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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Open to Public

Department of the Treasury

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.

Inspection Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2013 calendar year, or tax year beginning SEPTEMBER 1 2013, and ending AUGUST 2014 D Employer identification number C Name of organization FRIENDS OF MOSDOT GOOR Check if applicable 13-3065542 Doing Business As Address change Room/suite Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change Initial return 1310 48th. STREET 718-435-8989 City or town, state or province, country, and ZIP or foreign postal code Terminated BROOKLYN, NY 11219 **G** Gross receipts \$ 12, 137, 916 Amended return Application pending F Name and address of principal officer H(a) Is this a group return for subordinates? Yes No H(b) Are all subordinates included? The Yes No. If "No," attach a list (see instructions) X 501(c)(3)) ◀ (insert no) ☐ 4947(a)(1) or 501(c) (Tax-exempt status Website: ▶ H(c) Group exemption number ▶ Form of organization X Corporation Trust Association ☐ Other ▶ L Year of formation 1991 M State of legal domicile NY Part I Summary Briefly describe the organization's mission or most significant activities: TO SUPPORT JEWISH ORTHODOX EDUCATION CHARITABLE CAUSES, PROVIDE FREE BURIAL PLOTS, PROVIDE GENERAL AND PASSOVER ASSISTANCE Activities & Governance FOR THE NEEDY, IN THE UNITED STATES, ISRAEL, AND ALL OTHER PARTS OF THE WORLD Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 3 5 21 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Contributions and grants (Part VIII, line 1h) . 11,970,907 8 11,531,155 SK 9 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), line (3) 4, and dol 2 .700 78,089 10 25,609 11 Other revenue (Part VIII, column (A), lines 5, 6di, 8c, 9c, 10c, and 11e) 213,000 141,400 12 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12) 11,822,244 12, 137, 916 Grants and similar amounts paid (Part IX, column (A) lines 1=3) 10,741,974 11,758,314 13 Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 0 0 357,636 322,744 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 0 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,034,377 916,937 17 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 12, 133, 987 12,997,995 (860, 079)19 Revenue less expenses. Subtract line 18 from line 12 (311,743)End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16) 1,136,440 426,289 21 6,202,440 6,352,368 Total liabilities (Part X, line 26) 22 (5,066,000 (5,926,079)Net assets or fund balances. Subtract line 21 from line 20 Signature Block Part II Under penalties of perjury, I declare that I have examiped this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (6ther than officer) is based on all information of which preparer has any knowledge JUNE 30, 2015 Sign Signature of officer Date Here NACHMAN Y. WIDISLAWSKY, MANAGER Type or print name and title Print/Type preparer's name Date Preparer's signature Check | ıf Paid self-employed Preparer

For Paperwork Reduction Act Notice, see the separate instructions.

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

Firm's name

☐ Yes ☐ No Form 990 (2013)

Firm's EIN ▶

Use Only

Page	2
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Part	U	Statement of Program Service Accomplishments
4	<u>, </u>	Check if Schedule O contains a response or note to any line in this Part III
1		fly describe the organization's mission:
	10	SUPPORT JEWISH ORTHODOX EDUCATION, CHARITABLE CAUSES, PROVIDE FREE BURIAL PLOTS VIDE GENERAL AND PASSOVER ASSISTANCE FOR THE NEEDY, IN THE UNITED STATES, ISRAEL,
	TIND	ALL OTHER PARTS OF THE WORLD.
2	Did	the organization undertake any significant program services during the year which were not listed on the
	prio	r Form 990 or 990-EZ?
	If "Y	es," describe these new services on Schedule O.
3		the organization cease conducting, or make significant changes in how it conducts, any program
	serv	ices?
		es," describe these changes on Schedule O.
4	Des	cribe the organization's program service accomplishments for each of its three largest program services, as measured by
		enses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the 1	total expenses, and revenue, if any, for each program service reported.
4a	(Coc	de:) (Expenses \$ 12,997,995 including grants of \$ 11,758,314) (Revenue \$ 12,137,916)
		SUPPORT JEWISH ORTHODOX EDUCATION, CHARITABLE CAUSES, PROVIDE FREE BURIAL PLOTS VIDE GENERAL AND PASSOVER ASSISTANCE FOR THE NEEDY, IN THE UNITED STATES, ISRAEL,
		ALL OTHER PARTS OF THE WORLD.
4b	(Cod	de:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Cod	de:) (Expenses \$including grants of \$) (Revenue \$)
4d	Oth	er program services (Describe in Schedule O.)
		penses \$ including grants of \$) (Revenue \$)
4e	Tota	ol program service expenses 12,997,995

aıı	Oneckilst of nequired scriedules		1	•
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	No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	X	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
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		х
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		
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		х
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		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		Х
	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
	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		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e	Х	x
12 a	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		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 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		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 (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		<u>x</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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Part I	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	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		х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	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		х
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		х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		Х
	Schedule L, Part IV	28b		Х
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
		F	- 000	(2013)

Form **990** (2013)

10111100	Section 1. Decision 1. Decisio			<u> </u>
Part	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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
_	reportable gaming (gambling) winnings to prize winners?	1c		
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 21			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	x	Ì
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	 ^-	
20		20		U
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	ļ	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.		ļ	l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	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 any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	<u> </u>		
·	required to file Form 8282?	7c		х
	If "Yes," indicate the number of Forms 8282 filed during the year	- 		-
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	i	x
	Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	 	X
f			-	├^
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h	 	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		├─	-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.	_		
а	Did the organization make any taxable distributions under section 4966?	9a	—	ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	<u> </u>
10	Section 501(c)(7) organizations. Enter:			1
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	1	1	[
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L		L
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	T	
_	Note. See the instructions for additional information the organization must report on Schedule O.			T
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	1
_	the organization is licensed to issue qualified health plans		1	1
С	Enter the amount of reserves on hand	1		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
-	If "Yes " has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

Part '				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
D = =41	Check if Schedule O contains a response or note to any line in this Part VI	• •	• •	X
Section	on A. Governing Body and Management		Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year 1a 3			
1a	If there are material differences in voting rights among members of the governing body, or	1		
	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 . 1b 3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		X
6 70	Did the organization have members or stockholders?	-		X
7a	one or more members of the governing body?	7a		×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	, u		- ^-
-	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			, <i>,</i>
Cast:	on B. Policies (This Section B requests information about policies not required by the Internal Rever	9	ado l	X
Secu	on B. Policies (This Section B requests information about policies not required by the internal never	ue Ci	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
b				
	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	Х	
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? <i>If "No," go to line 13 </i>	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		x
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		X
46-	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			
16a	with a taxable entity during the year?	16a		x
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		<u> </u>
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	1		
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NEW YORK		-\/0\-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	1 501(င)(၁)S	oniy)
	□ 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 int	erest	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			
	organization: ► NACHMAN Y. WIDISLAWSKY, 1310 48TH STREET, BROOKLYN NY 11219, 71	8-43	5- <u>89</u>	89_

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Form	$\alpha \alpha \alpha$	1201	o,

Part	VII	ompensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, a	nd
	•	dependent Contractors	

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

Check this box if heither the organization no	r any relate	a org	anız			ompe	nsa	ited any curren	t onicer, directo	, or trustee.
(A) Name and Title	(B) Average			Pos eck		than o		(D)	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below dotted line)	office or directo	r and		irect	Highest compensated	ee) Forme	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) BENJAMIN FISHOFF PRESIDENT	VARIOUS			Х				0	0	C
(2) NACHMAN Y. WIDISLAWSKY MANAGER	VARIOUS			х	х			9,746	0	
(3) MOSHE A STEINBERG V-P TREAS	5			х				0	0	
(4)										
(5)										
(6)										
(7)										
(8)										
(9)						Ï				
(10)			_							
(11)										
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(13)										
(14)										

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	/ees			lighes	st C	ompensated E	mployees (co	ontinue	ed)		
			ļ		•	C) ation								
	(A)	(B)			neck	more	than o		(D)	(E)		Ent	(F) timated	
	Name and title	Average hours per					ıs both or/trust		Reportable compensation	Reportable compensation t			ount of	
		week (list any			_	_			from the	related organization	اء		other pensatio	n
		hours for related	Individual trustee or director	Institutional	Officer	Key employee	ghes	Former	organization	(W-2/1099-MI		fro	om the	
		organizations below dotted	ctor	tion		팋	st co] =	(W-2/1099-MISC)				anızatıcı İ relatec	
		line)	trug	al T		yee	mpe						nization	
			8	trustee			Highest compensated employee		1					
		<u> </u>			<u> </u>	<u> </u>	<u>&</u>	<u> </u>			_			
(15)			ł											
(16)		 		 							-			
3		†]					_						
(17)														
		<u></u>			ļ	L		_						
(18)			ļ						1					
(19)	····					-								
113/														
(20)						\vdash				-				
			<u>. </u>											
(21)		ļ									1			
(00)						<u> </u>		<u> </u>	 		_			
(22)														
(23)				_				-						
X		†												
(24)														
								<u> </u>						
(25)		<u> </u>												
	Sub-total	l	L		<u> </u>	<u> </u>		Ļ	9,746		0			0
C	Total from continuation sheets to Part			•	•		•	•	3,740		- 			
d								>	9,746	-	0			0
2	Total number of individuals (including but							e) w			0,000	of		
	reportable compensation from the organ			0										
•	District the state of the state of the state of	ree											Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	ployee, or nigh	iest compen	sated] ,,
4	For any individual listed on line 1a, is the							na	nd other comr	onsation fro	m the	3	+	X
7	organization and related organizations													
	individual			. ´				΄,				4	1	x
5	Did any person listed on line 1a receive of									ation or indiv	vidual			
	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	nedu	ıle J f	or s	such person	<u></u>	•	5		X
	on B. Independent Contractors						4		414	l Ala a .	0100	000 -		
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A)								(B)			(C)		
	Name and business add	fress						L.	Description of s	ervices		ompen	sation	
====	===== NONE ======							\vdash						
						_		-						
—	·			_				\vdash						
								\Box						
2	Total number of independent contractor							th	ose listed abo	ove) who				
	received more than \$100,000 of compens	sation from	the o	rgar	nizat	tion	ightharpoons			0 1				

| Total revenue Related or Secretary Total revenue Related or Secretary Total revenue <u> </u> |
|--|--|
| Business Code Business Code | (D) Revenue cluded from tax inder sections 512-514 |
| Business Code Business Code | |
| Business Code Business Code | |
| Business Code Business Code | |
| 3 Investment income (including dividends, interest, and other similar amounts) 25,609 4 Income from investment of tax-exempt bond proceeds 5 Royalties | |
| 3 Investment income (including dividends, interest, and other similar amounts) 25,609 4 Income from investment of tax-exempt bond proceeds 5 Royalties | |
| 3 Investment income (including dividends, interest, and other similar amounts) 25,609 4 Income from investment of tax-exempt bond proceeds 5 Royalties | |
| 3 Investment income (including dividends, interest, and other similar amounts) 25,609 4 Income from investment of tax-exempt bond proceeds 5 Royalties | |
| Separative Sep | |
| Ga Gross rents Ga Gross rents Ga Gross rents Ga Gross rental expenses Ga Gross rental expenses Ga Gross amount from sales of assets other than inventory Ga Gross amount from sales of assets other than inventory Ga Gross amount from sales of assets other than inventory Ga Gross amount from sales of assets other than inventory Ga Gross income from fundraising Ga Gross income from gaming activities | |
| Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 | |
| Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 | |
| c Net income or (loss) from fundraising events . ▶ 0 9a Gross income from gaming activities. See Part IV, line 19 a | |
| 9a Gross income from gaming activities. See Part IV, line 19 a | |
| | |
| c Net income or (loss) from gaming activities > 0 10a Gross sales of inventory, less returns and allowances a | |
| b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ 0 | |
| Miscellaneous Revenue Business Code | |
| 11a ADVERTISING 541800 141,400 b | |
| d All other revenue | |
| e Total. Add lines 11a-11d ▶ 141,400 | |

Part IX Statement of Functional Expenses

Sectio	n'501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respon-				
8b, 9b	t include amounts reported on lines 6b, 7b, , 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	834,211	834,211		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	10,924,103	10,924,103		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	9,746	3,249	3,249	3,248
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 8	Other salaries and wages	283,686	94,562	94,562	94,562
9 10 11	Other employee benefits	29,312	9,771	9,771	9,770
a b c d e f	Management	81,737	40,868	20,434	20,435
g 12	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion				
13 14 15 16	Office expenses	40,540	13,514	13,513	13,513
17 18	Travel	259,446	86,482		172,964
19 20 21	Conferences, conventions, and meetings Interest				
22 23 24	Depreciation, depletion, and amortization . Insurance	10,150	3,384	3,383	3,383
а	(A) amount, list line 24e expenses on Schedule O.) FUNDRAISING (NON-PROFESSIONAL)	356,645			356,645
b c d	POSTAGE & SHIPPING OFFICE & ADMINISTRATION	47,304 121,115	15,768 40,372	15,768 40,372	15,768 40,371
e 25 26	All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	12,997,995	12,066,284	201,052	730,659
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				Form 990 (2013)

Form **990** (2013)

H	art X	Balance Sheet			
	•	Check if Schedule O contains a response or note to any line in this Pai	tX	<u> </u>	
			(A) Beginning of year		(B) End of year
_	1	Cash-non-interest-bearing	46,716	1	68,594
	2	Savings and temporary cash investments	1,088,724	2	356,695
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
' 0	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		6	
ě	7			7	
Assets	7	Notes and loans receivable, net			
•	8	Inventories for sale or use		8	··—
	9 10a	Prepaid expenses and deferred charges		9	
	١.	· · · · · · · · · · · · · · · · · · ·	ı	40	
	b	Less: accumulated depreciation		10c	0
	11	Investments—publicly traded securities	1,000	11	1,000
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,136,440	16	426,289
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue	·	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
jab		disqualified persons. Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	ĺ	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	6,202,440		6,352,368
_	26	Total liabilities. Add lines 17 through 25	6,202,440	26	6,352,368
Ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.	!		
ä	27	Unrestricted net assets		27	
ä	28	Temporarily restricted net assets		28	
ַ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .	(5,066,000	\rightarrow	(5,926,079
et	33	Total net assets or fund balances	(5,066,000		(5,926,079
~	34	Total liabilities and net assets/fund balances	1,136,440		426,289
			., ,		

Page	1	2
9-	•	-

Form 990 (2013)

Part	XI Reconciliation of Net Assets									
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>							
1	Total revenue (must equal Part VIII, column (A), line 12)	12,	137,	916						
2										
3	Revenue less expenses. Subtract line 2 from line 1			079						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	(5,066,000								
5	Net unrealized gains (losses) on investments									
6	Donated services and use of facilities									
7	Investment expenses									
8	Prior period adjustments									
9	Other changes in net assets or fund balances (explain in Schedule O)									
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line									
	33, column (B))	(5,	926,	079						
Part	XII Financial Statements and Reporting			_						
	Check if Schedule O contains a response or note to any line in this Part XII			ᆜ						
			Yes	No						
1	Accounting method used to prepare the Form 990: X Cash Accrual Other									
	If the organization changed its method of accounting from a prior year or checked "Other," explain in									
	Schedule O.									
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_X						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	1								
	reviewed on a separate basis, consolidated basis, or both:									
_	Separate basis Consolidated basis Both consolidated and separate basis	2b		.,						
b	Were the organization's financial statements audited by an independent accountant?	20		X						
	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:									
	·									
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight									
С	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c								
	If the organization changed either its oversight process or selection process during the tax year, explain in	20								
	Schedule O.		<u> </u>							
20	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in									
Ja	the Single Audit Act and OMB Circular A-133?	3a		x						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the									
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b								
		Fon	n 990	(2013)						
				•						

SCHEDULE A (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.

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Name	of the (organization						ין	Employer id	dentificatio	n number	
FRIE	NDS	OF MOSD	OT GOOR					1	3-3065	542		
Par	tl	Reason f	or Public Cha	rity Status (All orga	nization	s must c	complete	this pa	rt.) See i	nstruction	ons.	
1	X A	zation is not church, con	a private founda vention of churc	ation because it is: (Fo	or lines 1 churches	through 1 s describ	1, check	only one	box.)			
2				170(b)(1)(A)(ii). (Attac			-•	.== = =				
				spital service organiza						0/6\/4\/4\	VIII)	
	ho	spital's nam	ne, city, and stat								•	
	SE	ection 170(b)(1)(A)(iv). (Com							vernmen	tal unit descr	ibed in
	☐ Ar	n organizatio	on that normally	nment or government receives a substantia (A)(vi). (Complete Par	al part of					nit or fror	n the general	public
8	□ A	community t	trust described ı	n section 170(b)(1)(A)(vi). (Cor	mplete Pa	art II.)					
9	re su	ceipts from ipport from	activities related gross investme	receives: (1) more that d to its exempt funct ent income and unre lifter June 30, 1975. Se	ions—sul lated bus	bject to o siness ta	certain e xable ind	xceptions come (les	s, and (2) ss sectio	no mor	e than 331/39	6 of its
10	☐ Ar	n organizatio	n organized and	l operated exclusively	to test fo	or public :	safety. Se	ee sectio	n 509(a)(4).		
	pu 50 a By ot	urposes of on the open of the	bne or more publick the box that b Type his box, I certify indation manage	nd operated exclusive blicly supported organ describes the type of lice. Type II that the organization ers and other than one	nizations supportir I–Functio is not co	describeing organis nally inteintrolled o	d in sect zation an grated directly oi	ion 509(a d comple d [] r indirectl	a)(1) or se ete lines 1 Type III–N y by one	ection 50 1e throu Ion-func or more	9(a)(2). See s gh 11h. tionally integr disqualified p	section ated persons
		section 509			_			_				
f		_	ation received a check this box	a written determination		the IRS i	that it is	a Type	I, Type I	li, or Typ	oe III support	ing .
g		nce August llowing pers		he organization acce	pted any	gift or co	ontributio	n from a	iny of the)		
	(i)			ndirectly controls, eit								s No
		(iii) below,	the governing b	ody of the supported	organızat	ion?					11g(i)	
	(ii)	A family m	ember of a pers	on described in (i) abo	ove?						11g(ii)	
	•	•	•	a person described in							11g(iii)	
<u>h</u>	Pr	ovide the fo	llowing informat	on about the support	<u>-</u> -							
(i) ł		of supported nization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the orga	ou notify nization in of your port?	organizat (i) organi	is the tion in col zed in the S?	(vii) Amount of r support	-
				' "	Yes	No	Yes	No	Yes	No]	
(A)												
(B)										-		
(C)					-							
(D)												
(E)												
									-		-	
Total							1	1				0

55,1000							
Part							
	(Complete only if you checked the						iaiity under
Cast	Part III. If the organization fails to	quality unde	er the tests is	sted below, p	lease comple	ete Part III.)	
	ion A. Public Support	(=) 0000	(h) 0010	(-) 0011	(4) 2012	(-) 2012	/O Total
	dar 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	Tax revenues levied for the organization'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						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.				<u> </u>		
	on B. Total Support		T	I	1	1	T
	idar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						<u> </u>
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 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc	•	•			12	on 501/p\/2\
13	First five years. If the Form 990 is for the organization, check this box and stop he	-			_		
Soot	ion C. Computation of Public Suppor					· · · ·	
14	Public support percentage for 2013 (line			11 column (fl)		14	%
15	Public support percentage from 2012 Sch					15	%
16a		zation did not	check the box	on line 13, an	d line 14 is 33¹	3% or more, o	check this
b	331/3% support test—2012. If the organ check this box and stop here. The organ					e 15 is 33¹/3% 	or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization	ets the "facts-	and-circumsta	inces" test, ch	eck this box a	nd stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizar Explain in Part IV how the organization m supported organization	tion meets the	e "facts-and-c s-and-circums	ircumstances"	test, check tl	his box and s	top here. a publicly
18	Private foundation. If the organization di	d not check a			a, or 17b, chec	k this box and	► _

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

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

Secti	on A. Public Support		•				
Calen	dar 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	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the)		ļ	1		
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an		-				
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
•	organization without charge						
6 7-	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3			<u> </u>			
/ d	received from disqualified persons .					·	
	•				 		
b	Amounts included on lines 2 and 3 received from other than disqualified	ĺ		ĺ	1		
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	1			1		
c	Add lines 7a and 7b				 		 -
8	Public support (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6			<u> </u>			
10a	Gross income from interest, dividends,		İ				
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
ь	Unrelated business taxable income (less				1		
	section 511 taxes) from businesses acquired after June 30, 1975						
_	•				 		
	Add lines 10a and 10b				 		
11	Net income from unrelated business activities not included in line 10b, whether			1	1	l	
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part IV.)	}		}	1		
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			1			
14	First five years. If the Form 990 is for the	ne organization	n's first, secon	d, third, fourth	n, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	re		<u></u>		<u></u> .	▶ 🗆
	on C. Computation of Public Support						
15	Public support percentage for 2013 (line						%_
16	Public support percentage from 2012 Sc			<u></u>	<u> </u>	16	<u>%</u>
	on D. Computation of Investment In			r: 45			
17	Investment income percentage for 2013 (<u>%</u>
18	Investment income percentage from 2013						% and line
19a	331/2% support tests—2013. If the organ 17 is not more than 331/2%, check this box						
4.	331/3% support tests—2012. If the organization						
ь	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di		-				_
~~				, <u></u> -,			

Schedule A (F	orm 990 or 990-EZ) 2013	ige 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; are Part III, line 12. Also complete this part for any additional information. (See instructions).	nd
==== N	ONE ====	
1		
	······································	
		
	Part III, line 12. Also complete this part for any additional information. (See instructions). NONE =====	

SCHEDULE D (Form 990) ·

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.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

► Attach to Form 990. Department of the Treasury ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization

FRIE	NDS OF MOSDOT GOOR		13-3065542
Par	Organizations Maintaining Donor	r Advised Funds or Other Similar Fur	nds or Accounts.
_	Complete if the organization answer	ered "Yes" to Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the assets I	neld in donor advised
•	funds are the organization's property, subject	t to the organization's exclusive legal contr	ol? Yes . No
6	Did the organization inform all grantees, don		
0	only for charitable purposes and not for the		
	conferring impermissible private benefit?		
D			· · · · · · · · · · · · · · · · · · ·
Par			
		ered "Yes" to Form 990, Part IV, line 7.	·
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e.g., r		
	☐ Protection of natural habitat	☐ Preservation of	of a certified historic structure
	☐ Preservation of open space	•	
2	Complete lines 2a through 2d if the organizat	on held a qualified conservation contributi	
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements .		2a
b	Total acreage restricted by conservation ease	ements	2b
C	Number of conservation easements on a cert	ified historic structure included in (a)	2c
d	Number of conservation easements include	ed in (c) acquired after 8/17/06, and not	on a
	historic structure listed in the National Regist	er	· · 2d
3	Number of conservation easements modified	, transferred, released, extinguished, or ter	minated by the organization during the
-	tax year ▶	,	. •
4	Number of states where property subject to o	conservation easement is located ►	
5	Does the organization have a written poli-		spection, handling of
•	violations, and enforcement of the conservat		
6	Staff and volunteer hours devoted to monitor		
•	Note that the volume of the transfer of the tr	g,epoolg, ae oe.eg oee.	,
7	Amount of expenses incurred in monitoring,	nspecting, and enforcing conservation eas	ements during the year
•	►\$	riopooting, and omoroning ourselvation due	, ,
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	of section 170(h)(4)(B)
O			
_	In Part XIII, describe how the organization rep		
9	balance sheet, and include, if applicable, the	toyt of the feetnets to the organization's fi	nancial statements that describes the
	organization's accounting for conservation ea		Haricial Statements trial describes the
	-		r Other Similar Assets
Par		ctions of Art, Historical Treasures, o	
		ered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted und	er SFAS 116 (ASC 958), not to report in it	s revenue statement and balance sneet
	works of art, historical treasures, or other s	similar assets held for public exhibition, e	ducation, or research in turnerance of
	public service, provide, in Part XIII, the text of		
b	If the organization elected, as permitted un	der SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other s		ducation, or research in furtherance of
	public service, provide the following amounts	-	
	(i) Revenues included in Form 990, Part VIII,	line 1	▶ \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works	of art, historical treasures, or other simila	ar assets for financial gain, provide the
_	following amounts required to be reported ur		
а	Revenues included in Form 990, Part VIII, line		
ь	Assets included in Form 990, Part X		

Par	III Organizations Maintaining (Collections of	Art, His	torical 1	reasures,	or Ot	her Similar A	ssets (co	ntinued)
3	Using the organization's acquisition, a collection items (check all that apply):								
а	☐ Public exhibition		d	☐ Loan	or exchange	e prog	rams		
b	☐ Scholarly research		е	☐ Other	r				
С	☐ Preservation for future generations								
4	Provide a description of the organization XIII.	on's collections	and expla	ain how t	hey further t	the org	ganization's exe	empt purpo	ose in Part
5	During the year, did the organization sassets to be sold to raise funds rather t	han to be mainta							es 🗌 No
Par				-					
	Complete if the organization a 990, Part X, line 21.						·		Form
1a	Is the organization an agent, trustee, included on Form 990, Part X?								es 🗌 No
b	If "Yes," explain the arrangement in Par	t XIII and compl	ete the fo	llowing ta	able:	_			
	B 1 1 1 1					_		Amount	
C	Beginning balance					10			
d e	Additions during the year					1d			
f	Ending balance					1f			
2a	Did the organization include an amount								os 🗆 No
	If "Yes," explain the arrangement in Par								
	t V Endowment Funds.								
	Complete if the organization a	answered "Yes	" to For	n 990, P	art IV, line	10.			
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years ba	ck (e) Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the			e (line 1g	, column (a)) held a	as.		
a	Board designated or quasi-endowment	-	%						
D	Permanent endowment ► Temporarily restricted endowment ►	%							
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c	'	1004						
3a	Are there endowment funds not in the organization by:			zation tha	at are held a	and ad	ministered for		Yes No
	(i) unrelated organizations							. 3a(i)	103 110
	(ii) related organizations							. 3a(ii)	
b	If "Yes" to 3a(ii), are the related organiz							. 3b	
4	Describe in Part XIII the intended uses	of the organization	on ⁱ s endo	wment fu	unds.				<u>'</u>
Part	VI Land, Buildings, and Equipm	nent.						-	
	Complete if the organization a	answered "Yes	" to Forr	n 990, P	art IV, line	11a. S	See Form 990	, Part X, li	ne 10.
	Description of property	(a) Cost or ot (investm		1 ' '	r other basis ther)		Accumulated epreciation	(d) Boo	k value
1a	Land								
b	Buildings								
C	Leasehold improvements								
d	Equipment								
e Takal	Other	int naved 5 2	00.05=1		(D) P== 40	(a) !			
Intal	Add lines 1a through 1e. (Column (d) mi	isi equal Form 9:	su. Part)	s. coiumn	i ioi. iine 101	CLI.			

Part VII	Complete if the organization answ	vered "Yes" to For	m 990. Part IV.	line 11b. See Forr	n 990. Part X. line 12.
	(a) Description of security or category (including name of security)	VOI 00 10 10 10 10 10 10 10 10 10 10 10 10	(b) Book value	(c) M	ethod of valuation: nd-of-year market value
(1) Financial				Cost of ea	id-oi-year market value
	neld equity interests				
	• •				
(S) Other (A)					
(B)					
(C)				- 	
(D)					
(E)					
(F)					
(G)					
(H)			ļ		
	b) must equal Form 990, Part X, col (B) line 12.)	· 			
Part VIII	Investments — Program Related Complete if the organization answ		m 990, Part IV,	, line 11c. See Forr	n 990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) N	lethod of valuation
(1)	· · · · · · · · · · · · · · · · · · ·			Cost or er	
(1)			-		
(2)			 		·
(3)					· · · · · · · · · · · · · · · · · · ·
(4)					···-
(5)			-		
(6)					
(7)					
					·····
(9)					
	b) must equal Form 990, Part X, col (B) line 13.)				
Part IX	Other Assets.			_	
	Complete if the organization ansv		<u>m 990, Part IV,</u>	line 11d. See Forr	
	(a)	Description			(b) Book value
(1)					
(2)			<u> </u>		
(3)				<u>.</u>	
(4)					
(5)					
(6)					
(7)			-		
(8)					
(9)					
Total. (Colu	mn (b) must equal Form 990, Part X, co	l. (B) line 15.)			
Part X	Other Liabilities.		-		
	Complete if the organization answ	vered "Yes" to For	m 990, Part IV,	line 11e or 11f. Se	e Form 990, Part X,
	line 25.		,		, ,
1.	(a) Description of liability	(b) Book value			
(1) Federal in	come taxes				
	AL PAYROLL TAXES		161		
	TERM INTEREST FREE LOAN	6,352			
(4)	The state of the s	0,332			
(5)					
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 25.) ▶	6,352,			
	uncertain tax positions. In Part XIII, provide				
organization's	s liability for uncertain tax positions under	FIN 48 (ASC 740) Che	eck here if the text	t of the footnote has be	een provided in Part XIII

Par	Reconciliation of Revenue per Audited Financial Stateme		Retum.
	 Complete if the organization answered "Yes" to Form 990, F 		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1	
a	Net unrealized gains on investments	2a	_
b	Donated services and use of facilities	2b	4
¢	Recoveries of prior year grants		_
d	Other (Describe in Part XIII.)		_ 1
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4 1
b	Other (Describe in Part XIII.)	4b	4 . 1
c	Add lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part	Reconciliation of Expenses per Audited Financial Statem		er Return.
	Complete if the organization answered "Yes" to Form 990, F		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	Fa I	
a	Donated services and use of facilities	2a	4 1
p	Prior year adjustments	2b	4
C	Other losses		-
q	Other (Describe in Part XIII.)		- _
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1
a		4a	-
b	Other (Describe in Part XIII.)	4b	- _
С 5	Add lines 4a and 4b		4c 5
	XIII Supplemental Information.	e 10.)] 3
	the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	d 4: Part IV lines 1h and 2	h: Part V line 4: Part Y line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part		
-,		р. с. н.е, с. с	· · · · · · · · · · · · · · · · · · ·
		•••••	·····
		.,,,	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

Open to Public

Department of the Treasury

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Internal Revenue Service	on about sche	- Troilis			inspection
Name of the organization				' '	r identification number
		ies Outside 1	the United States. Comp	13-30 blete if the organization a	
Form 990, Part IV, line					
1 For grantmakers. Does the assistance, the grantees' el					
grants or assistance?		_			
•					
2 For grantmakers. Describ assistance outside the Unit		the organization	on's procedures for monit	oring the use of its gra	ints and other
3 Activities per Region. (The fo	ollowing Part	I, line 3 table o	an be duplicated if addition	nal space is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) ISRAEL	0	2	VERIFICATION		66,192
(0) = 0.0.2.5			CD A VITTO		10 024 102
(2) ISRAEL	0	0	GRANTS		10,924,103
(3)					
(4)	<u> </u>				
(5)					
(3)	 				
(6)					
(7)	 				
(8)					
(9)					
(10)					
(10)	 	<u>. </u>			
(11)					
(12)					
(13)					
			-		
(14)					
(15)					
(16)					
(17)					
3a Sub-total		2			10,990,295
b Total from continuation			1		

sheets to Part I

c Totals (add lines 3a and 3b)

10,990,295

Page 2

Schedule F (Form 990) 2013

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. Part II

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)
(E)	***************************************	******	PLEASE REFER	TO ATTACHED SC	SCHEDULE				
(3)									
(4)									
(5)									
9									
<u> </u>									
(8)									
6									
10									
= = = = = = = = = = = = = = = = = = = =									
(12)									
13)									
(14)	:								
(15)									
(16)									
							•		

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 ď

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 Grants be duplicated if additional space is needed.

(a) Type of grant or assistance	of grant or assistance (b) Region (c) Number of recipients	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal,
							other
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
							!

Dage	4
raue	

Part	V	Foreign Forms		
1	the c	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign coration (see Instructions for Form 926)	☐ Yes	⊠ No
2	may Rece	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and eipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	X No
3	the c	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To ain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	⊠ No
4	quali Infor	the organization a direct or indirect shareholder of a passive foreign investment company or a field electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, mation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing It. (see Instructions for Form 8621)	☐ Yes	⊠ No
5	the d	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain ign Partnerships. (see Instructions for Form 8865)	☐ Yes	⊠ No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If ," the organization may be required to file Form 5713, International Boycott Report (see Instructions form 5713)	Yes	X No

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Employer identification number

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

FRIENDS OF MOSDOT GOOR						13-3065542	5542
Part General Information on Grants and Assistance	n on Grants and	Assistance					
1 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 criteria used to award the grants or assistance?	ain records to subsiderants of	tantiate the amour or assistance?	nt of the grants or	assistance, the g	rantees' eligibility fo	r the grants or assistance,	and XYes No
2 Describe in Part IV the organization's procedures for monitor	rization's procedure	es for monitoring the	ing the use of grant funds in the United States.	nds in the United	States.		
Part II Grants and Other Assistance to Governments a Part IV. line 21, for any recipient that received more	ssistance to Gor	vernments and eceived more that	Organizations i	n the United SI	ind Organizations in the United States. Complete if the organization e than \$5,000. Part II can be duplicated if additional space is needed.	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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	red "Yes" to Form 990,
1 (a) Name and address of organization or government	(b) EIN		(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	PLEASR REFER	TO ATTACHED	STATEMENT				
(2)							
(3)							
(4)							
(5)							
(9)							
(2)							
(8)	1						
(6)							
(10)							
(11)							
(12)							
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	n 501(c)(3) and gov organizations listed	ernment organizat in the line 1 table	ions listed in the li	ine 1 table			A A
For Paperwork Reduction Act Notice, see the Instructions for Form 990	, see the Instruction	s for Form 990.					Schedule I (Form 990) (2013)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

FRIENDS OF MOSDOT GOOR	13-3065542
FRIENDS OF FIOSDOT GOOK	13 3003342
PAGE #6 PART VI LINE 11B	
PROCESS TO REVIEW FORM 990 :	
TAX RETURN IS SENT FOR REVIEW BY THE BOARD. UPON REVIEW AND BOARD.	ARD APPROVAL
THE TAX RETURN IS FILED.	
PAGE #6 PART VI LINE 11B	
CONFLICT OF INTERESTS :	
EMPLOYEES ARE REQUIRED TO REPORT ANY CONFLICT OF INTEREST SITU	ATIONS.
FAILURE TO REPORT CAN RESULT IN TERMINATION OF EMPLOYMENT.	
PAGE #6 PART VI LINE 19	
PUBLIC DISCLOSURE :	
UPON REQUEST THE PUBLIC MAY REVIEW PERTINENT DOCUMENTS AT THE	ADDRESS
ON THE FIRST PAGE OF THE RETURN.	
THE RETURN MAY ALSO BE REVIEWED ON THE GUIDESTAR.ORG WEBSITE.	
THERE HAVE BEEN NO CHANGES IN POLICY OR STRUCTURE FOR THIS YEAR	R.
	
•••••••••••••••••••••••••••••••••••••••	