.00		}							
DIRECTOR		X	<u> </u>					0.	0.	0.
(7) DOROTHY TANANBAUM	1.00									
DIRECTOR		X						0.	0.	0.
(8) JACOB BAIME	35.00									
EXECUTIVE DIRECTOR (FROM 10/13)		ı		X				25,863.	0.	778.
(9) SAM EDELMAN	35.00	}								
DIRECTOR OF ACADEMIC NETWORK						X		105,458.	0.	2,415.
(10) MARJAN GREENBLATT	35.00									
ASSISTANT DIRECTOR (UNTIL 12/13)						x		121,529.	0.	1,643.
(11) STEPHEN KUPERBERG	35.00									
FORMER EXECUTIVE DIRECTOR				ļ			X	238,956.	0.	6,983.
			ł							
					İ					-
		1								
		1								
	 	T		Т	T	T				
		1								
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332007 10-29-13

	(A) Name and business address	NONE	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including bu	t not limited to those	listed above) who received more than	

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

0

Form 990 (2013)

30-0664947 Form 990 (2013) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded from tax under (B) Total revenue Related or exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d Government grants (contributions) 1e f All other contributions, gifts, grants, and 1f 2,953,056. similar amounts not included above g Noncash contributions included in lines 1a-1f \$,953,056 Total. Add lines 1a-1f Business Code Program Service Revenue All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less. rental expenses Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) \triangleright 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV. line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 5,951. 11 a MISCELLANEOUS 900099 5,951 C All other revenue Total. Add lines 11a-11d 5,951

959,007

Total revenue See instructions.

5,951.

Form 990 (2013)

	ion 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A).	
	Check if Schedule O contains a respon				(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	103,900.	103,900.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	79,750.	79,750.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	_			
4	Benefits paid to or for members				124-
5	Compensation of current officers, directors,				
	trustees, and key employees	92,953.	60,884.	23,703.	8,366
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	542,042.	475,225.	63,608.	3,209
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	12,971.	10,972.	1,770.	229
9	Other employee benefits	55,056.	47,604.	6,874.	229 578
10	Payroll taxes	57,371.	48,530.	7,831.	1,010
11	Fees for services (non-employees)				
а	Management				
b	Legal	4,401.	3,990.	364.	47
С	Accounting	71,876.	65,158.	5,950.	47 768
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	3,438.			3,438
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O.)	83,339.	75,550.	6,899.	890
12	Advertising and promotion	8,465.	4,407.	149.	3,909
13	Office expenses	51,557.	42,129.	6,676.	2,752
14	Information technology	39,211.	36,119.	2,739.	353
15	Royalties		•		
16	Occupancy	97,843.	81,321.	14,634.	1,888
17	Travel	163,226.	156,699.	624.	5,903
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	167,220.	163,577.	762.	2,881
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	71,086.	65,283.	5,140.	663
23	Insurance	3,645.	3,026.	548.	71
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	PROGRAM EVENTS	122,338.	122,338.		
b	RECRUITMENT	9,795.	8,171.	1,438.	186
С	DUES AND SUBSCRIPTIONS	7,456.	3,460.	237.	3,759
d	MISCELLANEOUS	4,060.	3,755.	270.	35
е	All other expenses	3,100.	2,754.	306.	40
25	Total functional expenses Add lines 1 through 24e	1,856,099.	1,664,602.	150,522.	40,975
26	Joint costs. Complete this line only if the organization				
	· · · · · · · · · · · · · · · · · · ·				
	reported in column (B) joint costs from a combined			l	
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

1,948,873. Form 990 (2013)

Total liabilities and net assets/fund balances

919,715

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2013)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

Part I	Reason		Ity Status (All organiz			to this par) Soo inci	tructions	3	<u>0-0664947</u>	
<u> </u>								liuctions			
		-	because it is (For lines	•		•	•				
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3 📙			tal service organization					.n. \/.a\/.a\/		4h - h 4-1'o	
4 📖	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
	city, and stat										
5			benefit of a college or u	niversity o	wnea or op	perated by	a governi	mentai uni	t describ	iea in	
- [(b)(1)(A)(iv). (Comple	·								
6	·		ent or governmental uni								
7 X	=	•	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public described ii	n
	`	(b)(1)(A)(vi). (Comple	•								
8	_		ection 170(b)(1)(A)(vi).	•					_		_
9 📖	-	•	eives (1) more than 33							•	
		,	nctions - subject to certa	•		•				-	
			axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon	after June 30, 197	5
🖂		509(a)(2). (Complete	•								
10	=	= -	perated exclusively to te	-	-			•			
11	-	-	perated exclusively for the		•				•		or
		, , ,	ations described in section	, ,,	•		2) See sec	ction 509(a)(3). Ch	eck the box that	
			organization and compl		•			. —			
	a ∟ Type I	•			_	integrated				n-functionally integ	-
e 📖		•	t the organization is not		-	-	-		-	•	n
			han one or more publicly						∂(a)(1) or	section 509(a)(2)	
f	_		ten determination from t	the IRS tha	atitisa Iy	pe I, Type	II, or Type	e III			
		rganization, check th				_					ш
g	-		rganization accepted ar			-				<u> </u>	r
		•	irectly controls, either al	one or tog	ether with	persons o	lescribed	ın (ii) and (III) below		No
	_	* *	upported organization?							11g(i)	
		•	n described in (i) above?		- 0					11g(ii)	
•-			person described in (i) o							11g(iii)	
h	Provide the t	ollowing information	about the supported or	ganization	(S).						
				l: x 1- 45		() D. ()	4 . 4	(vi) le	tho		
	of supported	(ii) EIN	(iii) Type of organization	in col. (i) lis	organization	(v) Did you organizat	-	(vi) Is organizatio	on in col.	(vii) Amount of mor	netary
orga	anization		(described on lines 1-9 above or IRC section		document?	(i) of your		(i) organız U.S	ed in the	support	
			(see instructions))	Yes	No	Yes	No	Yes	No		
-			_	163	140	163	140	163	140		
				-							
						-					
				1							
	-	-	_	 	-				 		
				 					 		
Total											
		I									

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")		2.876.372.	1,523,941.	1,151,298,	2,953,056.	8 504 667.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3		2,876,372.	1,523,941.	1,151,298.	2,953,056.	8,504,667.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly	ļ					
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						3,012,840,
6	Public support. Subtract line 5 from line 4						5 491 827
	ction B. Total Support		-				
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4		2,876,372.	1,523,941.	1,151,298.	2,953,056.	8,504,667.
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			ļ			
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)			58.	7,340.	5,951.	13,349.
11	Total support. Add lines 7 through 10						8,518,016,
12	Gross receipts from related activities,	etc (see instructi	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, third	l, fourth, or fifth tax	year as a section	1 501(c)(3)	
	organization, check this box and stor	here					▶X
Sec	ction C. Computation of Publ	ic Support Pe	rcentage		- -,		
14	Public support percentage for 2013 (I	line 6, column (f) d	ivided by line 11, co	olumn (f))		14	%
15	Public support percentage from 2012	? Schedule A, Part	II, line 14		Į	15	%
16a	33 1/3% support test - 2013. If the o	organization did no	ot check the box on	line 13, and line 14	4 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶
b	33 1/3% support test - 2012. If the o	organization did no	ot check a box on lir	ne 13 or 16a, and I	ine 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly	supported organiza	tion			
17a	10% -facts-and-circumstances tes	t - 2013. If the org	anization did not ch	neck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check thi	s box and stop he	re. Explain in Par	t IV how the organi	zation
	meets the "facts-and-circumstances"	test The organiza	ition qualifies as a p	ublicly supported	organization		▶
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets the	ne "facts-and-circu	ımstances" test, ch	eck this box and s	t op here. Explaın	ın Part IV how the	
	organization meets the "facts-and-circ	cumstances" test	The organization qu	ualifies as a publicl	y supported orga	nızatıon	▶Щ
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	<u>, 16b, 17a, or 17b,</u>	check this box ai	nd see instructions	
					Sche	dule A (Form 990 d	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)

Se	ction A. Public Support				-		
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not	,					
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that						
•	are not an unrelated trade or bus-						
	iness under section 513						
		·					
4	•						
	ization's benefit and either paid to						
	or expended on its behalf					ļ	
5							
	furnished by a governmental unit to						
	the organization without charge			_			
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	L					
ŀ	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						
	Add lines 7a and 7b	-					
	Public support (Subtract line 7c from line 6)		<u> </u>			1 -	
	ction B. Total Support		J	L	<u> </u>	- I	
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	(4) 2000	(2) 20 10	(9).291	(0) = 0.1	(0) = 0	(1/
_	Gross income from interest,						-
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
				· · · · · -		·	_
E	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975		<u> </u>		<u> </u>		
	Add lines 10a and 10b			 	<u> </u>		
11	Net income from unrelated business activities not included in line 10b.			1			
	whether or not the business is						
	regularly carried on			ļ		<u></u>	
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						<u> </u>
14	First five years. If the Form 990 is for	the organization'	s first, second, thii	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here			<u> </u>			▶□_
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2013 (ine 8, column (f) d	livided by line 13, o	column (f))		15	%
16	Public support percentage from 2012	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inves	stment Incom	e Percentage				
17	Investment income percentage for 20)13 (line 10c, colur	mn (f) dıvıded by lıı	ne 13, column (f))		17	%
18	Investment income percentage from	2012 Schedule A,	Part III, line 17			18	%
19a	a 33 1/3% support tests - 2013. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	_				•	ightharpoons
ŀ	33 1/3% support tests - 2012. If the						and
•	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization		-			=	
	23 00-25-13	dig flot crieck a	207 011 1110 14, 19	a, or rob, offect t		hedule A (Form 99	0 or 990-E71 2013

chedule A (Form 990 or 990-EZ) 2013 ISRAEL ON CAMPUS COALITION	30-0664947 Page
Part IV Supplemental Information. 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)	
	<u> </u>
	. <u></u>
_	
	<u></u>
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	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
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	<u></u>
	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047 Open to Public Inspection

Name of the organization

ISRAEL ON CAMPUS COALITION

Employer identification number

30-0664947 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1

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

Schedule D (Form 990) 2013

Assets included in Form 990, Part X

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 ISRAEL ON CA	MPUS_COALIT	ION	30-0664947 P	age 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" t	o Form 990, Part IV, line	11b See Form 990, Part	X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua	tion Cost or end-of-year market valu	ле
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				•
(H)	···			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12)		-	· <u> </u>	
Part VIII Investments - Program Related.		<u> </u>		
Complete if the organization answered "Yes" t	o Form 990 Part IV line	11c See Form 990 Part	Y line 13	
(a) Description of investment	(b) Book value		tion Cost or end-of-year market valu	16
(1)	(-)	(0)		
(2)				
(3)		 		
		·		
(4)				
(5)				
(6)	·			
(7)				
(8)				
(9)	·			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13) ▶ Part IX Other Assets.				
	a Farm 000 Bort IV Inc	11d Can Form 000 Dark	V line 15	
Complete if the organization answered "Yes" t	escription	r rid See Form 990, Part	(b) Book value	
	езсприон		(b) Book value	_
(1)				
(2)			-	
(3)		<u></u>		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.	15)			
	. 5 000 D- + N/ I	44446 0 5 000	Ded V. bes 05	
Complete if the organization answered "Yes" to	o Form 990, Part IV, line), Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII X Schedule D (Form 990) 2013

332053 09-25-13

Schedule D (Form 990) 2013 ISRAEL ON CAMPUS COALITION	30-0664947 Page 5
Schedule D (Form 990) 2013 ISRAEL ON CAMPUS COALITION Part XIII Supplemental Information (continued)	
	•
	<u> </u>

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

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

2013
Open to Public Inspection

Name of the organization

Employer identification number

ISRAEL ON CAMPU	S COALIT	ION		3	0-066494	<u> </u>
			tside the United States. Compl			
Form 990, Part IV	/, line 14b					
_	-		ds to substantiate the amount of its gr			
the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assista	nce?	Yes L No
2 For grantmakers. Described States	ribe in Part V the	e organization's p	procedures for monitoring the use of it	s grants and other	r assistance out	side the
3 Activities per Region (Tr	ne following Part	I, line 3 table ca	n be duplicated if additional space is	needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity is a prograi describe sp of service(s	m service, ecific type	(f) Total expenditures for and investments in region
MIDDLE EAST AND	0	1	PROGRAM SERVICE ACTIVITIES	TAMID FELLOWS		218,311.
					.	
				:		
			_			
3 a Sub-total		1				218,311,
b Total from continuation sheets to Part I	0	0				0
c Totals (add lines 3a and 3b)	.0	1				218,311,

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

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

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

(i) Method of valuation (book, FMV appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance					xempt by
(f) Manner of cash disbursement					recognized as tax·e
(e) Amount of cash grant					foreign country,
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
(c) Region					ns listed above that are r Il has provided a section
(b) IRS code section and EIN (if applicable)					recipient organization he grantee or counse
1 (a) Name of organization					2 Enter total number of I the IRS, or for which the

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2013

Page 3

Schedule F (Form 990) 2013

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

Part III can be duplicated if additional space is needed

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2013
(g) Description of non-cash assistance					Schedul
(f) Amount of non cash assistance				-	
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

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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

Schedule F (Form 990) 2013

Yes X No

Yes X No

6

for Form 5713)

Foreign Partnerships (see Instructions for Form 8865)

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

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

▶ Attach to Form 990.

OMB No 1545-0047

Open to Public 2013

Inspection

2 Schedule I (Form 990) (2013) Employer identification number 30-0664947 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. ISRAEL ON CAMPUS COALITION Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Parti Part II

332101 10-29-13

Page 2

EXPLANATION: ALL PARTNER ORGANIZATIONS DEVOTED TIME TO FURTHERING THE GOALS

THROUGH ICC COORDINATED CONFERENCE CALLS

PARTNERS WERE KEPT UP TO DATE WITH PROGRESS AND GIVEN AND WEB CONFERENCES,

OF THE GRANTS. BY MEETING WEEKLY,

LINE 2:

PART I,

TO REPORT TO THE LARGER GROUP THEIR RELEVANT UPDATES. THE OPPORTUNITY

Schedule I (Form 990) (2013)

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SCHEDULE J (Form 990)

Compensation Information

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

► Complete if the organization answered "Yes" on 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. Inspection

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

ISRAEL ON CAMPUS COALITION

Employer identification number

30-0664947

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Compensation committee Written employment contract X Independent compensation consultant X Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? Х 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of X The organization? 5a X Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of X a The organization? 6a Х b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments X not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the X 8 initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2013

30-0664947

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2013

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

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·()(B)	reported as deferred in prior Form 990
(1) STEPHEN KUPERBERG PORMER EXECUTIVE DIRECTOR	€ €	106,552.	00	132,404.	5,906.	1,077.	245,939.	0
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Schedule J (Form 990) 2013

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Name of the organization

ISRAEL ON CAMPUS COALITION

Employer identification number 30-0664947

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
POSITIVE CLIMATE FOR ISRAEL ON CAMPUS. ICC SUPPORTS AND EMPOWERS CAMPUS
LEADERS, FACILITATES STRATEGIC COLLABORATION AMONG NATIONAL PRO-ISRAEL
GROUPS, INCUBATES INNOVATIVE INITIATIVES, AND CONDUCTS CUTTING EDGE
RESEARCH TO INFORM CAMPUS PARTNERS AND THE NATIONAL PRO-ISRAEL
COMMUNITY.
FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
EXPLANATION: THE ORGANIZATION CEASED CONDUCTING THE ASK HERZL PROGRAM
DURING THE FISCAL YEAR.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
LEVERAGE CONTACTS, RESOURCES AND EXPERIENCES TO ADDRESS ISSUES UNIQUE
TO THEIR CAMPUSES.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
RESEARCH & ANALYSIS
EXPENSES \$ 207,062. INCLUDING GRANTS OF \$ 1,000. REVENUE \$ 0.
ACADEMIC ENGAGEMENT
EXPENSES \$ 181,080. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
GRINSPOON MORNINGSTAR INTERNSHIP
EXPENSES \$ 154,341. INCLUDING GRANTS OF \$ 75,250. REVENUE \$ 0.

CAMPUS PROFESSIONALS TRAININGS

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

Schedule O (Form 990 or 990-EZ) (2013)

Page 2 Name of the organization Employer identification number 30-0664947 ISRAEL ON CAMPUS COALITION EXPENSES \$ 121,324. INCLUDING GRANTS OF \$ 4,000. REVENUE \$ 0. ISRAEL ADVOCACY EXPENSES \$ 102,900. INCLUDING GRANTS OF \$ 102,900. REVENUE \$ 0. ASK HERZL EXPENSES \$ 41,833. INCLUDING GRANTS OF \$ 500. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS. THE DRAFT 990 WAS EMAILED TO BOARD MEMBERS WITH DIRECTIONS FOR REVIEW PRIOR TO FILING. IF CHANGES WERE MADE, THE RETURN WAS PRESENTED TO THE BOARD PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS ANNUALLY SIGNS A STATEMENT WHICH AFFIRMS THAT SUCH PERSON HAS: RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY; HAS READ AND UNDERSTANDS THE POLICY; HAS AGREED TO COMPLY WITH THE POLICY; AND UNDERSTANDS THAT THE ORGANIZATION IS A CHARITABLE AND EDUCATIONAL ORGANIZATION AND THAT, IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION, IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE OR SHE LEAVES THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A

RESOLVE ANY CONFLICT.

CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR

COMMITTEE MEMBERS DECIDE IF A CONFLICT OF INTEREST EXISTS AND HOW TO