

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)

2012

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning

, 2012, and ending

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C
 HIAS, Inc.
 333 7th Avenue
 New York, NY 10001

D Employer Identification Number

13-5633307

E Telephone number

212-967-4100

G Gross receipts \$ 43,827,427.

F Name and address of principal officer: Mark Hetfield
 Same As C Above

H(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) Are all affiliates included?
(If 'No,' attach a list. (see instructions)) ☐ Yes ☒ No

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: www.HIAS.ORG

H(c) Group exemption number

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of Formation: 1881

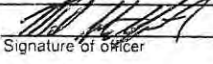
M State of legal domicile: NY

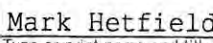
Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>HIAS provides programs and services to refugees and other displaced persons in the United States and other countries throughout the world. See also our Vision and Mission Statements in Schedule O.</u>		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	24
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	76
	6	Total number of volunteers (estimate if necessary)	6	90
Revenue	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	22,866,188.	22,529,905.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	778,983.	718,717.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,377,765.	2,342,836.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-78,938.	-172,744.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	26,943,998.	25,418,714.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	6,488,850.	6,982,955.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,029,607.	11,617,982.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	90,000.	7,500.
	b	Total fundraising expenses (Part IX, column (D), line 25)	1,435,564.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,494,024.	7,900,429.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	26,102,481.	26,508,866.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	841,517.	-1,090,152.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	61,768,095.	63,291,473.
	22	Net assets or fund balances. Subtract line 21 from line 20	14,507,772.	17,121,302.
			47,260,323.	46,170,171.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here  Signature of officer 11/14/13 Date

 Mark Hetfield President & CEO
Type or print name and title.

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name	Self-Prepared			
Firm's address			Firm's EIN	
			Phone no.	

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

Yes ☐ No ☐

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 12/18/12

Form 990 (2012)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III. ☒ **X**

1 Briefly describe the organization's mission:

HIAS provides programs and services to refugees and other displaced persons in the
United States and other countries throughout the world. See also our Vision and
Mission Statements in Schedule O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 10,929,738. including grants of \$ 9,557,470.) (Revenue \$)
Program Accomplishment #1: See Schedule O

4b (Code:) (Expenses \$ 10,616,624. including grants of \$ 9,416,088.) (Revenue \$ 718,717.)
Program Accomplishment #2: See Schedule O

4c (Code:) (Expenses \$ 1,112,417. including grants of \$) (Revenue \$)
Program Accomplishment #3: See Schedule O

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 22,658,779.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	X	
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	X	
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		X
c 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		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	X	
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		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	X	
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		X
20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	X	
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? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>	X	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	X	
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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25.</i>		X
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
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? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
25b	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? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
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? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a	a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
28b	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b	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)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		X
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? <i>If 'Yes,' complete Schedule R, Part VI.</i>		X
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.	X	

BAA

Form 990 (2012)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☒

		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1 a 38		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1 b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2 a 76		
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)	2 b	X	
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
4 a 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)?	4 a	X	
b If 'Yes,' enter the name of the foreign country: See Schedule O See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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?	6 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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?	7 a	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year.	7 d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12.	10 a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11 a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b		
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12 b		
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.	13 a		
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	13 b		
c Enter the amount of reserves on hand	13 c		
14 a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		

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

Check if Schedule O contains a response to any question in this Part VI. ☒

Section A. Governing Body and Management

	Yes	No
1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	24	
1 b Enter the number of voting members included in line 1a, above, who are independent.	24	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? See Sch O	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders? See Schedule O	6	X
7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule O	7 a	X
7 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8 a	X
b Each committee with authority to act on behalf of the governing body?	8 b	X
9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.	9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10 a Did the organization have local chapters, branches, or affiliates?	10 a	X
b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b	
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O		
12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13.	12 a	X
b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. See Schedule O	12 c	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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official. See Schedule O	15 a	X
b Other officers of key employees of the organization. See Schedule O	15 b	X
If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	X
b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b	

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ▶ See Schedule O
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
- ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
- ▶ Mark Mildner 333 7th Avenue New York NY 10001 212-967-4100

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <u>Marc Silberberg</u> Chairman	0.8 0	X		X				0.	0.	0.
(2) <u>Dale Schwartz</u> 1st Vice Chair	0.8 0	X		X				0.	0.	0.
(3) <u>Eugenia Brin</u> Vice Chair	0.8 0	X		X				0.	0.	0.
(4) <u>Lee Gordon</u> Vice Chair	0.8 0	X		X				0.	0.	0.
(5) <u>Dianne Lob</u> Vice Chair	0.8 0	X		X				0.	0.	0.
(6) <u>Sandra Spinner</u> Vice Chair	0.8 0	X		X				0.	0.	0.
(7) <u>Barbara Rosenthal</u> Secretary	0.8 0	X		X				0.	0.	0.
(8) <u>Sanford Mozes</u> Treasurer	0.8 0	X		X				0.	0.	0.
(9) <u>Hon. Harold Berger</u> Director	0.8 0	X						0.	0.	0.
(10) <u>Robert Aronson</u> Director	0.8 0	X						0.	0.	0.
(11) <u>Ann Cohen</u> Director	0.8 0	X						0.	0.	0.
(12) <u>Alina Fiskina</u> Director	0.8 0	X						0.	0.	0.
(13) <u>Alexander Gordin</u> Director	0.8 0	X						0.	0.	0.
(14) <u>Albert Hayoun</u> Director	0.8 0	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Benita Langsdorf Director	0.8 0	X						0.	0.	0.
(16) Rene Lerer Director	0.8 0	X						0.	0.	0.
(17) Jamie Metzl Director	0.8 0	X						0.	0.	0.
(18) Neil Moss Director	0.8 0	X						0.	0.	0.
(19) Sharon Nazarian Director	0.8 0	X						0.	0.	0.
(20) Norman Resnicow Director	0.8 0	X						0.	0.	0.
(21) Eric Schwartz Director	0.8 0	X						0.	0.	0.
(22) Evelyn Seelig Director	0.8 0	X						0.	0.	0.
(23) Michelle Wachtel Director	0.8 0	X						0.	0.	0.
(24) Yuli Wexler Director	0.8 0	X						0.	0.	0.
(25) Gideon Aronoff - thru 5/31/12 President & CEO	35 0			X				301,438.	0.	21,724.
1 b Sub-total								301,438.	0.	21,724.
c Total from continuation sheets to Part VII, Section A								921,845.	0.	87,582.
d Total (add lines 1b and 1c)								1,223,283.	0.	109,306.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **8**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Ambulatorium und Praxiszentrum Augarten Untere Augartenstrabe 1-3,10	Consulting - Medical	276,795.
Enrique Burbinski Raul Scalabrini Ortiz St. 2464 #5A Buenos Aires,	Consulting - Lat Am	141,638.
ADS Advertising and Mailing Services, Ltd. 105 Ann St. Newburgh, NY	Bulk Mailing Service	187,246.
Tecnisecurity Calle Lizardo Ruiz oe4-711 y Diego Quito, Ecuador	Security Services	130,653.
Big Duck 20 Jay Street Brooklyn, NY 11201	Consulting - Marketi	136,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **5**

2012

Name of the Organization

HIAS, Inc.

Employer Identification number

13-5633307

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

[illegible]

Part VIII Statement of RevenueCheck if Schedule O contains a response to any question in this Part VIII. ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns.....	1 a 313,122.				
	b Membership dues.....	1 b				
	c Fundraising events.....	1 c 103,104.				
	d Related organizations.....	1 d				
	e Government grants (contributions)....	1 e 14,707,399.				
	f All other contributions, gifts, grants, and similar amounts not included above...	1 f 7,406,280.				
	g Noncash contributions included in lns 1a-1f: \$	75,152.				
	h Total. Add lines 1a-1f.....					
PROGRAM SERVICE REVENUE	Business Code					
	2 a <u>Loan Processing Fee</u>	900099	485,909.	485,909.		
	b <u>Service Fee & Misc</u>	900099	232,808.	232,808.		
	c -----					
	d -----					
	e -----					
	f All other program service revenue...					
	g Total. Add lines 2a-2f.....		718,717.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts).....		1,561,828.			1,561,828.
	4 Income from investment of tax-exempt bond proceeds.					
	5 Royalties.....					
	6 a Gross rents.....	(i) Real 51,157.				
	b Less: rental expenses.....	147,266.				
	c Rental income or (loss).....	-96,109.				
	d Net rental income or (loss).....		-96,109.			-96,109.
	7 a Gross amount from sales of assets other than inventory.....	(i) Securities 18875999.				
	b Less: cost or other basis and sales expenses.....	18094991.				
	c Gain or (loss).....	781,008.				
	d Net gain or (loss).....		781,008.			781,008.
	8 a Gross income from fundraising events (not including \$ 103,104. of contributions reported on line 1c). See Part IV, line 18.....	a 89,821.				
	b Less: direct expenses.....	b 166,456.				
	c Net income or (loss) from fundraising events.....		-76,635.			-76,635.
	9 a Gross income from gaming activities. See Part IV, line 19.....	a				
	b Less: direct expenses.....	b				
	c Net income or (loss) from gaming activities.....					
	10 a Gross sales of inventory, less returns and allowances.....	a				
b Less: cost of goods sold.....	b					
c Net income or (loss) from sales of inventory.....						
Miscellaneous Revenue		Business Code				
11 a -----						
b -----						
c -----						
d All other revenue.....						
e Total. Add lines 11a-11d.....						
12 Total revenue. See instructions.....		25,418,714.	718,717.	0.	2,170,092.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).
Check if Schedule O contains a response to any question in this Part IX.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	6,730,955.	6,730,955.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22.	167,000.	167,000.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	85,000.	85,000.		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	677,044.	380,150.	296,894.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.	8,521,956.	6,863,675.	976,262.	682,019.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions).				
9 Other employee benefits.	1,525,984.	1,194,351.	170,597.	161,036.
10 Payroll taxes.	892,998.	723,328.	98,230.	71,440.
11 Fees for services (non-employees):				
a Management.	1,598,441.	1,589,381.	9,060.	
b Legal.	66,207.	46,185.	20,022.	
c Accounting.	227,844.	189,516.	38,328.	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.	7,500.			
f Investment management fees.	337,997.		337,997.	7,500.
g Other. (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O.)	368,689.	254,477.	80,846.	33,366.
12 Advertising and promotion.	4,501.	855.	2,914.	732.
13 Office expenses.	1,034,531.	664,189.	109,297.	261,045.
14 Information technology.	255,214.	216,687.	22,022.	16,505.
15 Royalties.				
16 Occupancy.	2,247,369.	1,878,672.	194,994.	173,703.
17 Travel.	1,598,372.	1,533,603.	45,530.	19,239.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	161,264.	140,755.	11,530.	8,979.
23 Insurance.				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses.				
25 Total functional expenses. Add lines 1 through 24e.	26,508,866.	22,658,779.	2,414,523.	1,435,564.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X. ☐

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing		1	
	2 Savings and temporary cash investments	2,478,978.	2	814,564.
	3 Pledges and grants receivable, net	4,725,643.	3	5,483,971.
	4 Accounts receivable, net	146,524.	4	89,597.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	332,249.	9	262,409.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,419,062.		
	b Less: accumulated depreciation	10b 2,227,011.		
		326,907.	10c	192,051.
	11 Investments — publicly traded securities	52,529,087.	11	54,813,365.
	12 Investments — other securities. See Part IV, line 11.		12	
	13 Investments — program-related. See Part IV, line 11.		13	
14 Intangible assets		14		
15 Other assets. See Part IV, line 11.	1,228,707.	15	1,635,516.	
16 Total assets. Add lines 1 through 15 (must equal line 34).	61,768,095.	16	63,291,473.	
LIABILITIES	17 Accounts payable and accrued expenses	4,553,995.	17	6,417,494.
	18 Grants payable	60,704.	18	59,786.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.	4,479,406.	21	4,630,326.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	5,413,667.	25	6,013,696.
	26 Total liabilities. Add lines 17 through 25.	14,507,772.	26	17,121,302.
	NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		38,325,389.	27	36,798,592.
28 Temporarily restricted net assets		6,629,488.	28	7,064,729.
29 Permanently restricted net assets		2,305,446.	29	2,306,850.
Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		47,260,323.	33	46,170,171.
34 Total liabilities and net assets/fund balances		61,768,095.	34	63,291,473.

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Form 990 (2012)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI. ☐

1	Total revenue (must equal Part VIII, column (A), line 12).	1	25,418,714.
2	Total expenses (must equal Part IX, column (A), line 25).	2	26,508,866.
3	Revenue less expenses. Subtract line 2 from line 1.	3	-1,090,152.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	47,260,323.
5	Net unrealized gains (losses) on investments.	5	
6	Donated services and use of facilities.	6	
7	Investment expenses.	7	
8	Prior period adjustments.	8	
9	Other changes in net assets or fund balances (explain in Schedule O).	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).	10	46,170,171.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII. ☒

		Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
2 b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
2 c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3 b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. See Schedule O.		X

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Form 990 (2012)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

HIAS, Inc.

Employer identification number

13-5633307

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III – Functionally integrated d ☐ Type III – Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box. ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____
- (ii) A family member of a person described in (i) above? _____
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? _____

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2012

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.)

Section A. Public Support

Calendar 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'.)	17606988.	20484336.	20998660.	22866188.	22529905.	104486077.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4 Total. Add lines 1 through 3.	17606988.	20484336.	20998660.	22866188.	22529905.	104486077.
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).						0.
6 Public support. Subtract line 5 from line 4.						104486077.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4.	17606988.	20484336.	20998660.	22866188.	22529905.	104486077.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	515,223.	882,166.	2,048,873.	2,042,048.	1,561,828.	7,050,138.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10.						111536215.
12 Gross receipts from related activities, etc (see instructions)					12	2,136,944.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)).	14	93.68 %
15 Public support percentage from 2011 Schedule A, Part II, line 14.	15	88.82 %
16a 33-1/3% support test – 2012. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☒		
b 33-1/3% support test – 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☐		
17a 10%-facts-and-circumstances test – 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ ☐		
b 10%-facts-and-circumstances test – 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ ☐		

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

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

Section A. Public Support

Calendar year (or fiscal yr 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.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr 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						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 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, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%
19a 33-1/3% support tests – 2012. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☐		
b 33-1/3% support tests – 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☐		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information.
(See instructions).

Area with horizontal dashed lines for supplemental information.

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► **Attach to Form 990, Form 990-EZ, or Form 990-PF**

OMB No. 1545-0047

2012

Name of the organization

HIAS, Inc.

Employer identification number

13-5633307

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

☒ 501(c)(3) (enter number) organization

☐ 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) 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).

BAA 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)

Name of organization

Employer identification number

HIAS, Inc.

13-5633307

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	US Department of Health and Human R 200 Independence Ave. SW Washington, DC 20201	\$ 3,468,690.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
2	U.S. Department of State 1114 Avenue of the Americas New York, NY 10036	\$ 10,913,102.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
3	UNHCR UNHCR Case Postale 2500 Geneva, CH-1211 Switzerland	\$ 4,906,015.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

HIAS, Inc.

13-5633307

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(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
		\$	

BAA

Name of organization

Employer identification number

Part III	Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8) or (10)
----------	--

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) **\$** N/A

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

OMB No. 1545-0047

2012

**Open to Public
Inspection**

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

HIAS, Inc.

Employer identification number

13-5633307

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures..... ▶ \$

3 Volunteer hours..... ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955..... ▶ \$ 0.

2 Enter the amount of any excise tax incurred by organization managers under section 4955..... ▶ \$ 0.

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?..... ☐ Yes ☐ No

4 a Was a correction made?..... ☐ Yes ☐ No

b If 'Yes,' describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities..... ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities..... ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$

4 Did the filing organization file Form 1120-POL for this year?..... ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2012

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)		21,466.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		42,272.													
c Total lobbying expenditures (add lines 1a and 1b)		63,738.	0.												
d Other exempt purpose expenditures		25,354,976.													
e Total exempt purpose expenditures (add lines 1c and 1d)		25,418,714.	0.												
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.	0.												
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.	0.												
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.	0.												
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			☐ Yes ☐ No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	62,253.	58,024.	80,033.	63,738.	264,048.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	30,342.	32,074.	21,292.	21,466.	105,174.

BAA

Schedule C (Form 990 or 990-EZ) 2012

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i.			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912.			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Part III-A, line 3, is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2 a	
b Carryover from last year	2 b	
c Total	2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

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

Name of the organization

Supplemental Financial Statements

▶ Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012**Open to Public
Inspection**

Employer identification number

HIAS, Inc.

13-5633307

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year.....		
2 Aggregate contributions to (during year).....		
3 Aggregate grants from (during year).....		
4 Aggregate value at end of year.....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?.....	☐ Yes	☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?.....	☐ Yes	☐ No

Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements.....	2 a
b Total acreage restricted by conservation easements.....	2 b
c Number of conservation easements on a certified historic structure included in (a).....	2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.....	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?..... ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1..... ▶ \$ _____

(ii) Assets included in Form 990, Part X..... ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1..... ▶ \$ _____

b Assets included in Form 990, Part X..... ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance.....	1 c
d Additions during the year.....	1 d
e Distributions during the year.....	1 e
f Ending balance.....	1 f 0.

2 a Did the organization include an amount on Form 990, Part X, line 21? ☒ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☒

See Part XIII

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Four years
1 a Beginning of year balance.....	54,591,594.	55,916,345.	51,187,732.	43,880,884.	63,552,404.
b Contributions.....	1,820,819.	2,308,114.	2,128,805.	1,226,427.	1,643,169.
c Net investment earnings, gains, and losses.....	5,370,398.	675,181.	6,814,732.	10,315,875.	-16,751,848.
d Grants or scholarships.....	252,000.	331,000.	344,000.	273,000.	346,000.
e Other expenditures for facilities and programs.....	5,318,551.	3,621,531.	3,478,383.	3,572,283.	3,786,139.
f Administrative expenses.....	337,997.	355,515.	392,541.	390,171.	410,702.
g End of year balance.....	55,874,263.	54,591,594.	55,916,345.	51,187,732.	43,880,884.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ 83.23 %

b Permanent endowment ▶ 4.13 %

c Temporarily restricted endowment ▶ 12.64 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations.....

(ii) related organizations.....

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?.....

4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land.....				
b Buildings.....				
c Leasehold improvements.....		592,605.	451,586.	141,019.
d Equipment.....		1,821,874.	1,770,842.	51,032.
e Other.....	4,583.		4,583.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)▶				192,051.

BAA

Schedule D (Form 990) 2012

Part VII Investments – Other Securities. See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives.....		
(2) Closely-held equity interests.....		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) .. ▶		

Part VIII Investments – Program Related. See Form 990, Part X, line 13. N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) .. ▶		

Part IX Other Assets. See Form 990, Part X, line 15. N/A

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) .. ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Pension Obligations (American Plan)	4,513,573.
(3) Pension Obligations (non American P)	542,917.
(4) Severance Obligations	957,206.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) .. ▶	

6,013,696.

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 See Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return N/A

1	Total revenue, gains, and other support per audited financial statements.....		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments.....	2 a		
b	Donated services and use of facilities.....	2 b		
c	Recoveries of prior year grants.....	2 c		
d	Other (Describe in Part XIII.).....	2 d		
e	Add lines 2a through 2d.....		2 e	
3	Subtract line 2e from line 1.....		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b.....	4 a		
b	Other (Describe in Part XIII.).....	4 b		
c	Add lines 4a and 4b.....		4 c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).....		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return N/A

1	Total expenses and losses per audited financial statements.....		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities.....	2 a		
b	Prior year adjustments.....	2 b		
c	Other losses.....	2 c		
d	Other (Describe in Part XIII.).....	2 d		
e	Add lines 2a through 2d.....		2 e	
3	Subtract line 2e from line 1.....		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b.....	4 a		
b	Other (Describe in Part XIII.).....	4 b		
c	Add lines 4a and 4b.....		4 c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).....		5	

Part XIII Supplemental Information

Complete 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 X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part IV, Line 2b - Explanation Of Escrow Account Liability

Client Deposits are held for the care and maintenance of refugees.

Part V, Line 4 - Intended Uses Of Endowment Fund

Permanently restricted net assets are comprised of investments stipulated in the donor's agreement and are to be held in perpetuity. Use of appropriations from permanently restricted net assets are stipulated in the donor's agreement and may be used for scholarships or general expenditures.

Part XIII Supplemental Information (continued)**Part X - FIN 48 Footnote**

HIAS has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements. Years ending December 31, 2009 and subsequent years remain subject to examination by applicable taxing authorities under normal statute of limitation rules.

Schedule F
(Form 990)

Department of the Treasury
Internal Revenue Service

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 Inspection

Name of the organization

HIAS, Inc.

Employer identification number

13-5633307

Part I **General Information on Activities Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b.

- 1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?... ☒ Yes ☐ No
- 2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. **Part V**
- 3 **Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region Pt V
(1) Europe	1	37	Program Services	Refugee Processing	2,364,772.
(2) Middle East	1	5	Program Services	Refugee Processing	343,381.
(3) Middle East			Grants To Recipients	Scholarships	85,000.
Russia & New					
(4) Indep States	1	16	Program Services	Refugee Processing	411,707.
(5) South America	4	154	Program Services	Refugee Processing	4,575,716.
Sub-Saharan					
(6) Africa	3	177	Program Services	Refugee Processing	2,204,150.
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3 a Sub-total	10	389			9,984,726.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	10	389			9,984,726.

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

Schedule F (Form 990) 2012

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

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)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. ▲ 0

3 Enter total number of other organizations or entities. ▲ 0

BAA

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant 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) Scholarships	Middle East	79	85,000.	Check			
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ No

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US

HIAS conducts worldwide operations through a combination of overseas offices and international entities using a system of internal controls to process, review, authorize, and accurately and timely record transactions into the accounting system.

The accounting system and supplementary management reporting serve as reporting tools for GAAP financial reporting, budget-to-actual variance management reporting, and grant-specific reporting. Management's oversight ensures that programmatic grants and allocations, and donor contributions, fund reasonable expenses applicable to the source's intention.

Part I, Line 3f - Method of Accounting

Accrual

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

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

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

HIAS, Inc.

Employer identification number

13-5633307

Part I

Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
b ☒ Internet and email solicitations
c ☒ Phone solicitations
d ☒ In-person solicitations
e ☒ Solicitation of non-government grants
f ☒ Solicitation of government grants
g ☒ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 CCS Co., LLC 461 Fifth Ave. New York NY 10017	Strategy		X		7,500.	
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total.					7,500.	0.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

WY WI WV WA VA VT UT TX TN SD SC RI PA OR OK OH ND NC NY NM NJ NH NV NE MT MO MS MN
MS MA MD ME LA KY KS IA IN IL ID HI GA FL DE CT CO CA AR AZ AK AL

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.

REVENUE		(a) Event #1 Benefit Concer (event type)	(b) Event #2 (event type)	(c) Other events None (total number)	(d) Total events (add column (a) through column (c))
1	Gross receipts.....	192,925.			192,925.
2	Less: Charitable contributions.....	103,104.			103,104.
3	Gross income (line 1 minus line 2).....	89,821.			89,821.
DIRECT EXPENSES	4	Cash prizes.....			
	5	Noncash prizes.....			
	6	Rent/facility costs.....	75,005.		75,005.
	7	Food and beverages.....	13,151.		13,151.
	8	Entertainment.....	21,614.		21,614.
	9	Other direct expenses.....	56,686.		56,686.
	10	Direct expense summary. Add lines 4 through 9 in column (d).....			166,456.
	11	Net income summary. Combine line 3, column (d), and line 10.....			-76,635.

Part III 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.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
1	Gross revenue.....				
DIRECT EXPENSES	2	Cash prizes.....			
	3	Non-cash prizes.....			
	4	Rent/facility costs.....			
	5	Other direct expenses.....			
	6	Volunteer labor.....	Yes _____ % No _____ %	Yes _____ % No _____ %	Yes _____ % No _____ %
	7	Direct expense summary. Add lines 2 through 5 in column (d).....			
	8	Net gaming income summary. Combine lines 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? ☐ Yes ☐ No

b If 'No,' explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If 'Yes,' explain: _____

- 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 | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a Does the organization have a contact 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 amount of gaming revenue retained by the third party ▶ \$
- c If 'Yes,' enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐

Director/officer

☐

Employee

☐

Independent contractor

17 Mandatory distributions

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (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 (see instructions).

Schedule G - Additional Information

The HIAS Regina Spektor Benefit Concert was held on February 23, 2012. The evening celebrated HIAS' 130th anniversary and the 4.5 million people whose lives HIAS has touched since its 1881 inception.

SCHEDULE I
(Form 990)

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

OMB No. 1545-0047

2012

Department of the Treasury
Internal Revenue Service

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

**Open to Public
Inspection**

Name of the organization

HIAS, Inc.

Employer identification number

13-5633307

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) <u>Carolina Refug. Resettle. Ag</u> <u>5007 Monroe Rd, Suite 101</u> <u>Charlotte, NC 28205</u>	30-0577219		695,840.	0.			R&P, MG, PC 1, Local Citizen. Ed.
(2) <u>F.E.G.S Health & Human Serv.</u> <u>315 Hudson Street</u> <u>New York, NY 10013</u>	13-1624000		277,596.	0.			R&P, Matching Grant, PC #5
(3) <u>Gulf Coast JF & Comm Serv</u> <u>14041 Icot Boulevard</u> <u>Clearwater, FL 33760</u>	59-1229354		188,247.	0.			R&P, PC #4, Citizen. & Integr.
(4) <u>HIAS & Council Migration Serv</u> <u>2100 Arch Street</u> <u>Philadelphia, PA 19103</u>	23-1405597		453,514.	0.			R&P, Matching Grant, Pref. Comm. #2
(5) <u>Jewish Community Services</u> <u>5750 Park Heights Avenue</u> <u>Baltimore, MD 21215</u>	52-0607909		10,550.	0.			R&P
(6) <u>Jewish Fam. & Children's Serv</u> <u>1430 Main Street</u> <u>Waltham, MA 02451</u>	04-2104356		11,858.	0.			R&P
(7) <u>Jewish Family & Career Serv</u> <u>4549 Chamblee Dunwoody Road</u> <u>Atlanta, GA 30338</u>	58-1479212		328,702.	0.			R&P, Matching Grant, Pref. Comm. #3
(8) <u>Jewish Fed. of Greater Pitt.</u> <u>234 McKee Place</u> <u>Pittsburg, PA 15213</u>	25-1017602		396,050.	0.			R&P

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 22

3 Enter total number of other organizations listed in the line 1 table. 0

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

TEEA3901L 11/30/12

Schedule I (Form 990) (2012)

Page 2

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Scholarships	40	167,000.			
2					
3					
4					
5					
6					
7					

1

Provide information: Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

[illegible]

Continuation Sheet for Schedule I (Form 990)

2012

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 1 of 2

Name of the organization

HIAS, Inc.

Employer identification number

13-5633307

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JF&CS-Pittsburgh 5743 Bartlett Street Pittsburgh, PA 15217	25-0965407		402,401.				Matching Grant, PC #2
JFCS-East Bay 2484 Shattuck Avenue, #210 Berkeley, CA 94704	94-3250304		77,840.				R&P, Pref. Comm. #5
JFCS-San Francisco 2150 Post St. San Francisco, CA 94115	94-1156528		8,442.				R&P
JFS of Buffalo & Erie County 70 Barker Street Buffalo, NY 14209	16-0760888		361,109.				R&P, Matching Grant, Pref. Comm. #1
JFS of Greater LA 5505 Wilshire Blvd., Suite 11 Los Angeles, CA 90048	95-1643388		139,455.				R&P, Matching Grant
JFS of Metrowest 475 Franklin Street Framingham, MA 01702	04-2730898		17,331.				R&P
JFS of Seattle 1601 16th Avenue Seattle, WA 98122	91-0565537		379,170.				R&P, Matching Grant, Pref. Comm. #3
JFS of Washtenaw County 2935 Birch Hollow Drive Ann Arbor, MI 48108	41-2147486		230,925.				R&P, PC 4, Local Citizen. Ed. Nat.
JFS of Western Mass. 15 Lenox Street Springfield, NY 01108	04-2104352		372,104.				Citizen. & Integration, R&P, PC #1
JFS-San Diego 8804 Balboa Avenue San Diego, CA 92123	95-1644024		704,192.				R&P, MG, PC #1,

TEEA4001L 12/10/12

Schedule I Cont (Form 990) 2012

2012

Continuation Page 2 of 2

HIAS, Inc.

Employer identification number

Part II	Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	13-5633307
(a) Name and address of grantee, contractor, or subgrantee	(b) EIN	

[illegible]

TEEA4001L 12/10/12

Schedule I Cont (Form 990) 2012

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

- ▶ **Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

HIAS, Inc.

Employer identification number

13-5633307

Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) 2012

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
1 Gideon Aronoff - thru 5/31/12 President & CEO	(i) 143,938. (ii) 0.	(i) 0. (ii) 0.	(iii) 157,500. (ii) 0.	0. 0.	21,724. 0.	323,162. 0.	0. 0.
2 Mark Hetfield President & CEO	(i) 186,437. (ii) 0.	(i) 0. (ii) 0.	(iii) 0. (ii) 0.	0. 0.	660. 0.	187,097. 0.	0. 0.
3 Mark Mildner VP Fin. & Admin	(i) 144,805. (ii) 0.	(i) 0. (ii) 0.	(iii) 0. (ii) 0.	0. 0.	21,980. 0.	166,785. 0.	0. 0.
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
BAA							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, for Part II. Also complete this part for any additional information.

Part I, Line 1a - Relevant Information Regarding Compensation Benefits

Housing Allowance payments were made to Emily Russ, Country Director of Vienna

Operations. The payments were taxable.

Part I, Line 3 - Methods Used By Related Org. To Establish CEO/Exec. Dir. Compensation

See also Schedule O: Part VI, Line 15a; Compensation Review and Approval Process

Part I, Line 4 - Received Severance, Supplemental NO Retirement, Equity-Based Compensation

Gideon Aronoff, former President & CEO, received \$157,500 in severance payments

which is included in his compensation for 2012.

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No. 1545-0047

2012

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Name of the organization

Employer identification number

HIAS, Inc.

13-5633307

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art.....				
2 Art — Historical treasures.....				
3 Art — Fractional interests.....				
4 Books and publications.....				
5 Clothing and household goods.....				
6 Cars and other vehicles.....				
7 Boats and planes.....				
8 Intellectual property.....				
9 Securities — Publicly traded.....		10	75,152.	Fair Mkt Value
10 Securities — Closely held stock.....				
11 Securities — Partnership, LLC, or trust interests.....				
12 Securities — Miscellaneous.....				
13 Qualified conservation contribution — Historic structures.....				
14 Qualified conservation contribution — Other.....				
15 Real estate — Residential.....				
16 Real estate — Commercial.....				
17 Real estate — Other.....				
18 Collectibles.....				
19 Food inventory.....				
20 Drugs and medical supplies.....				
21 Taxidermy.....				
22 Historical artifacts.....				
23 Scientific specimens.....				
24 Archeological artifacts.....				
25 Other ► (.....)				
26 Other ► (.....)				
27 Other ► (.....)				
28 Other ► (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement.....

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?.....

b If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?.....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?.....

b If 'Yes,' describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Yes No

30a X

31 X

32a X

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

Schedule M (Form 990) 2012

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

This image shows a full page of white paper designed for handwriting practice. It features 20 evenly spaced, horizontal dashed lines that run across the entire width of the page. The lines are thin and black, providing a guide for letter height and placement. There is no text or other markings on the page.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

HIAS, Inc.

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Employer identification number

13-5633307

Part 1: Summary, Line 1: Description of Organization Mission

HIAS, the global Jewish nonprofit that protects refugees, stands for a world in which refugees find welcome, safety, and freedom. Our mission is to rescue people whose lives are in danger for being who they are. HIAS protects the most vulnerable refugees, helping them build new lives and reuniting them with their families in safety and freedom; advocates for the protection of refugees; and assures that displaced people are treated with the dignity they deserve. Guided by our Jewish values and history, we bring more than 130 years of expertise to our work with refugees.

Part III; Line 4a, Program Service Accomplishment #1

1. In the U.S., HIAS coordinates and funds refugee resettlement activities in conjunction with our national network of approximately 30 sub-grantees. These activities, which are supported by the U.S. government, private foundations, and individual donors, help current and former HIAS clients establish new lives in the U.S., integrate into American society, and gain citizenship. In 2012, HIAS resettled 2,356 refugees in the U.S., a 15% increase over the prior year. Our programs include:

- The Reception and Placement Program, which processes family reunification refugee applications, facilitates the placement of refugees in specific localities, provides for their travel, ensures the provision of basic necessities, and offers essential case management services during the first 30-90 days after their arrival in the U.S.
- The Matching Grant Program, offered at selected HIAS sub-grantees, provides qualifying refugees with basic needs support, employment services, and case management services for up to 180 days after their arrival in the U.S. Criteria are based in part on employability and need for financial assistance.

Name of the organization

HIAS, Inc.

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- The Preferred Communities Program provides enhanced case management services to refugees at highest risk in participating locations for up to five years after their arrival in the U.S.

- The Citizenship Program aids selected HIAS sub-grantees in developing citizenship integration programs, including naturalization (citizenship) classes and application assistance.

- The Legal Services Program provides or helps to secure legal representation for asylum seekers throughout the United States, including a living allowance through the HIAS-Prins asylum program for asylum seekers who were scientists, scholars, artists or other types of professionals in their countries of origin and desire to continue or rebuild their careers in the United States.

In addition, HIAS provides technical assistance to our national network of resettlement sub-grantees on issues relating to development and implementation of the above programs and to immigration law.

Part III; Line 4b, Program Service Accomplishment #2

2. HIAS' international program assists refugees in four regions of the world: Africa, Latin America, Europe, and the Middle East:

- In Africa and Latin America, HIAS provides and funds programs to reduce the impact of displacement, violence, trauma, and suffering on refugees. These programs are supported by the United Nations High Commissioner for Refugees (UNHCR, the UN's refugee agency) and other United Nations entities, the U.S. government, and private donors:

- In Latin America, HIAS offers counseling, legal and employment orientation, and humanitarian assistance to refugees of the Colombian civil war in Ecuador, Venezuela, and Panama, and resettles Colombian refugees in Argentina with the assistance of local Jewish communities. In 2012, these HIAS programs assisted 77,853

Name of the organization

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Colombian refugees. In addition, HIAS monitors country conditions throughout the region to safeguard Jewish communities at risk, and advises Jewish communities and families on migration options.

- In Chad, HIAS is the only Jewish organization working on the ground in the Darfuri refugee camps, assisting those who survived mass atrocities and genocide in the Darfur region of Sudan. Programs target high-risk populations in the camps and include refugee and child protection services, peace and conflict resolution programs, and programs and interventions for at-risk groups, such as survivors of sexual and gender-based violence. In 2012, HIAS programs in Chad aided approximately 143,000 refugees in six camps.

- In Nairobi, Kenya and Kampala, Uganda, HIAS provides resettlement assistance, child protection, and psychosocial assistance to vulnerable refugees from more than half a dozen neighboring countries; targeted programs aid survivors of sexual and gender-based violence. In 2012, HIAS initiated innovative community-based strategies for refugee protection in urban areas, establishing five new field offices in the main refugee hosting areas in Nairobi and Kampala through funding from the U.S. Department of State and UNHCR.

- In Vienna, HIAS works in partnership with the U.S. Department of State to operate the Resettlement Support Center (RSC) to assist persecuted religious minorities from Iran who are seeking to resettle in America under the U.S. Refugee Admissions Program. The RSC provides immigration assistance needed to legally enter and be resettled in the U.S. as refugees, as well as cultural orientation to prepare refugees accepted to the U.S. Refugee Admissions Program for life in America. In 2012, HIAS assisted 537 Iranian religious minorities to arrive safely in the United States.

Name of the organization

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- In Israel, HIAS provides training and technical expertise to the Israeli government, UNHCR, and Israeli non-governmental organizations in their mutual efforts to develop an Israeli asylum system. We also award scholarships to new Israeli immigrants (olim). In 2012, HIAS trained 41 new asylum officers and awarded \$85,000 in 79 scholarships to students at colleges and universities throughout the country.

- In the Russian Federation, HIAS' office in Kyiv, Ukraine offers legal counseling to refugees from 39 countries who are seeking asylum or resettlement, and monitors conditions affecting Jews throughout the republics of the former Soviet Union and Eastern Europe. In 2012, HIAS provided legal protection services to nearly 1,200 asylum seekers, including unaccompanied minors.

Part III; Line 4c, Program Service Accomplishment #3

3. A key component of HIAS' domestic mission is advocacy for laws and policies that support human rights for refugees and asylum seekers, are generous and humane, meet our nation's economic and security needs, and honor America's history as a nation of immigrants. Our policy and advocacy work have earned us a reputation as the American Jewish community's "voice" in Washington on all matters pertaining to immigration and refugees. HIAS' policy and advocacy work are designed to engage the American Jewish community in HIAS' mission and to deepen their connection to Jewish migration history and the pressing concerns of today's refugees from all backgrounds. Examples include:

- HIAS led interfaith advocacy efforts to extend the Religious Worker Visa Program, resulting in an extension of this important provision through Sept. 30, 2015. The program makes available up to 5,000 permanent immigrant visas each year for religious workers.

- HIAS participated in the Interfaith Immigration Coalition, a partnership of more

Name of the organization

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than 35 national faith-based organizations committed to enacting fair and humane immigration reform. HIAS also worked to build momentum for immigration reform within the Jewish community through We Were Strangers, Too: The Jewish Campaign for Immigration Reform as well as through the Jewish Social Justice Roundtable— a network of 26 national and local Jewish social justice organizations. The Roundtable has chosen "Immigration and Immigrants" as its first coordinated campaign.

- HIAS coordinated the American Jewish community's effort to extend the Lautenberg Amendment, which must be reauthorized by Congress annually. This vital legislation provides the only safe and legal pathway to the U.S. for refugees fleeing religious persecution in Iran and the former Soviet Union. As a result of advocacy by HIAS and our Jewish and interfaith partners, the Amendment was extended through the end of federal fiscal year 2013 (9/30/2013).

- In 2012, HIAS added more than 250 new entries to myStory, our social networking and community building website for refugees from the former Soviet Union, bringing the total to more than 1,100.

- The HIAS Young Leaders program supported leadership development for young professionals and graduate students in New York and Washington, DC who advocate, educate, volunteer, and raise funds to support HIAS' mission. In 2012, HIAS Young Leaders sponsored or co-sponsored more than 70 educational, social, advocacy, service, and fundraising events for young professionals and students that attracted nearly 3,000 attendees from all over the country.

- HIAS awarded undergraduate and graduate scholarships to HIAS-assisted refugees in the U.S. In 2012, \$167,000 scholarship awards for higher education scholarships were given to 38 refugee students from Iran and the former Soviet Union, while providing them with community service opportunities, skills training, and mentoring.

Part V: IRS Filings and Compliance; Line 4a, Foreign Financial Account

Name of the organization

HIAS, Inc.

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Argentina, Austria, Canada, Chad, Ecuador, France, Israel, Kenya, Russia, Ukraine,
Uganda, Venezuela

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents

The HIAS Bylaws were amended effective July 1, 2012. Significant changes to the
Bylaws were:

1. The class of Board members known as "Life Members" was eliminated. Life Members
represented prior Chairs/Presidents of the Board of Directors who continued to serve
on the Board with full voting rights.

2. The Board position of "Honorary Director", those who were recommended by
Subcommittee and who received a majority of votes by Directors, was eliminated. The
Board position of "Advisor to the Board" was added. Advisors are appointed by the
Board of Directors or any committee of the Board of Directors, and only have
authority and responsibility as determined by the Board of Directors or a committee
of the Board of Directors.

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

Members are the HIAS Board of Directors.

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

Board of Directors can elect members.

Form 990, Part VI, Line 11b - Form 990 Review Process

The HIAS President & CEO and Board of Directors perform a detailed review of Form
990 prior to being filed with the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts**1. Rationale**

Officers, Directors, Committee members and senior staff members of HIAS
(collectively, "Senior Officials") have a fiduciary duty to conduct all business of
HIAS in a manner consistent with the best interests of HIAS. This duty requires
that all decisions and actions of Senior Officials on behalf of HIAS must be taken

Name of the organization

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Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued)

solely with a view to, and with an intention to, promote the best interests of HIAS.

Senior Officials are likely to be, and indeed should be, persons with substantial involvement in business and community organizations. The best way to protect HIAS

from the taint of actual or apparent conflicts of interest is for HIAS to require

Senior Officials to disclose potential conflicts of interests in advance. With this information in hand at the outset, HIAS can take action to prevent the conflict of

interest from tainting the decision-making process of HIAS. Such action will

consist of, among other measures, excluding the conflicted Senior Official from any

vote regarding the specific matter, and also depending on circumstances, the

conflicted individual may not be permitted to participate in the discussion

regarding that matter.

2. Definitions

A "conflict of interest" exists for a Senior Official when s/he:

(I) directly or indirectly (i.e., through a family member, as hereinafter defined) does or seeks to do business with, or receive or seeks to receive anything of value from, HIAS or any sub-grantee agency or beneficiary agency (as hereinafter respectively defined);

(II) has a direct or indirect (i.e., through a family member) ownership interest or investment in an organization doing or seeking to do business with, or receiving or seeking to receive anything of value from, HIAS or any sub-grantee agency or beneficiary agency;

(III) receives anything of value from any person or organization who does or seeks to do business with HIAS or any sub-grantee agency or beneficiary agency; or

(IV) is an officer, director, influential employee or consultant of any sub-grantee agency or beneficiary agency.

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Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued)

A "Family Member" of an individual means the spouse, children, grandchildren, siblings and parents of such individual.

3. Disclosure

All Senior Officials shall submit to HIAS an initial written disclosure statement and, thereafter, annual disclosure statements, in such form as may be utilized by HIAS for such purpose from time to time, attesting that: s/he understands and agrees to comply with this conflict of interest policy; and except as specifically described in the disclosure statement, neither s/he nor, to the best of his/her knowledge, any of his/her family members, has during the past 12 months been engaged in, or anticipates at any time in the future being engaged in, any conflict of interest. In addition to submitting initial and annual disclosure statements, whenever a Senior Official is present at a meeting where s/he can reasonably anticipate that final deliberation or voting is about to occur on a matter in which s/he has a conflict of interest, s/he shall immediately and fully disclose the conflict of interest to the person chairing the meeting.

4. Non-participation

A Senior Official who has disclosed or been found to have a conflict of interest with respect to a particular matter shall refrain from any vote regarding that specific matter, and also depending on circumstances, such individual may or may not be permitted to participate in the discussion regarding that matter.

5. Reporting

The Human Resources Department shall be responsible for collecting and reviewing the

Name of the organization

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HIAS, Inc.

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Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued)

initial annual disclosure statements, and at least annually shall submit to the Chair of the Board and the President a written report listing the conflicts of interest disclosed in such statements and the actions, if any, taken by HIAS in response thereto.

6. Penalty For Noncompliance

Failure of any Senior Official to comply with this conflicts of interest policy, including but not limited to failure to timely submit disclosure statements, may include the following penalties, as appropriate:

Board Member - May be grounds for removal from office and the Board;

Employee - May be grounds for termination or other disciplinary action.

7. Excess Benefit Transactions

In deciding whether to approve any contract or transaction between HIAS and a Senior Official, the Board of Directors or Committee with authority to grant final approval (the "decision-making body") must comply with the substantive and procedural requirements of the "Excess Benefit" rules of the Internal Revenue Code. These rules require that (I) the economic benefits to the Senior Official must not exceed a reasonable amount, (II) the decision-making body must obtain and use comparability data in making the decision, and (III) the decision making body must fully and timely document the basis for its decision. Further guidance on the "Excess Benefit" rules can be obtained from HIAS's legal counsel.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top Management

The Human Resources Department reviews and approves compensation data. A committee of the Board of Directors reviews and approves compensation increases to the President & CEO and other top management officials. This committee is made up of

Name of the organization

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Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top Management (continued)

various Board members. The Committee looks at the salaries of other non profit organizations similar to HIAS and determines an appropriate salary for the President & CEO and reviews compensation for other senior management positions. This process was last done on July 30, 2013.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Reference Schedule O; Part VI, Line 15a response.

Form 990, Part VI, Line 17 - List of States which this Return is Filed

AL AK AZ AR CA CO CT FL GA HI IL KS KY ME MD MA MI MN MS MO NH NJ NM NY NC ND OH
OK OR PA RI SC TN UT VA WA WV WI

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The financial statements and Form 990 are made available to the public upon request.

These documents are also available through web-based means. The conflict of interest policy and other governing documents are not available to the public.

Form 990, Part XII, Line 3 - Explain Why No Required Audit

The agency has delayed the audit for the year ended December 31, 2012 because of a delay in the transmission of certain financial records, issues with receiving back-up from some of our remote international offices and transferring that information into our accounting system. Once this process is completed the agency will complete its financial statements and A-133 report for the year ended December 31, 2012 and have their external auditors issue an audit report. The financial information used for this Form 990 is based on unaudited information. The agency anticipates this return will be amended once the audited financial statements are completed.