Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No. 1545-0047 Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

АГ	or the	e 2012 calendar year, or tax year beginning and	enaing		
B C	heck if	C Name of organization		D Employer identifi	cation number
	Addre chang	America-Israel Friendship League, Inc	•		
	Name chang	Doing Business As		23-7	252135
	Initial return		Room/suite		
	Termii ated	IJ4 East Jyth Bileet		212-	213-8630
	Amen	City, town, or post office, state, and ZIP code		G Gross receipts \$	1,572,299.
	Applic tion pendi	New TOLK, NI TOUTO		H(a) Is this a group re	eturn
	perior	F Name and address of principal officer: LTa J. GreenDlatt		for affiliates?	Yes X No
		same as C above		H(b) Are all affiliates inc	cluded? Yes No
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) €	or 527	If "No," attach a	list. (see instructions)
		te: > www.aifl.org		H(c) Group exemptio	
		organization: X Corporation Trust Association Other	∟ Year	of formation: 1971	M State of legal domicile: NY
Pa	ırt I	Summary			
ĕ	1	Briefly describe the organization's mission or most significant activities: ${\hbox{\tt To}}\ {\hbox{\tt p}}$			
Activities & Governance		cultural exchange programs as well as pro			
ern	2	Check this box if the organization discontinued its operations or dispose	sed of mor		
λoκ				3	79
8 (Number of independent voting members of the governing body (Part VI, line 1b)			79
ies	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)			7
ivit		Total number of volunteers (estimate if necessary)			0
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
Pe	8	Contributions and grants (Part VIII, line 1h)		750,288.	1,475,967.
enı	9	Program service revenue (Part VIII, line 2g)		401,855.	0.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		91.	82.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		189,890.	-213,861.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,342,124.	1,262,188.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		491,091.	573,604.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 270,8		0.	0.
χb	b	Total fundraising expenses (Part IX, column (D), line 25)	94.		
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		845,574.	814,480.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,336,665.	1,388,084.
		Revenue less expenses. Subtract line 18 from line 12		5,459.	-125,896.
Net Assets or Fund Balances			В	eginning of Current Year	End of Year
sser 3alai	20	Total assets (Part X, line 16)		503,503.	323,422.
ad E	21	Total liabilities (Part X, line 26)		7,994.	29,856.
		Net assets or fund balances. Subtract line 21 from line 20		495,509.	293,566.
	ırt II	Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedule		•	y knowledge and belief, it is
rue,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of when the complete is the complete.	nich prepare	r has any knowledge.	
		Signature of officer		I Date	
Sigr			a 1		
Her	е	Ira J. Greenblatt, Treasurer Type or print name and title	Coby		
		Distance and sales and sales and sales are sales and sales are sal		Date Check	II PTIN
ריים		Ira J. Greenblatt, Treasurer Type or print name and title Print/Type preparer's name Scott M. Brenner Preparer's signate 3	.	L0/02/13 Check Lif self-employ	
Paid Pron	ı Darer	Firm's name Dylewsky, Goldberg & Brenner, Li	LC	LU/UZ/L3 self-employ	06-1325235
	Only	Firm's name Dylewsky, Goldberg & Brenner, Li Firm's address 30 Oak Street	цС	Firm's EIN	00-1343433
ust	Jilly	Stamford, CT 06905		Dhone no /	203)975-8830
110	, +b = "	<u> </u>		Phone no. (X Yes No
viav	rme II	RS discuss this return with the preparer shown above? (see instructions)			L41 Tes L No

(Code:) (Expenses \$ _	including grants of) (Reve	nue \$
Public Information	tion/education.		
Other program services (Des	cribe in Schedule O.)		
(Expenses \$	including grants of \$) (Revenue \$)
Total program service expe	nses ► 899,729.		·

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
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 for			
Ū	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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
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		Х
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	
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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	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		v	
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	45		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		
.0	located outside the United States? 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	17	Х	
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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
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?			Х
20	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		^
32	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
	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	X	1

Form 990 (2012) America-Israel Friendship League, Inc. Part V Statements Regarding Other IRS Filings and Tax Compliance

a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1	X X X
b Enter the number of Forms W-2G included in line 1a. Enter -0 · if not applicable	X X X
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 reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? b 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? 5a A tany 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)? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8888-T? 5b Did any taxable party notify the organization file Form 8888-T? 5c Dates the organization and 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 Dates the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible with every solicitation and party for goods and services provided to the payor? 7b Organizations that may receive deductible contributions under section 170(c). a Did the organizati	X X X
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Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) lot the organization have unrelated business gross income of \$1,000 or more during the year? lot the organization have unrelated business gross income of \$1,000 or more during the year? lot the organization have unrelated business gross income of \$1,000 or more during the year? lot the organization have unrelated business gross income of \$1,000 or more during the year? lot the organization have unrelated business gross income of \$1,000 or more during the year? lot the organization have unrelated business gross income of \$1,000 or more during the year? lot the organization have unrelated business gross income of \$1,000 or more during the year? lot the organization have unrelated business gross income of \$1,000 or more during the year? lot the organization at he organization have an interest in, or a signature or other authority over, a financial account in a foreign country; lot the organization at expert of foreign Bank and Financial account)? lot the organization of the foreign country; lot of Foreign Bank and Financial Accounts. lot the organization aparty to a prohibited tax shelter transaction of the prome see instructions of filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. lot 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? lot the organization shall aparty to a prohibited tax shalter transaction of the supporting of the very shall be organization receive a payment in excess of \$75 made partly as a contribution and partly	X X X
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3a b If "Yes," has it filed a Form 990-T for this year? If 'No," provide an explanation in Schedule O 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)? 4b 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? 5b If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 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? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 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 The 6b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b If "Yes," indicate the number of Forms 8282 filed during the year 6c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c The 7d If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 7f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting org	X X X
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9 Sponsoring organizations maintaining donor advised funds.	
Did the appropriation make any toyohla distributions under action 10000	
a Did the organization make any taxable distributions under section 4966? 9a	
b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter:	
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	
11 Section 501(c)(12) organizations. Enter:	
a Gross income from members or shareholders	
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?	
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.	
a Is the organization licensed to issue qualified health plans in more than one state?	
Note. See the instructions for additional information the organization must report on Schedule O.	
b Enter the amount of reserves the organization is required to maintain by the states in which the	
organization is licensed to issue qualified health plans	
c Enter the amount of reserves on hand 13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	Х
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	

Form 990 (2012) America-Israel Friendship League, Inc. 23-7252135 Page 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. X

	Check if Schedule O contains a response to any question in this Part VI				X
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a '	79		
	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	1b	79		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with any other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under th	e direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?	5		X
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximately appr	point one or			
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s				
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the following:			
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?			X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)			
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? \dots		10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y before filing the form	? <u>11a</u>	X	
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	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 "Y	es," describe			
	in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al 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	X	
b	Other officers or key employees of the organization		15b	X	
	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 arranger	nent with a			
	taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	nization's			
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ►NY				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	(Section 501(c)(3)s on	ly) availat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.				
		in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict of interest policy,	and fina	ncial	
	statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the books at	nd records of the organ	ization:	-	
	The Organization - 212-213-8630				
	134 East 39th St., New York, NY 10016				

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

Check if Schedule O contains a response to any question 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.

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

- 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)	(B)	l		(((D)	(E)	(F)
Name and Title	Average	(do		Pos	ition	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle: cer an	ss pe d a d	rson irecto	is bot or/trus	h an tee)	1 '	compensation	amount of
	week (list any	tor						from the	from related organizations	other compensation
	hours for	r direc				ted		organization	(W-2/1099-MISC)	from the
	related	stee o	rustee		a.	pensa		(W-2/1099-MISC)		organization
	organizations below	ual tru	ionalt		ploye	t com				and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Hon. Robert Abrams	1.00									
Vice President		Х		Х				0.	0.	0.
(2) Kenneth J. Bialkin, Esq.	5.00								_	_
Chairman of the Board		Х		Х				0.	0.	0.
(3) Dr. June Dempsey	3.00								_	_
Vice President		Х		X				0.	0.	0.
(4) Dr. Charlotte K. Frank	5.00									•
Chair, Executive Committee	F 00	Х		Х				0.	0.	0.
(5) Peter J. Halasz, Esq.	5.00									0
Secretary	F 00	Х		Х				0.	0.	0.
(6) Ira J. Greenblatt	5.00	,,		77						0
Treasurer	1.00	Х		Х				0.	0.	0.
(7) Carol W. Karsch Vice President	1.00	x		х				0.	0.	0.
(8) Prof. Richard B. Stone	1.00	^		Λ				0.	0.	<u>U•</u>
Vice President	1.00	x		х				0.	0.	0.
(9) Mortimer B. Zuckerman	1.00	^		Λ					•	<u></u>
Honorary President	1.00	Х		Х				0.	0.	0.
(10) Amb. Frederic V. Malek	1.00								•	
Vice President		x		х				0.	0.	0.
(11) Harley Lippman	1.00	 								
President		х		х				0.	0.	0.
(12) Paul M. Kaplan, Esq.	1.00									
Vice President		Х		Х				0.	0.	0.
(13) Efrat Abrams	1.00									
Director		Х						0.	0.	0.
(14) Ron Agam	1.00									
Director		Х						0.	0.	0.
(15) Ronald S. Baron	1.00									_
Director		Х					L	0.	0.	0.
(16) Yariv C. Ben-Ari, Esq.	1.00									
Director		Х						0.	0.	0.
(17) Leonard Blavatnik	1.00	_						_	_	_
Director		Х						0.	0.	0.

								eague, inc.	23-7	<u> </u>	<u> 135</u>	Pa	age 8
Part VII Section A. Officers, Directors, Trus		ploy	/ees			ighe	st C		ees (continued)				
(A)	(B)			_ (0				(D)	(E)			(F)	
Name and title	Average	(do	not c	Pos			one	Reportable	Reportable	Э	Es	timate	∌d
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensati	on	an	nount	of
	week	\vdash	Cer ai	iu a u	II ecit	Ji / ii us	lee)	from	from relate			other	
	(list any	or director						the	organization		l	pensa	
	hours for related	ordi	gg.			ated		organization	(W-2/1099-MI	SC)		om the	
	organizations	重	trust		a.	bens		(W-2/1099-MISC)				anizat d relat	
	below	ual tr	ional		ploye	tcom	١.						
	line)	Individual t	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer				orga	anizati	0115
(18) Lawrence S. Block, Esq.	1.00	-	-			1 0	<u> </u>						
Director		X						0.	.	0.			0.
(19) George S. Blumenthal	1.00												
Director		x						0.	.	0.			0.
(20) Prof. Marshall J. Breger	1.00												
Director		x						0.	.	0.			0.
(21) Doron Cohen	1.00												
Director		x						0.	.	0.			0.
(22) Dr. Michael C. Curtis	1.00												
Director		Х						0.		0.			0.
(23) J. Morton Davis	1.00												
Director		Х						0.	•	0.			0.
(24) Trudy Di Pippo	1.00												
Director		Х						0.	•	0.			0.
(25) Jennifer Edelman	1.00												
Director		Х						0.	•	0.			0.
(26) Asher Fogel	1.00												
Director		X						0.		0.			0.
1b Sub-total								0.		0.			0.
c Total from continuation sheets to Part VI	II, Section A							111,880.		0.		2,6	
d Total (add lines 1b and 1c)						<u> </u>		111,880.	•	0.		2,6	40.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bove	e) wl	ho r	eceived more than \$10	0,000 of reportat	ole			_
compensation from the organization												· ·	1
												Yes	No
3 Did the organization list any former officer,	•		e, ke	ey er	nplo	yee	, or	highest compensated	employee on		_		37
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su											_		37
and related organizations greater than \$150											4		X
5 Did any person listed on line 1a receive or a	•				-			•			_		37
rendered to the organization? If "Yes," com	ipiete Schedul	e J t	or s	ucn _i	pers	son					5		X
Section B. Independent Contractors									ф100 000 г		,		
1 Complete this table for your five highest co										npens	ation t	rom	
the organization. Report compensation for (A)	the calendar y	ear	enai	ng v	vitri	or w	/Itmir	n the organization's tax (B)	year.	l	(C	•1	
Name and business	address	N	INC	Ξ				Description of	services	c	compe		n
							_						

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

D 17/11						_		eague, Inc.	23-725	2135
Part VII Section A. Officers, Directors, 1		mple	oyee			ligh	est			
(A) Name and title	(B) Average hours	(cl	heck	Pos all	ition		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) Abraham H. Foxman Director	1.00	x						0.	0.	0
(28) Leonard Fuhrer	1.00							_		
Director		Х						0.	0.	0
(29) James S. Gertler	1.00	x						0.	0.	0
Director	1 00	^	_					0.	0.	<u> </u>
(30) Jack Halpern Director	1.00	x						0.	0.	0
(31) Rev. William H. Harter	1.00									
Director		Х						0.	0.	0
(32) Robert N. Hatch Director	1.00	x						0.	0.	0
	1.00	^						0.	0.	
(33) Irwin Hochberg, CPA Director	1.00	x						0.	0.	0
(34) Malcolm Hoenlein	1.00									
Director	2,00	Х						0.	0.	0
(35) Niambi Jarvis	1.00									
Director		Х						0.	0.	0
(36) Gol Kalev	1.00									
Director		Х						0.	0.	0
(37) Henry Kasindorf Director	1.00	x						0.	0.	0
	1.00	Δ						0.	0.	
(38) Sen. Robert W. Kasten, Jr. Director	1.00	x						0.	0.	0
(39) Larry King	1.00							-		
Director		Х						0.	0.	0
(40) Harvey M. Krueger	1.00									
Director		Х						0.	0.	0
(41) Dr. Vladimir L. Kvint	1.00									
Director		Х						0.	0.	0
(42) Howard L. Margulis, Esq.	1.00									0
Director	1 00	Х						0.	0.	0
(43) Dr. David Milch Director	1.00	x						0.	0.	0
(44) Brian T. O'Connor, Esq.	1.00									
Director		х						0.	0.	0
(45) Melvyn H. Parness	1.00							, ,		
Director		х						0.	0.	0
(46) Raymond M. Patt, Esq.	1.00									
Director		Х	L	L	L		L	0.	0.	0
Total to Part VII, Section A, line 1c										

	Israel 1	ŀr:	Ler	<u>ids</u>	shi	Ĺр	Le	eague, Inc.	23-725	2135
Part VII Section A. Officers, Directors, Tr	ustees, Key Eı	mplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(C	C)			(D)	(E)	(F)
Name and title	١		Posi				Reportable	Reportable	Estimated	
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per week					g.		from the	from related organizations	other compensation
	(list any	ctor				nploy		organization	(W-2/1099-MISC)	from the
	hours for	ordirector				ted en		(W-2/1099-MISC)	,	organization
	related	stee o	rustee			ensai				and related
	organizations	ıal fru	onal t		ployee	шоо				organizations
	below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) Joan Peters	1.00	=	=	0	~	H	-			
Director		x						0.	0.	0
(48) Rabbi Joseph Potasnik	1.00									
Director		Х						0.	0.	0
(49) Richard Ravitch	1.00									
Director		Х						0.	0.	0
(50) Robert Rothenberg	1.00									
Director		Х						0.	0.	0
(51) Howard J. Rubenstein	1.00									
Director	1 00	Х						0.	0.	0
(52) Zeev Rubinstein	1.00	٠,,							_	0
Director	1.00	Х						0.	0.	0
(53) Rabbi Arthur Schneier Director	1.00	x						0.	0.	0
(54) Richard Schwartz	1.00	^						0.	0.	0
Director	1.00	x						0.	0.	0
(55) Hon. Mark Shurtleff	1.00							0.	0.	0
Director	1.00	x						0.	0.	0
(56) Dennis I. Simon	1.00									
Director		х						0.	0.	0
(57) Dr. S. Fred Singer	1.00							-		
Director		x						0.	0.	0
(58) Arthur M. Siskind	1.00									
Director		Х						0.	0.	0
(59) David P. Steinmann	1.00									
Director		Х						0.	0.	0
(60) Bruce Teitelbaum	1.00									
Director		Х						0.	0.	0
(61) Hon. William C. Thompson, Jr.	1.00									
Director	1 00	Х						0.	0.	0
(62) Maj.Gen. Paul E. Vallely(Ret)	1.00									•
Director	1 00	Х						0.	0.	0
(63) Allen A. Vine	1.00	. ,							_	0
Director	1 00	Х						0.	0.	0
(64) Herbert S. Wander, Esq. Director	1.00	x						0.	0.	0
(65) Ralph Wanger	1.00	^			\vdash	<u> </u>		0.	0.	U
Director	1.00	x						0.	0.	0
(66) Josh S. Weston	1.00							0.	0.	0
Director	1.00	Х						0.	0.	0
	1	1	L							0

B								eague, Inc.	23-725	2135
Part VII Section A. Officers, Directors, 7	Trustees, Key Eı	mple	oyee			ligh	est	Compensated Employ	rees (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	١,,		Pos				Reportable	Reportable	Estimated
	hours per	(cl	heck	(all 1	that	app	ly)	compensation from	compensation from related	amount of other
	week (list any	tor				ployee		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	or director				ed em		(W-2/1099-MISC)	(** 2/ 1000 1/1100)	organization
	related	stee or	ustee			ensat		,		and related
	organizations	al frus	onal tr		loyee	dwoo				organizations
	below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(67) Irwin Winkler	1.00									
Director		Х						0.	0.	0
(68) Richard Wolf	1.00								_	_
Director		Х						0.	0.	0
(69) Yacov Wrocherinsky	1.00									•
Director	1 22	Х			_			0.	0.	0
(70) Frank G. Zarb	1.00									_
Director	1 00	Х		_	_			0.	0.	0
(71) Clive Chajet	1.00	٠,,							_	0
Director	1.00	Х						0.	0.	0
(72) Judi Sorensen Flom Director	1.00	Х						0.	0.	0
(73) Gary Ginsberg	1.00	^						0.	0.	U
Oirector	1.00	Х						0.	0.	0
(74) Bernard Groveman	1.00							0.	0.	-
Director	1.00	x						0.	0.	0
(75) Eric Herschmann	1.00							•	•	
Director		x						0.	0.	0
(76) Ronald Lauder	1.00							-	<u> </u>	
Director		x						0.	0.	0
(77) Michael Mukasey	1.00									
Director		Х						0.	0.	0
(78) Jeffrey Schoenfeld	1.00									
Director		Х						0.	0.	0
(79) Arthur Stark	1.00									
Director		Х						0.	0.	0
(80) Alex Grobman	40.00							444 666		
Executive Director				Х				111,880.	0.	2,640
		_								
	<u>'</u>							111 000		0.515
Total to Part VII, Section A, line 1c								111,880.		2,640

Pa	rt VII	Statement of Rever	nue					
		Check if Schedule O cont	ains a response	to any question in	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	b c d e f g h		tb 1c 1d 1d ions) 1e ts, and ve 1f 1f 1f 2 in 1a-1f: \$	Business Code	1,475,967.			
	3 4 5	Investment income (including other similar amounts) Income from investment of tax Royalties	dividends, inter	est, and oroceeds	82.			82.
	6 a b	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	d 7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis		(ii) Other				
	d	and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraisin		>				
Other Revenue		including \$ 693 contributions reported on line Part IV, line 18 Less: direct expenses	,641. of 1c). See					
	9 a	Net income or (loss) from functions income from gaming action Part IV, line 19 Less: direct expenses	ctivities. See		-213,861.			-213,861.
	c 10 a b	Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	returns aa b	>				
	С	Net income or (loss) from sale						
	11 a	Miscellaneous Revenu		Business Code				
	ii a b							
	C							
		All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			1,262,188.	0.	0.	-213,779.

	on 501(c)(3) and 501(c)(4) organizations must com		er organizations must co	mplete column (A).	
20011	Check if Schedule O contains a respon		s Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		·		
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	114,520.	73,875.	25,655.	14,990.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	260 000	000 116	00 510	45.460
7	Other salaries and wages	360,288.	232,416.	80,712.	47,160.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	64 005	20.046	12 072	0 100
9	Other employee benefits	61,925.	39,946.	13,873.	8,106.
10	Payroll taxes	36,871.	23,785.	8,260.	4,826.
11	Fees for services (non-employees):				
а	Management				
	Legal	15 260		15 260	
	Accounting	15,360.		15,360.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	184,202.			184,202.
40	column (A) amount, list line 11g expenses on Sch 0.)	104,202.			104,202
12	Advertising and promotion	53,503.	37,081.	10,981.	5,441.
13	Office expenses	33,303.	37,001.	10,501.	3,441.
14	Information technology				
15	Royalties	44,400.	30,051.	11,042.	3,307.
16 17	Occupancy	13,729.	30,031.	11,669.	2,060.
17	Travel	13,723.		11,003.	2,000
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,426.		4,426.	
23	Insurance	10,772.	7,289.	2,681.	802.
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 0.)				
а	Program Expenses	448,086.	448,086.		
b	Repairs & Maintenance	23,909.	-	23,909.	
С	Dues & Bank Fees	10,293.	7,200.	3,093.	
d	Equipment Lease	4,218.		4,218.	
е	All other expenses	1,582.		1,582.	
25	Total functional expenses. Add lines 1 through 24e	1,388,084.	899,729.	217,461.	270,894.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
00001) 12-10-12				Form 990 (2012)

Pa	πx	Balance Sneet					
		Check if Schedule O contains a response to an	y questi	on in this Part X			<u></u>
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			388,527.	1	228,087.
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net			43,300.	3	83,151.
	4	Accounts receivable, net		4			
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compens	ated en	ployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual					
		section 4958(f)(1)), persons described in section	า 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 501	(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L				6	
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use		8			
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	19,771.			
	b	Less: accumulated depreciation		11,937.	11,702.	10c	7,834.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			59,974.	15	4,350.
	16	Total assets. Add lines 1 through 15 (must equ		503,503.	16	323,422.	
	17	Accounts payable and accrued expenses			1,107.	17	25,897.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Loans and other payables to current and forme	r officer	s, directors, trustees,			
jab		key employees, highest compensated employe	es, and	disqualified persons.			
_		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrel	ated thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X of			
		Schedule D		6,887.	25	3,959.	
	26				7,994.	26	29,856.
		Organizations that follow SFAS 117 (ASC 958	3), chec	k here ▶			
es		complete lines 27 through 29, and lines 33 ar	nd 34.				
anc	27	Unrestricted net assets			417,953.	27	293,566.
Bali	28	Temporarily restricted net assets			22,739.	28	0.
- Pu	29				54,817.	29	0.
Ξ		Organizations that do not follow SFAS 117 (A	SC 958	3), check here 🕨 📖			
ģ		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed	quipmer	nt fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			10= =0:	32	066 - 55
2	33	Total net assets or fund balances			495,509.	33	293,566.
	34	Total liabilities and net assets/fund balances .			503,503.	34	323,422.

America-Israel	Friendship	League,	Inc.
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Form 990 (2012)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u></u>		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,262		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,388		
3	Revenue less expenses. Subtract line 2 from line 1	3	-12!		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	49!	5,5	<u>09.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-76	6,0	<u>47.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	293	3,5	66.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
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 reviewer	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate				
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С		e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	-	За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		ı

Form **990** (2012)

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. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

America-Israel Friendship League, Inc.

23-7252135

Pa	irt i	Reason	for Public Chai	rity Status (All organiz	ations mu	st complet	te this par	:.) See inst	tructions.					
he	organ	nization is not a	a private foundation	because it is: (For lines 1	1 through	11, check	only one b	ox.)						
1	Щ	A church, cor	nvention of churche	es, or association of chur	ches desc	ribed in se	ection 170	(b)(1)(A)(i)).					
2	Щ	A school des	cribed in section 1 7	70(b)(1)(A)(ii). (Attach Sc	hedule E.)									
3	Щ	A hospital or	a cooperative hosp	ital service organization of	described	in section	170(b)(1)	(A)(iii).						
4		A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter t	the ho	ospital'	s nam	ie,
		city, and stat												
5		An organizati	ion operated for the	benefit of a college or ur	niversity o	wned or op	perated by	a governi	mental uni	t describ	ed in			
		section 170	(b)(1)(A)(iv). (Compl	ete Part II.)										
6	\square	A federal, sta	ite, or local governm	nent or governmental unit	t described	d in sectio	n 170(b)(1	I)(A)(v).						
7	X	An organizati	ion that normally red	ceives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general _l	public	c descr	ribed i	n
		section 170(b)(1)(A)(vi). (Comple	ete Part II.)										
8	Щ	A community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)								
9		An organizati	ion that normally red	ceives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, ar	nd gr	oss rec	eipts	from
		activities rela	ted to its exempt fu	nctions - subject to certa	ain excepti	ons, and (2) no more	than 33 1	1/3% of its	support	from	gross	invest	ment
		income and u	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	ınization	after .	June 3	0, 197	'5.
			509(a)(2). (Complet											
10	\square	•	•	perated exclusively to te	•	•			•					
11		•	•	perated exclusively for the						•				or
				ations described in section	. , .	•	, , ,	2). See se o	ction 509(a)(3). Che	eck th	ne box	that	
				organization and comple		-								
		a		• •	ype III - Fu	•	-		• • •	e III - Nor				-
е		, ,		at the organization is not		•	•	•		•	•			n
				than one or more publicly						9(a)(1) or	section	on 509	(a)(2).	
f		· ·		tten determination from t		•								
			rganization, check t											
g		-		organization accepted ar			•					1		
				directly controls, either al								44 (1)	Yes	No_
				supported organization?								11g(i)		
				n described in (i) above?								11g(ii)		
				a person described in (i) o							L	l1g(iii)		
h		Provide the fo	ollowing information	about the supported or	ganization	(S).								
				T	(iv) lo the e	rannization	(w) Did vo	, notify the	(vi) Is	the				
(i)		of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o			notify the	organizátio	on in col.	(vii) A	Amount		netary
	orga	anization			governing				(i) organiz U.S	ed in the .?		supp	JOIL	
				(see instructions))	Yes	No	Yes	No	Yes	No				
					103	140	103	140	103	140				
										 				
										+ +				
4.	. 1													

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 America-Israel Friendship League, Inc. 23-7252135 Page 2

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	591,133.	475,188.	1226089.	844,734.	1475967.	4613111.
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	591,133.	475,188.	1226089.	844,734.	1475967.	4613111.
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)						1267930.
6	Public support. Subtract line 5 from line 4.						3345181.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	591,133.	475,188.	1226089.	844,734.	1475967.	4613111.
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.)	3,794.					3,794.
11	Total support. Add lines 7 through 10						4616905.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 2	,225,880.
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					>
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2012 (I	ine 6, column (f) d	ivided by line 11, c	olumn (f))		14	72.46 %
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	50.73 %
16a	33 1/3% support test - 2012. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				►X
b	33 1/3% support test - 2011. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Par	t IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	neck this box and	stop here. Explain	in Part IV how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s ▶□

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

Se	qualify under the tests listed be ction A. Public Support	elow, please com	piete Part II.)				
_	endar year (or fiscal year beginning in)	(a) 2002	(b) 2000	(a) 2010	(4) 2011	(a) 2012	(f) Total
		(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
•	include any "unusual grants.")						
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						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	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						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
C	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
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.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
	check this box and stop here						
Se	ction C. Computation of Publi	c Support Pe	ercentage				
15	Public support percentage for 2012 (li	ine 8, column (f) c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2011	Schedule A, Part	t III, line 15			16	%
Se	ction D. Computation of Inves	tment Incom	ne Percentage				
17	Investment income percentage for 20	12 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2012. If the						17 is not
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2012

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
Len Blavatnik	175,000.	82,662.
Skadden Arps, Slate, Meagher & Flom	130,000.	37,662
Access Industries, Inc.	350,000.	257,662.
Arie & Ida Crowne Memorial	110,000.	17,662.
Mr. Leonard Fuhrer	102,000.	9,662.
Mr. & Mrs. Emanuel Gruss	163,000.	70,662
Bank Hapaolim	111,000.	18,662
Roger Hertog, President	100,000.	7,662.
Amb. Frederic V. Malek	100,000.	7,662.
Robert Price	112,000.	19,662.
Ira Rennert	400,000.	307,662.
Mr. Paul Singer	350,000.	257,662.
Vencent Viola	200,000.	107,662.
Ralph Wanger	100,000.	7,662.
LZW Group LLC	150,000.	57,662.
Total Excess Contributions to Schedule A, Part II, Line 5		1,267,930

Schedule B (Form 990, 990-EZ, or 990-PF)

Internal Revenue Service

Name of the organization

Department of the Treasury

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Employer identification number

2012

America-Israel Friendship League, Inc. 23-7252135 Organization type (check one): Filers of Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year. contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

America-Israel Friendship League, Inc.

23-7252135

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	1232133
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Emanuel & Raine Gruss Charitable Fdn.s 134 East 39th Street New York, NY 10016	\$ 57,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Ira Leon Rennert 134 East 39th Street New York, NY 10016	\$150,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	James S. Tisch 134 East 39th Street New York, NY 10016	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Blavatnik Family Foundation 134 East 39th Street New York, NY 10016	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Paul E. Singer Fdn. 134 East 39th Street New York, NY 10016	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	The Acorn Foundation 134 East 39th Street New York, NY 10016	\$50,000.	Person X Payroll
223452 12-2		Schedule B (Form	990. 990-EZ. or 990-PF) (2012)

Name of organization

Employer identification number

America-Israel Friendship League, Inc.

23-7252135

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Smart Family Foundation 134 East 39th Street New York, NY 10016	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Price Family Foundation 134 East 39th Street New York, NY 10016	\$100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Gregg Krowitz 134 East 39th Street New York, NY 10016	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization | Employer identification number

America-Israel Friendship League, Inc.

23-7252135

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Ameri	ca-Israel Friendship Le	ague, Inc.			23-7252135
Part III	ca-Israel Friendship Le Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc.	vidual contributions to sections to sections following line entry. For or contributions of \$1,000 or	on 501(c)(7), (8) ganizations com r less for the yea	, or (10) organizatio pleting Part III, enter r. (Enter this information once.	ns that total more than \$1,000 for the
	Use duplicate copies of Part III if addition	al space is needed.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Desc	ription of how gift is held
				-	
İ		(e) Transfe	er of gift		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	nsferor to transferee
(a) No.		())		(1) =	
Part I	(b) Purpose of gift	(c) Use of gi		(d) Desc	ription of how gift is held
		(e) Transfe	er of gift		
	Transferee's name, address, a		-	elationship of tra	nsferor to transferee
•		Id Zii T T		ciationship of trai	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Desc	ription of how gift is held
		(e) Transfe	or of gift		
	Transferee's name, address, a	.,	J	olationship of tra	nsferor to transferee
	Transferee 3 ffame, additess, at	IU ZIF + +		elationship of trai	nsier of to transfer ee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Desc	ription of how gift is held
		(e) Transfe	er of gift		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	nsferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

2012
Open to Public Inspection

Name of the organization

America-Israel Friendship League, Inc.

 $\begin{array}{c} \textbf{Employer identification number} \\ 23-7252135 \end{array}$

Pa	rt I Organizations Maintaining Donor Advis	sed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, li	ine 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		ed funds
	are the organization's property, subject to the organization'	-	
6	Did the organization inform all grantees, donors, and donor		
•	for charitable purposes and not for the benefit of the donor		
Pa	irt II Conservation Easements. Complete if the o		
1	i		
•	Preservation of land for public use (e.g., recreation or		orically important land area
	Protection of natural habitat	Preservation of a certif	
	Preservation of open space	1 100017411011 01 4 001111	The The Structure
2	Complete lines 2a through 2d if the organization held a qua	alified conservation contribution in the form o	of a conservation easement on the last
_	day of the tax year.	amed concorvation contribution in the form of	or a conservation casement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
h			
	Number of conservation easements on a certified historic s		
d			
u	listed in the National Register		2d
3	Number of conservation easements modified, transferred, r		
Ŭ	year	released, extinguished, or terminated by the	organization during the tax
4	Number of states where property subject to conservation e	easement is located	
5	Does the organization have a written policy regarding the p		
Ŭ	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about		
Ü	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conserva		
9	include, if applicable, the text of the footnote to the organiz		
	conservation easements.	Lation 3 iniancial statements that describes t	The organization's accounting for
Pa	irt III Organizations Maintaining Collections	of Art. Historical Treasures. or Ot	her Similar Assets.
	Complete if the organization answered "Yes" to Forr		
1a	If the organization elected, as permitted under SFAS 116 (A		ent and balance sheet works of art
	historical treasures, or other similar assets held for public e		
	the text of the footnote to its financial statements that desc		ice of public convice, provide, in trait with,
h	If the organization elected, as permitted under SFAS 116 (A		and halance sheet works of art, historical
-	treasures, or other similar assets held for public exhibition,		
	relating to these items:	saccation, or research in fulfillerance of pub	33, 1100, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		• \$
2	If the organization received or held works of art, historical to	reasures or other similar assets for financial	
2	the following amounts required to be reported under SFAS		gairi, provide
-		, ,	• •
d	Revenues included in Form 990, Part VIII, line 1		
D	n maatta iiiliuutu iii i uiiii aau, Fail M		Ψ Ψ

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

2. FIN 48 (ASC 740) Footnote. 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

Sche	edule D (Form 990) 2012 America-Israel Friendship League, Inc		7252135 _{Page}	4
Pai	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenu	e per Retur		
1	Total revenue, gains, and other support per audited financial statements	1	1,262,188	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments 2a			
	Donated services and use of facilities 2b			
	Recoveries of prior year grants			
	Other (Describe in Part XIII.)			
	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3	1,262,188	•
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b	4c	_	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,262,188	•
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expense	ses per Retu		
1	Total expenses and losses per audited financial statements	1	1,464,131	. •
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities 2a			
	Prior year adjustments 2b			
С				
d	Other (Describe in Part XIII.) 2d 76	,047.		
	Add lines 2a through 2d	2e	76,047	•
3	Subtract line 2e from line 1		1,388,084	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.) 4b			
	Add lines 4a and 4b	4c	0	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		1,388,084	•
Pa	rt XIII Supplemental Information			
Com	uplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV, lines 1b and	2b; Part V, line 4; Part	_
	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional			
Paı	rt X, Line 2: The League evaluates all significant ta	x provis	ions as	
rec	quired by accounting practices generally accepted in	the Unit	ed States	
of	America. As of December 31, 2012, the League does n	ot belie	ve that it	
has	s taken any positions that would require recording of	any add	itional tax	
				_
<u>lia</u>	ability nor does it believe that there are any unreal	<u>ized t</u> ax	benefits	

that would either increase or decrease within the next year. The League

is no longer subject to audits by the applicable taxing authorities for

Schedule D (Form 990) 2012

the periods prior to 2009.

Schedule D (Form 9 Part XIII Supp	990) 2012	Americ	ca-Israel	Friendship	League,	Inc.	23-7252135	Page 5
Part Alli Supp	piementai intori	mation (co	ntinued)					
Part XII,	Line 2d -	Other	Adiustme	nts:				
Write off	of Tucson	Assets	5					
				·	·		·	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047 **2012**Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990. See separate instructions. Inspection

Employer identification number

Ame	erica-Israel	Friendsh	ip Leagu	e, Inc.		23-72521	35
Pa				tside the United States. Comple	ete if the organ		
	to Form 990, Par						
1				ds to substantiate the amount of its grather the selection criteria used to award the			Yes No
2	For grantmakers. Desc United States.	cribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and ot	ther assistance ou	tside the
3	Activities per Region. (T	he following Part		an 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)	is a prog describe	vity listed in (d) gram service, e specific type ee(s) in region	(f) Total expenditures for and investments in region
Isra	ael	1	1	Program Services	Leadership	Development	92,000
3 a	Sub-total	1	1				92,000
	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a	1	1				92 000

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any								
recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the					
	the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities							

	ce to Individuals Outsid dditional space is neede		ates. Complete i	if the organization answered "Yes"	to Form 990, Part	IV, line 16.	
nt or assistance	(b) Region	(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	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2012

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

Name of the organization				, , , , , , , , , , , , , , , , , , ,		ntification number
	<u>-Israel Friendship</u>				23-7252	
Part I Fundraising Activities required to complete this par	 Complete if the organization answer t. 	ered "Y	'es" to	Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
 1 Indicate whether the organization rais a X Mail solicitations b Internet and email solicitations c X Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicitat f Solicitat g X Special or oral agreement with any individual cart VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru- fundraising services?	stees or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Development for Israel, LLC -		Yes	No			
39 Dan Street, Modiin, ISRAEL	Fundraising		Х	0.	100,000.	100,000.
Total			•		100,000.	100,000.
3 List all states in which the organization	on is registered or licensed to solicit	contrib	utions	s or has been notified	d it is exempt from r	egistration
or licensing.						

Schedule G (Form 990 or 990-EZ) 2012 America-Israel Friendship League, Inc. 23-7252135 Page 2

| Part II | Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events None (add col. (a) through Gala Dinner col. (c)) (total number) (event type) (event type) Revenue 789,891. 789,891. 1 Gross receipts 693,641. 693,641. 2 Less: Contributions 96,250. 96,250. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 96,250. 96,250. Food and beverages 8 Entertainment 213,861. 213,861. Other direct expenses 310,111, 10 Direct expense summary. Add lines 4 through 9 in column (d) -213,861. 11 Net income summary. Combine line 3, column (d), and line 10. Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses _____ Yes Yes 6 Volunteer labor No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: **10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2012 America-Israel Friendship League, Inc. 2	3-7252135 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	
a The organization's facility	13a %
b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records	
The later the harmound address of the person who property the organization organization of garming openial events books and records	•
Name	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amoun	t
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
Name	
Address ▶	
16 Gaming manager information:	
Name ▶	
Coming manager companyation • •	
Gaming manager compensation \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
Mandatory distributions:a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	Yes No
retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	
organization's own exempt activities during the tax year > \$	uie
Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, column	ns (iii) and (v) and Part III
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information.	
Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundrai	sers:
/i) Name of Euroducians, Description for Translating	
(i) Name of Fundraiser: Development for Israel, LLC	
(i) Address of Fundraiser: 39 Dan Street, Modiin, ISRAEL 717	00
(-,,,,,,	
Schedule G, Part I, Line 2b, Column (v): The consultant provi	
and conducts fund raising and development activities on behal	f of the
organization.	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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.

2012
Open to Public Inspection

Name of the organization

America-Israel Friendship League, Inc.

Employer identification number 23-7252135

Form 990, Part I, Line 1, Description of Organization Mission:

friendship and understanding between the U.S. and Israel.

Form 990, Part V, Line 3b: All fees and other reported income by the organization were generated by and for the organization's primary exempt purpose and are therefore not subject to unrelated business income tax.

Form 990, Part VI, Section A, line 6: The organization is a nonprofit with members. The organization has three classes of membership in the Corporation, Voting, Honorary and Contributing, of whom only the Voting Members have voting rights. The Voting Members of the Corporation shall be and constitute the Board of Directors. The Executive Committee shall have and may exercise all powers of the Board of Directors in the managemment of property, business and affairs of the Corporation except for powers specifically required to be exercised by the full Board of Directors. The Executive Committee consists of the Chairman of the Board, the President, the Treasurer, and additional members designated by the President subject to the approval of the Board of Directors. No officer or Director of the Corporation, shall receive any compensation for the performance of his or her duties.

Form 990, Part VI, Section B, line 11: The Form 990 is reviewed by the Treasurer and subsequently distributed to the Board of Directors prior to filing.

Name of the organization America-Israel Friendship League, Inc.	Employer identification number 23-7252135
questionnaire is distributed annually to all directors an	d officers by the
president of the organization. The questionnaire response	s are then
reviewed by the Audit Committee chair.	
Form 990, Part VI, Section B, Line 15: The Executive comm	ittee determines
compensation of the Executive Director.	
Form 990, Part VI, Section C, Line 19: The organization m	
available on guidestar.org. In addition, the Forms 1023	
the audited financial statements are available upon writt	en request at 134
East 39th Street.	
Form 990, Part XI, line 9, Changes in Net Assets:	
Write-off of Tucson Assets	-76,047.
Form 990, Part XII, Line 2C	
Form 990, Part XII, Line 2C The organization has a committee that is responsible for	the oversight
The organization has a committee that is responsible for	ection of an
The organization has a committee that is responsible for of the audit, its financial statements as well as the sel	ection of an
The organization has a committee that is responsible for of the audit, its financial statements as well as the sel independent accountant. The process has not changed from	ection of an
The organization has a committee that is responsible for of the audit, its financial statements as well as the sel independent accountant. The process has not changed from	ection of an
The organization has a committee that is responsible for of the audit, its financial statements as well as the sel independent accountant. The process has not changed from	ection of an
The organization has a committee that is responsible for of the audit, its financial statements as well as the sel independent accountant. The process has not changed from	ection of an
The organization has a committee that is responsible for of the audit, its financial statements as well as the sel independent accountant. The process has not changed from	ection of an
The organization has a committee that is responsible for of the audit, its financial statements as well as the sel independent accountant. The process has not changed from	ection of an

Deprec	iation and Amor	tization Detail F	orm 990 Page	10		990
			Description	of property		
Asset Number	Date Met	had/ Life Line			A	0
Number	placed IRC	hod/ Life Line sec. or rate No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	Furniture 8	& Fixtures				
1	Sofa	•				
	04 ₂ 7 ₀ 4 _{SL}	7.00 16	1,090.		1,090.	0.
5	New Carpet	E 00 4.6	6 500		1 200	1 200
	01 ₀ 7 ₁ 11SL	5.00 16	6,500. urniture & Fi		1,300.	1,300.
	= 990 Page	10 TOTAL F	7,590.	0.	2,390.	1,300.
	Machinery 8	& Equipment		0.	2,3504	1,500.
6	Dell Capita	al Lease				
	01 ₀ 1 ₁ 11 _{SL}	3.00 16	9,075.		3,025.	3,025.
	* 990 Page	10 Total M	achinery & Eq	uipment	2 005	2 005
	D+hen		9,075.	0.	3,025.	3,025.
	Other					
	TV/VCR					
_	04 ₂ 4 ₀ 2 _{SL}	5.00 16	595.		595.	0.
3	Printer					
	02 18 05 SL	5.00 16	1,500.		1,500.	0.
4	Computer	E 00 11 C	1 011		Г	101
	050712SL * 990 Page	5.00 16 10 Total 0	1,011.			101.
		10 10001 0	3,106.	0.	2,095.	101.
	* Grand To	tal 990 Pag		• •	_/ = / = / = / = / = / = / = / = / = / =	
			19,771.	0.	7,510.	4,426.
		1 1	I I		Г	
216261			Current year section 170	(D) Asset disper		

Earm 8879-EO

IRS _{e-file} Signature Authorization for an Exempt Organization

For calendar year 2012, or fiscal year beginning	, 2012, and ending

OMB No. 1545-1878

2012

Department of the Treasury Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.

Name of exempt organization Employer identification number America-Israel Friendship League, Inc. 23-7252135 Name and title of officer Ira J. Greenblatt Treasurer Part I Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a. 2a. 3a. 4a. or 5a. below, and the amount on that line for the return being filed with this form was blank, then leave line 1b. 2b. 3b. 4b. or 5b. whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I. 1a Form 990 check here ► X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b b Total revenue, if any (Form 990-EZ, line 9) ______ 2b _____ 2a Form 990-EZ check here **b Total tax** (Form 1120-POL, line 22) _______ **3b** _____ 3a Form 1120-POL check here **b** Tax based on investment income (Form 990-PF, Part VI, line 5) 4b 4a Form 990-PF check here **b Balance Due** (Form 8868, Part I, line 3c or Part II, line 8c) 5b 5a Form 8868 check here Part II **Declaration and Signature Authorization of Officer** Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2012 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only X | authorize Dylewsky, Goldberg & Brenner, LLC do not enter all zeros as my signature on the organization's tax year 2012 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2012 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification 06200752135 number (EFIN) followed by your five-digit self-selected PIN. do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2012 electronically filed return for the organization indicated above. I

ERO Must Retain This Form - See Instructions

confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS

e-file Providers for Business Returns.

ERO's signature