Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

2024 Open to Public Inspection

<u>A</u>	For the	e 2024 calendar year, or tax year beginning	, and ending		_	
В	Check if a	pplicable: C Name of organization FRIENDS O	F ISRAEL SCI-TECH SCHOOL	s,	D Employe	r identification number
	Address c	hange INC.	ODOOTIO	\mathbf{p}		MI /
二		Doing husiness as	SOEGHO		T 26-0	492682
닏	Name cha	Number and street (or P.O. box if mail is not delive		Room/suite	E Telephon	e number
Ш	Initial retu	·			917-	692-9713
	Final retur		r foreign postal code		1	
H	terminated	NEW YORK	NY 10022		G Gross red	eipts\$ 1,073,848
\sqsubseteq	Amended	return F Name and address of principal officer:				
	Application	pending MARK LEVENFUS		H(a) Is this a	group return for	subordinates? Yes X No
_		SAME AS C ABOVE		H(b) Are all s	subordinates inc	luded? Yes No
		STATE THE C TECVE				See instructions
_	_	V /) // / / / / // // // // // // // //			,	
<u></u>			sert no.) 4947(a)(1) or 527	_		
<u>J</u>	Website:				xemption numb	
		organization: X Corporation Trust Association	Other L	Year of formation:	2008	M State of legal domicile: NY
F	Part I	Summary				
	1 E	Briefly describe the organization's mission or mos	t significant activities:			
ဗ္ဗ		TO SUPPORT SECONDARY AND AD	VANCED SCIENCE AND TECHN	OLOGY EDU	CATION	IN
Jan		ISRAEL.				
err						
Governance	2 0	Check this box if the organization discontinued	d its operations or disposed of more than	25% of its net a	ssets	
∞ ∞		Number of voting members of the governing body	(Dort \/L line 1e)		0	7
						7
itie	4 1	Number of independent voting members of the go	verning body (Part VI, line 1b)		4	1
Activities		otal number of individuals employed in calendar				
Ac		otal number of volunteers (estimate if necessary	′			7
		otal unrelated business revenue from Part VIII, c				0
_	b١	Net unrelated business taxable income from Form	990-T, Part I, line 11			0
				Prior \		Current Year
ē				47	1,060	1,070,692
Revenue	9 F	Program service revenue (Part VIII, line 2g) $_{\dots \dots}$				0
ě	10 li	nvestment income (Part VIII, column (A), lines 3,	4, and 7d)		1,816	3,156
œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8	3c, 9c, 10c, and 11e)			0
		otal revenue – add lines 8 through 11 (must equ		47	2,876	1,073,848
		Grants and similar amounts paid (Part IX, column		1,10	4,242	474,923
	14 E	Benefits paid to or for members (Part IX, column (A). line 4)	,		0
"	4 = 6	Salaries, other compensation, employee benefits (Part IX column (A) lines 5–10)	-	4,650	211,772
ses	1625	Professional fundraising fees (Part IX, column (A).	line 11e)	·	1,000	
en	h					
Expenses	1 47 6	otal fundraising expenses (Part IX, column (D), li		1.0	2,177	107 106
_	17 (Other expenses (Part IX, column (A), lines 11a-1				197,106
		otal expenses. Add lines 13–17 (must equal Part			1,069	883,801
_	19 F	Revenue less expenses. Subtract line 18 from line	e 12		8,193	190,047
Net Assets or	<u> </u>			Beginning of C		End of Year
SSel	20				4,075	583,734
₹	21 T				9,749	49,471
		Net assets or fund balances. Subtract line 21 from	ı line 20	34	4,326	534,263
F	Part II	Signature Block				
		nalties of perjury, I declare that I have examined this re				y knowledge and belief, it is
tr	ue, corre	ect, and complete. Declaration of preparer (other than o	officer) is based on all information of which pre	parer has any kno	wledge.	
		ELECTRONICALLY SIGNED			10/	/30/25
Sig	gn	Signature of officer			Date	
	ere	MARK LEVENFUS	CHAIRMAN			
		Type or print name and title	VIII I I I I I I I I I I I I I I I I I			
_		Preparer's name	Preparer's signature	Date	01	if PTIN
Pai	id	·		Date	Check	□ "
		DEREK FLANAGAN	ELECTRONICALLY SIGNED		self-em	
	eparer	Firm's name GALLEROS ROBI			Firm's EIN	27-3263553
US	e Only	488 MADISON AV				
_		Firm's address NEW YORK, NY	10022		Phone no.	646-921-0400
Ma	v the IR	S discuss this return with the preparer shown ab	ove? See instructions			Yes No

	TO EDUCATE ABOUT AND SUPPORT SECONDARY AND ADVANCED SCIENCE AND TECHNOLOG
	EDUCATION IN ISRAEL. INSPECTION CODY
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 X No f "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?
4	f "Yes," describe these changes on Schedule O. 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 are required to report the amount of grants and allocations to others, he total expenses, and revenue, if any, for each program service reported.
I G F I	Code:)(Expenses \$ 537,302 including grants of \$ 474,924)(Revenue \$) HE FRIENDS OF ISRAEL SCI-TECH SCHOOLS INC. RAISED FUNDS IN SUPPORT OF THE BRAEL SCI-TECH SCHOOLS NETWORK. PHILANTHROPIC GIFTS INCLUDED INVESTMENTS HITHE FOLLOWING EXAMPLES, BUT NOT A COMPREHENSIVE LIST: THE CONNECTED ENERATIONS PROGRAM BRINGING HOLOCAUST SURVIVORS AND TEENS TOGETHER; IN ROMOTING MORE GIRLS TAKING STEM COURSES IN MIDDLE AND HIGH SCHOOL; HERASTRUCTURE AND PEDAGOGICAL INVESTMENTS IN SCHOOLS IN KIRYAT SHMONA, EBERIUS AND KIRYAT GAT; TRANSPORTATION COSTS FOR STUDENTS IN HATZOR; CHOLARSHIPS FOR STUDENTS IN HATZOR; AND MORE.
N	Code:) (Expenses \$ including grants of \$) (Revenue \$) A
N	
4c N	'A

Form 990 (2024) FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682 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	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		х
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		
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? <i>If "Yes," complete Schedule C, Part II</i>	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		A
•	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			32
	complete Schedule D, Part VI	11a		X
D	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	446		х
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	11b		
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		- 22
-	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	ا ا	ι,	
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	4.5	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		
10		16		Х
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		21
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	_	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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1 (one chief of Required Schedules (continued)			Τ
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the	T	7	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	V	1	
	employees? If "Yes," complete Schedule J	23	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, that was issued after December 31, 2002? If "Yes," answer lines 24b	24-		v
b	through 24d and complete Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		X
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
Ū	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			3,7
00	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
_	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
55	sections 201 7701 2 and 201 7701 22 If "Vas." complete Schoolule P. Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		x
37	related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
01	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			<u> </u>
	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1a 6 1b 0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
·	reportable gaming (gambling) winnings to prize winners?	1c	х	
DAA				(2024)

Form	990 (2024) FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682		P	age 5				
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax							
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,							
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the							
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or							
	gifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods							
	and services provided to the payor?	7a		X				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was							
	required to file Form 8282?	7с		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
•	sponsoring organization have excess business holdings at any time during the year?	8						
9	3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -							
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	90						
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12							
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Cross income from members or charabalders							
h	Gross income from other sources. (Do not net amounts due or paid to other sources							
	expired amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which							
	the organization is licensed to issue qualified health plans							
С	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15		X				
	If "Yes," see instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person, engage in any activities							
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17						
	If "Yes," complete Form 6069.							

Form 990 (2024) FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682 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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O. Enter the number of voting members included on line 1a, above, who are independent 1b 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? X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors, trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No **10a** Did the organization have local chapters, branches, or affiliates? 10a X If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe on Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, CA, CT, DC, FL, GA, IL, LA, MA, MD, MI, MN, NJ Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy. and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. JITASA GROUP 1750 W FRONT STREET 208-287-4777 BOISE ID 83702

DAA Form **990** (2024)

Form 990 (2	2024) FRIENDS OF ISRAEL SCI-TECH SCHOOLS,26-0492682	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee	s, and
	Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII	П
Section A.		
1a Complete	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the	

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

See the instructions for the order in Check this box if neither the org						ation	cor	mpensated any current of	ficer. director. or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box	c, unle cer ar	Pos heck ss pe	rson i	than or s both sor/truste Highest compensated	an	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) DAR NADLER EXECUTIVE DIRECTOR	40.00			х		<u>a</u>		175,792	0	8,314
(2) MARK LEVENFUS CHAIRMAN	1.00	x		х				0	0	0
(3) JANICE WEINMAN-	SHORENS' 1.00	ĽΕΙ	N					-		
PRESIDENT (4) EDITH EVERETT	1.00	X		х				0	0	0
PRESIDENT (5) LINDA ROSEN	1.00	X		X				0	0	0
TREASURER (6) LORI ALMOULI-CO	0.00 NFINO	x		х				0	0	0
DIRECTOR (7) KIM GANTZ	1.00	x						0	0	0
DIRECTOR	1.00	x						0	0	0
(8) JORDAN TENNENBA	1.00 0.00	х						0	0	0
(9)										
(10)										
(11)										

Form **990** (2024)

Form 990 (2024) FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682

Pa	rt VII Section A. Officer	s, Directors, Tr	uste	es,	ĸey	Em	ibio	/ees	s, and Hignest Compens	ated Employees (continu	ea)			
	Name and title	(B) Average hours per week (list any hours for related organizations below	box	cer a	Pos check ess pe	rson	than is both or/trus Highest compensated	n an tee)	(D) Reportable compensation from the organization (W-2/ 1099-NISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	org	of oth compens from t ganizatio	amount ner sation the	
		dotted line)	tee	ustee			nsated							
(12)														
(13)														
(14)														
(15)														
(16)														
(17)														
(18)														
(19)														
1b	Subtotal								175,792				8,3	314
С	Total from continuation she	eets to Part VII,	Se	ctior	ıΑ				175 700					24.4
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (ir								175,792 ve) who received more that	an \$100.000 of			8,5	314
	reportable compensation from			1									Yes	No
3	Did the organization list any fo	ormer officer, di	rect	or, tr	uste	e, ke	ey er	mplo	oyee, or highest compensat	ted	ſ		163	
4	employee on line 1a? If "Yes, For any individual listed on lin									n from the		3		Х
-	organization and related orga											4	x	
5	Did any person listed on line	1a receive or ac	crue	cor	nper	nsati	on fr	om a		or individual			1	
Sect	for services rendered to the clion B. Independent Contraction		Yes,	" coi	mple	te S	chec	lule	J for such person			5		X
1	Complete this table for your f	ive highest comp												
	compensation from the organ	ization. Report c (A) I business address	omp	ensa	ation	for	the o	caler		ithin the organization's tax (B) tion of services	year.		(C) mpensat	
	Name and	Dusiness address							Descript	tion of services			mpensat	ion
								-						
								L						
								\vdash						
								_						
2	Total number of independent received more than \$100,000								ose listed above) who	0				
				4		اس							000	

1 0	II V		f Sch	nedule O con	tains	a respo	onse or no	te to any line in	this Part VIII		
		D	L	1! _				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
# #	12	Federated cam	paigns		1a	n					
iz our	la h	Membership du			1b	-			O		/ y
Ą,	D	Fundraising eve	es		1c						
ar ts	4	Related organiz	zations		1d						
E,	u a	Government grants (c			1e						
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, and similar amounts in	, gifts, g	rants,	1f	1,	070,692				
문항	g	Noncash contributions			4	Φ.					
o b		lines 1a-1f			1g			1,070,692			
9 C	<u>n</u>	Total. Add lines	s 1a-1	<u> </u>				1,070,092			
"	2a						Business Code				
<u>ĕ</u>	Za b										
<u>s</u> s	C										
Program Service Revenue	4										
ğĕ	u 0										
<u>د</u> ا	f	All other progra		vice revenue							
		Total. Add lines									
	3	Investment inco									
		other similar an						3,156			3,156
	4	Income from inv	/estme	nt of tax-exemi	nt bond	nroceed	is	- 7 - 5			0,200
	5	Royalties									
	•	rtoyanioo	· · · · · · ·	(i) Real			Personal				
	6a	Gross rents	6a	· ·		()					
		Less: rental expenses									
		Rental inc. or (loss)	6c								
		Net rental incom		(loss)							
	7a	Gross amount from		(i) Securities		1	Other				
		sales of assets other than inventory	7a								
e n	b	Less: cost or other									
/en		basis and sales exps.	7b								
Re	С	Gain or (loss)	7c								
Other Revenue		Net gain or (los	s)								
됐		Gross income from	,								
		(not including \$									
		of contributions re									
		1c). See Part IV, li			8a						
	b	Less: direct exp			8b						
	С	Net income or (loss) i	from fundraising	event	S					
		Gross income fi									
		activities. See P	art IV	, line 19	9a						
	b	Less: direct exp			9b						
	С	Net income or ((loss) 1	from gaming act	tivities						
	10a	Gross sales of i	invent	ory, less							
		returns and allo	wance	es	10a						
	b	Less: cost of go	ods s	old	10b						
	С	Net income or (loss) 1	rom sales of inv	entory/	<u> </u>					
SN							Business Code				
<u>e</u> e	11a										
llan en	b										
Miscellaneous Revenue	С										
Ĕ		All other revenu									
		Total. Add lines									
	12	Total revenue.	See	instructions				1,073,848	0	0	3,156

Sect	ion 501(c)(3) and 501(c)(4) organizations must concern the Check if Schedule O contains a response			complete column (A).	X
Do i	not include amounts reported on lines 6b, 7b,		(B)	(C)	(D)
	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	115Dt	3CHO		Dy
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and	474 000	474 000		
	foreign individuals. See Part IV, lines 15 and 16	474,923	474,923		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	100 000	40 400		440 ==4
	trustees, and key employees	197,956	49,489	29,693	118,774
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	10.010			
10	Payroll taxes	13,816	3,454	2,072	8,290
11	Fees for services (nonemployees):				
а	Management				
b	<u> </u>	36,694		36,694	
С	· · · · · · · · · · · · · · · · · · ·	26,428		26,428	
d	* ×				
е	·				
f	· · · · · · · · · · · · · · · · · · ·				
g	,	22 274		66.06	00 654
	(A), amount, list line 11g expenses on Schedule O.)	99,054	9,436	66,967	22,651
12		4= ==0		4	
13	Office expenses	17,772		17,772	
14	Information technology				
15	Royalties				
16	Occupancy	11 150		0 600	1 551
17	Travel	11,159		9,608	1,551
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
_	(A), amount, list line 24e expenses on Schedule O.) OTHER EXPENSES	5,999		5,999	
a	*	5,999		5,999	
b	· · · · · · · · · · · · · · · · · · ·				
q	· · · · · · · · · · · · · · · · · · ·				
d	All other expenses				
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	883,801	537,302	195,233	151,266
25 26	Joint costs. Complete this line only if the	003,001	331,302	190,200	131,200
-	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)				

Form 990 (2024) FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682

Part X Balance Sheet

Page **11**

P	art)	K Balance Sheet				
		Check if Schedule O contains a response or n	ote to any line in this Part X			
				(A)		(B)
				Beginning of year		End of year
	1	Cash—non-interest-bearing		149,841	1	124,442
	2	Savings and temporary cash investments		122,863	2	10,220
	3	Pledges and grants receivable, net		93,333	3	445,471
	4				4	
	5	Loans and other receivables from any current or for				
		trustee, key employee, creator or founder, substantia				
	_	controlled entity or family member of any of these po			5	
	6	Loans and other receivables from other disqualified				
ets	_	under section 4958(f)(1)), and persons described in			6	
Assets	7	Notes and loans receivable, net			7	
1	8			7.064	8	2 (01
	9			7,264	9	3,601
	10a	Land, buildings, and equipment: cost or other				
	١.	basis. Complete Part VI of Schedule D				
		Less: accumulated depreciation		774	10c	
	11	Investments—publicly traded securities	774	11		
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14				14	
	15			274 075	15	E02 724
	16	Total assets. Add lines 1 through 15 (must equal lines)		374,075	16	583,734
		Accounts payable and accrued expenses		29,749	17	49,471
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part		21		
Liabilities	22	Loans and other payables to any current or former of				
₽ĬĬ		trustee, key employee, creator or founder, substantia			22	
<u>E</u>		controlled entity or family member of any of these pe	ersons		22	
	23	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated thi	rd parties		23	
	24 25	. ,			24	
	23	Other liabilities (including federal income tax, payabl parties, and other liabilities not included on lines 17-				
		of Colorabile D	, ,		25	
	26	Total liabilities. Add lines 17 through 25		29,749	26	49,471
	20			23,143	20	77,711
Ses		Organizations that follow FASB ASC 958, check and complete lines 27, 28, 32, and 33.	Tiele A			
ano	27	NI_44tht _l		120,246	27	80,791
Bal	28	Not coasts with depar restrictions		224,080	28	453,472
pu	20	Organizations that do not follow FASB ASC 958	check her	221/000	20	100/172
Ξ		and complete lines 29 through 33.	, check hei			
ō	29	One State of the s			29	
ets	30	Paid-in or capital surplus, or land, building, or equip	ment fund		30	
\SS	31	Retained earnings, endowment, accumulated incom-			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		344,326	32	534,263
ž	33	Total liabilities and net assets/fund balances		374,075	33	583,734

Form **990** (2024)

<u> Forn</u>	n 990 (2024) FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682				Pag	ge 12
Pa	art XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			\bot
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u> </u>		13,8	
2	Total expenses (must equal Part IX, column (A), line 25)	2			33,8	
3	Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	3	M			<u> </u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		34		<u> 326</u>
5	Net unrealized gains (losses) on investments	5			:	<u> 110</u>
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 on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		53	34,2	<u> 263</u>
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u></u>			X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both.					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>		3b		
				Form	990	(2024)

SCHEDULE A (Form 990)

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.

Open to Public Inspection

OMB No. 1545-0047

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization FRIENDS OF ISRAEL SCI-TECH SCHOOLS,

Employer identification number 26-0492682

Pa	ırt l	Reas	on for Public Charity	/ Status. (All organizatio	ns mus	t comp	lete this part.) See instr	uctions.
The	orga			se it is: (For lines 1 through 12,				
1			•	sociation of churches described		•	,	
2	Н)(A)(ii). (Attach Schedule E (Fo		•	5)(1)(~)(1).	
	Н		, ,,	rice organization described in s	, ,		A \/;;;\	
3	Н			•			,,	a haanitalla nama
4	Ш			ed in conjunction with a hospital	describe	d in Sec	uon 170(b)(1)(A)(iii). Enter th	e nospitars name,
_	\Box	city, and stat						
5	Ш			of a college or university owner	d or oper	ated by a	governmental unit described	ın
_			0(b)(1)(A)(iv). (Complete Pa	,				
6	H		-	governmental unit described in			. , , ,	
7	X	U	ion that normally receives a section 170(b)(1)(A)(vi). (substantial part of its support f Complete Part II.)	rom a go	vernment	al unit or from the general pul	Olic
8		A community	trust described in section	170(b)(1)(A)(vi). (Complete Pa	art II.)			
9	П	An agricultur	al research organization de	scribed in section 170(b)(1)(A	(ix) ope	rated in c	onjunction with a land-grant o	ollege
		or university university:	or a non-land-grant college	of agriculture (see instructions)	. Enter th	e name,	city, and state of the college of	Dr .
10			ion that normally receives (1) more than 33 1/3% of its sup	port from		tions, membership fees, and o	aross
	ш			npt functions, subject to certain				
			9	and unrelated business taxable	,		,	
		acquired by t	the organization after June 3	30, 1975. See section 509(a)(2). (Comp	olete Part	III.)	
11	Ц	An organizati	ion organized and operated	exclusively to test for public sa	afety. See	section	509(a)(4).	
12	\square	•		exclusively for the benefit of, to	•			•
				tions described in section 509				
			•	escribes the type of supporting	•		•	•
	а			perated, supervised, or controlle	-			giving
			• • • • •	wer to regularly appoint or elect	•	ty of the	directors or trustees of the	
	h		0 0	complete Part IV, Sections A		h ito oun	norted erganization(s) by bay	ing
	b			upervised or controlled in conn rting organization vested in the				•
			•	e Part IV, Sections A and C.	same pe	130113 1116	at control of manage the supp	bited
	С		•	supporting organization operat	ed in cor	nection v	vith and functionally integrated	d with
	Ŭ			structions). You must complete				
	d	Type III	non-functionally integrate	ed. A supporting organization o	perated i	n connec	tion with its supported organiz	ration(s)
		that is no	ot functionally integrated. Th	e organization generally must s	satisfy a	distributio	n requirement and an attentive	eness
		requireme	ent (see instructions). You	must complete Part IV, Section	ons A ar	nd D, and	d Part V.	
	е			ceived a written determination fr			is a Type I, Type II, Type III	
			• •	on-functionally integrated suppo	orting orga	anization.		
	†		mber of supported organiza					
	g		ı	the supported organization(s).				
(i)		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–10	1 ' '	organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
	0.5	jai neadori		above (see instructions))		nent?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
` '								
(C)								
. ,								
(D)								
` '								
(E)								
` '								
Tota								

Page 2

Schedule A (Form 990) 2024

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	-	,	4 1	71		
Caler	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	430,094	PE	1,391,120	471 060	1 070 693	4 036 503
2	Tax revenues levied for the	430,084	1,573,546	1,391,120	471,060	1,070,692	4,936,502
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	430,084	1,573,546	1,391,120	471,060	1,070,692	4,936,502
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)						2,067,949
6	Public support. Subtract line 5 from line 4						2,868,553
	tion B. Total Support dar year (or fiscal year beginning in)	(a) 2020	(h) 2024	(a) 2022	(4) 2022	(a) 2024	(f) Total
	A 4	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends,	430,084	1,573,546	1,391,120	471,060	1,070,692	4,936,502
0	payments received on securities loans, rents, royalties, and income from similar sources	3	14	155	1,816	3,156	5,144
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						4,941,646
12	Gross receipts from related activities, etc	(see instructions))			12	
13	First 5 years. If the Form 990 is for the	,					
	organization, check this box and stop he						
Sec	tion C. Computation of Public	Support Perce	entage				
14	Public support percentage for 2024 (line 6	6, column (f), divide	ed by line 11, col	umn (f))		14	58.05 %
15	Public support percentage from 2023 Sch	nedule A, Part II, lir	ne 14			15	44.74%
16a	33 1/3% support test — 2024. If the org	anization did not c	heck the box on I	ine 13, and line 14	l is 33 1/3% or mo	ore, check this	
	box and stop here. The organization qua	alifies as a publicly	supported organ	ization			X
b	33 1/3% support test — 2023. If the org						
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test —	2024. If the organiz	zation did not che	ck a box on line 1	3, 16a, or 16b, and	d line 14 is	
	10% or more, and if the organization mee	ets the facts-and-ci	ircumstances test	, check this box ar	nd stop here. Exp	olain in	
	Part VI how the organization meets the fa	acts-and-circumsta	nces test. The or	ganization qualifies	s as a publicly sup	pported	
	organization						
b	10%-facts-and-circumstances test —	2023. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, or 17	a, and line	
	15 is 10% or more, and if the organizatio				•	•	
	in Part VI how the organization meets the				. ,	• •	
	organization						L
18	Private foundation. If the organization d	id not check a box	on line 13, 16a,	16b, 17a, or 17b, o	check this box and	d see	_
	instructions						
						Schedule	A (Form 990) 2024

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Schedule A (Form 990) 2024

Part III Support

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

(Complete only if you checked the box on line 10 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.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1112	bhe	GUU			y
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						
8	Add lines 7a and 7b Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support					•	
Calen	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on 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 VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)					1()(0)	
14	First 5 years. If the Form 990 is for the organization, check this box and stop he			•		. , . ,	
Sec	tion C. Computation of Public S						· · · · · · · · · · · · · · · · · · ·
15	Public support percentage for 2024 (line 8			umn (f))		15	%
16	Public support percentage from 2023 Sch					امدا	%
	tion D. Computation of Investm						
17	Investment income percentage for 2024 ((line 10c, column (f), divided by line	13, column (f))		17	%
	Investment income percentage from 2023	Schedule A, Part	III, line 17			18	%
19a	33 1/3% support tests — 2024. If the or	ganization did not	check the box on	line 14, and line 1	5 is more than 33	1/3%, and line	
	17 is not more than 33 1/3%, check this b	-	•			•	
b	33 1/3% support tests — 2023. If the or	-					
	line 18 is not more than 33 1/3%, check the	•	· ·	•	. ,	· ·	
20	Private foundation. If the organization d	id not check a box	on line 14, 19a,	or 19b, check this	box and see instr	uctions	

Schedule A (Form 990) 2024

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes." describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) nurnoses
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes." answer line 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

7			
"		Yes	No
	1		
	2		
	3a		
	Ja		
	3b		
	3с		
	30		
	4a		
	4b		
	40		
	4c		
	5a		
	Ja		
	5b		
	5c		
	6		
	-		
	7		
	8		
	0.0		
	9a		
	9b		
	9с		
	10a		
	10b		
Sche	dule A	(Form 9	90) 2024
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Schedu	tle A (Form 990) 2024 FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-049268	2		Page 5
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI .	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
04	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
_	how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
Soot	supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction).	15).		
a b	The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in:	structic	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to each of its supported organizations, and how the organization determined	2a		
	that these activities constituted substantially all of its activities.			
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would	01		
	have engaged in these activities but for the organization's involvement.	2b		
3				
a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
u	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	•			
-	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	26		

	le A (Form 990) 2024 FRIENDS OF ISRAEL SCI-TECH			682 Page 6
Par	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgar	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N			,
	instructions. All other Type III non-functionally integrated supporting organizations mu	ust co	mplete Sections A through	
Sect	on A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		11 11/
2	Recoveries of prior-year distributions	2		7
3	Other gross income (see instructions)	3		-
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated	d Type	e III supporting organization	n
	(see instructions).			

Schedule A (Form 990) 2024

FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682 Schedule A (Form 990) 2024 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 3 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2024 from Section C, line 6 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E - Distribution Allocations (see instructions) **Excess Distributions** Underdistributions Distributable Amount for 2024 Pre-2024 Distributable amount for 2024 from Section C, line 6 Underdistributions, if any, for years prior to 2024 (reasonable cause required-explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2024 **a** From 2019 **b** From 2020 **c** From 2021. **d** From 2022 e From 2023 f Total of lines 3a through 3e **g** Applied to underdistributions of prior years h Applied to 2024 distributable amount i Carryover from 2019 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2024 from Section D. line 7: a Applied to underdistributions of prior years **b** Applied to 2024 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2025. Add lines 3j

Schedule A (Form 990) 2024

and 4c.

Breakdown of line 7:

a Excess from 2020 ...

b Excess from 2021 ...

c Excess from 2022 ...

d Excess from 2023 ...

e Excess from 2024 ...

Schedule A (Fo	orm 990) 2024	FRIEND	S OF IS	RAEL S	CI-TECH	SCHOOLS	3,26-04926	82 Page 8
Part VI								ne 17a or 17b; Part
	III, line 12; Part	t IV, Section A, I	ines 1, 2, 3	8b, 3c, 4b, 4	4с, 5а, 6, 9а	ı, 9b, 9c, 11a	a, 11b, and 11	c; Part IV, Section
	B, lines 1 and 2	2; Part IV, Section	on C, line 1	; Part IV, S	ection D, lin	es 2 and 3;	Part IV, Section	on E, lines 1c, 2a, 2b
	3a, and 3b; Pa	rt V, line 1; Part	V, Section	B, line 1e;	Part V, Sect	tion D, lines	5, 6, and 8; ar	nd Part V,
	Section E. lines	s 2, 5, and 6. A	lso complet	e this part	for any addi	itional inform	ation. (See in	structions.)
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DAA Schedule A (Form 990) 2024

Schedule B

(Form 990) (Rev. December 2024)) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Name of the organization

FRIENDS OF ISRAEL SCI-TECH SCHOOLS, Employer identification number

26-0492682 INC.

Organization type (check on	G).		
Filers of:	Section:		
Form 990 or 990-EZ	X 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		
, ,	covered by the General Rule or a Special Rule .), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See		
General Rule			
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a tributions.		
Special Rules			
regulations under sect	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or I from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.		
contributor, during the literary, or educational	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering stead of the contributor name and address), II, and III.		
contributor, during the contributions totaled m	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such nore than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the to this organization because it received nonexclusively religious, charitable, etc., contributions e during the year	 	
•	t isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), bu line 2, of its Form 990; or check the box on line H of its Form 990-F7 or on its Form 990-PF, Part I		

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (Rev. 12-2024)

PAGE 1 OF 1 Schedule B (Form 990) (Rev. 12-2024) Name of organization Employer identification number FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (c) Name, address, and ZIP **Total contributions** Type of contribution No. 1 X Person **Payroll** 500,000 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 2 Person **Payroll** 100,000 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 3 Person **Payroll** 50,000 Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 4 Person **Payroll** 25,000 Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) Name, address, and ZIP + 4 Type of contribution No. **Total contributions** Person **Payroll** Noncash (Complete Part II for noncash contributions.)

(d)

Type of contribution

Person
Payroll
Noncash
(Complete Part II for noncash contributions.)

(c)

Total contributions

(a)

No.

(b)

Name, address, and ZIP + 4

SCHEDULE D (Form 990)

Rev. December 2024) Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization FRIENDS OF ISRAEL SCI-TECH SCHOOLS 26-0492682 INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year 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? 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? Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included on line 2a 2c d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conversation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? Yes 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB 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 FASB 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) Revenue included on 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 FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 **b** Assets included in Form 990. Part X

Schedule D (Form 990) (Rev. 12-2024) FRIE							Page Z
Part III Organizations Maintaini	ng Collections of	of Art, Historica	I Treasures, o	r Other S	Similar Ass	sets (co	ontinued)
3 Using the organization's acquisition, access collection items (check all that apply).	ssion, and other recor	ds, check any of the	following that make	e significant	use of its		
a Public exhibition	■ d □	Loan or exchange p	rogram				
b Scholarly research		Other					
		Outer					
						JV	
4 Provide a description of the organization's	collections and expla	in how they further t	the organization's ex	xempt purp	ose in Part		
XIII.							
5 During the year, did the organization solic assets to be sold to raise funds rather tha						☐ Ye	es 🗆 No
Part IV Escrow and Custodial	Arrangements						
Complete if the organization 990, Part X, line 21.	on answered "Ye	es" on Form 990	, Part IV, line 9,	or report	ted an amo	unt on	Form
1a Is the organization an agent, trustee, cust	odian or other interme	ediary for contribution	ns or other assets n	nt			
		•				ΠYe	es No
						□ .,	,3 110
b If "Yes," explain the arrangement in Part >	dir and complete the	iollowing table.				A 100 01 110	
						Amoun	
c Beginning balance					1c		
d Additions during the year					1d		
e Distributions during the year					1e		
f Ending balance					1f		
2a Did the organization include an amount or	n Form 990. Part X. lir	ne 21. for escrow or	custodial account li	ability?		Ye	es No
b If "Yes," explain the arrangement in Part X						_	П
Part V Endowment Funds	0.1.001. 1.010 1. 0.10	onplantation has bee	p. o	****			
Complete if the organizati	ion answered "Ve	e" on Form 990	Part IV line 10	1			
Complete il the organizati						(-) [
	(a) Current year	(b) Prior year	(c) Two years bac	K (a) II	nree years back	(e) Foul	r years back
1a Beginning of year balance						-	
b Contributions							
c Net investment earnings, gains,							
and losses							
d Grants or scholarships							
e Other expenditures for facilities and							
•							
programs							
f Administrative expenses						-	
g End of year balance							
2 Provide the estimated percentage of the c		ice (line 1g, column	(a)) held as:				
a Board designated or quasi-endowment	%						
b Permanent endowment							
c Term endowment %							
The percentages on lines 2a, 2b, and 2c s	should equal 100%						
3a Are there endowment funds not in the pos	•	zation that are held :	and administered fo	r the			
·	330331011 OF THE OTGATH	zation that are note (and administrated to	i tilo		ſ	Yes No
organization by:						2-(1)	169 140
(i) Unrelated organizations?						3a(i)	
(ii) Related organizations?						3a(ii)	
b If "Yes" on line 3a(ii), are the related organ	nizations listed as req	uired on Schedule R	?			3b	
4 Describe in Part XIII the intended uses of	the organization's en	dowment funds.					
Part VI Land, Buildings, and Ed	quipment	·					
Complete if the organizati		s" on Form 990.	Part IV, line 11	la. See F	orm 990. P	art X. li	ine 10.
Description of property	(a) Cost or other		r other basis	(c) Accumula		(d) Book	
t and a brakery	(investment)	',	ther)	depreciation		(.,====	
1e Land	, ,	(0	,	-F			
1a Land							
b Buildings							
c Leasehold improvements							
d Equipment							
e Other				· · · · · ·			·
Total. Add lines 1a through 1e. (Column (d) mu		art X, line 10c, colun	nn (B))				

Schedule D (F				ISRAEL	SCI-TECH	SCHO	OOLS,26-049268	2 Page 3
Part VII		 Other Securi 						
			answe	<u>red "Yes" or</u>			ine 11b. See Form 99	
		n of security or category			(b) Book value	е	(c) Method o	
		g name of security)			- 1		Cost or end-of-ye	ar market value
(1) Financial (OOT		\mathbf{n}	-
` '	d equity interests				UUL	 U		/// /
(3) Other								
(A) (B)								
(C)								
(D)								
(E)								
(F)								
(G)								
(H)								
Total. (Column		rm 990, Part X, line		I. (B))				
Part VIII		- Program Rel						
			answe	red "Yes" or			ine 11c. See Form 99	
	(a) Descr	iption of investment			(b) Book value	е	(c) Method o	
							Cost or end-of-ye	ar market value
(1)								
(2)								
(3)								
(4)								
(5) (6)								
(7)								
(8)								
(9)								
	n (b) must equal Fo	rm 990, Part X, line	13, co	I. (B))				
Part IX	Other Assets							
	Complete if the	e organization a	answe	red "Yes" or	n Form 990, Pa	art IV, I	ine 11d. See Form 99	0, Part X, line 15.
			(a) Description				(b) Book value
(1)								
(2)								
(3)								
(4)								
(5)								
(6) (7)								
(8)								
(9)								
	n (b) must equal Fo	rm 990, Part X, line	15, co	I. (B))				
Part X	Other Liabilit	ies					line 11e or 11f. See F	orm 990, Part X,
1.			(a) Des	scription of liability				(b) Book value
	ncome taxes							
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)	n (h) must equal Eq	rm 990, Part X, line	25 00	/ (R))				
					otnote to the organ	nization's	financial statements that re	enorts the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	edule D (Form 990) (Rev. 12-2024 RIENDS OF ISRAEL SCI-TEC			
Pa	art XI Reconciliation of Revenue per Audited Financial State	-	er Retu	rn
_	Complete if the organization answered "Yes" on Form 990	, Part IV, line 12a.	1 4 1	1,073,738
2	Total revenue, gains, and other support per audited financial statements		. 1	1,073,736
	Net unrealized gains (losses) on investments	2a -11	0	101/
b	Donated services and use of facilities	2b		() ()
С	Recoveries of prior year grants	2c	74	$\mathbf{P}_{\mathbf{y}}$
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	-110
3	Subtract line 2e from line 1		. 3	1,073,848
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b		_	
	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			1,073,848
	art XII Reconciliation of Expenses per Audited Financial Stat		<u> </u>	
	Complete if the organization answered "Yes" on Form 990		per ite	tuiii
1		, , , , , , , , , , , , , , , , , , , ,	1	883,801
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments			
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
	Add lines 2a through 2d		2e	002 001
3			. 3	883,801
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4-		
	Investment expenses not included on Form 990, Part VIII, line 7b		-	
h				
	Other (Describe in Part XIII.)		40	
С	Add lines 4a and 4b			883.801
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			883,801
5 Pa	Add lines 4a and 4b		5	
5 Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information	IV, lines 1b and 2b; Part V, line	5	
2; Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	IV, lines 1b and 2b; Part V, line	5	
Provv 2; Pa Prov 2; Pa Pr Pr Tr Pr Mr Tr Pr	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information vide 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 de any additional information. ERTAINING TO UNCETERMINED THAT SUBJECT TO UNCETERMINED TO UNCETERMINED TO UNCETERMINED TO AUITORE SUBJECT TO URRENTLY NO AUITEVES IT IS NO	ERTA CERTA THERE I OR ROUT OTTS I	, line IN TAX ARE NO DISCLOSURE II INE AUDITS BY
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Provv 2; Pa Prov 2; Pa Pr Pr Tr Pr Mr Tr Pr	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide the ORGANIZATION APPLIES THE PROVISIONS PEROVISIONS, FASB ASC TOPIC 740, AND HAS DETATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE FINANCIAL STATEMENTS. THE ORGANIZATION PAXING JURISDICTIONS; HOWEVER, THERE ARE CONTROLS IN PROGRESS. THE ORGANIZATION BELI	IV, lines 1b and 2b; Part V, line de any additional information. ERTAINING TO UNCETERMINED THAT SUBJECT TO UNCETERMINED TO UNCETERMINED TO UNCETERMINED TO AUITORE SUBJECT TO URRENTLY NO AUITEVES IT IS NO	ERTA CERTA THERE I OR ROUT OTTS I	, line IN TAX ARE NO DISCLOSURE II INE AUDITS BY
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Provv 2; Pa Prov 2; Pa Pr Pr Tr Pr Mr Tr Pr	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide the ORGANIZATION APPLIES THE PROVISIONS PEROVISIONS, FASB ASC TOPIC 740, AND HAS DETATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE FINANCIAL STATEMENTS. THE ORGANIZATION PAXING JURISDICTIONS; HOWEVER, THERE ARE CONTROLS IN PROGRESS. THE ORGANIZATION BELI	IV, lines 1b and 2b; Part V, line de any additional information. ERTAINING TO UNCETERMINED THAT SUBJECT TO UNCETERMINED TO UNCETERMINED TO UNCETERMINED TO AUITORE SUBJECT TO URRENTLY NO AUITEVES IT IS NO	ERTA CERTA THERE I OR ROUT OTTS I	, line IN TAX ARE NO DISCLOSURE II INE AUDITS BY
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Provv 2; Pa Prov 2; Pa Pr Pr Tr Pr Mr Tr Pr	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide the ORGANIZATION APPLIES THE PROVISIONS PEROVISIONS, FASB ASC TOPIC 740, AND HAS DETATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE FINANCIAL STATEMENTS. THE ORGANIZATION PAXING JURISDICTIONS; HOWEVER, THERE ARE CONTROLS IN PROGRESS. THE ORGANIZATION BELI	IV, lines 1b and 2b; Part V, line de any additional information. ERTAINING TO UNCETERMINED THAT SUBJECT TO UNCETERMINED TO UNCETERMINED TO UNCETERMINED TO AUITORE SUBJECT TO URRENTLY NO AUITEVES IT IS NO	ERTA CERTA THERE I OR ROUT OTTS I	, line IN TAX ARE NO DISCLOSURE II INE AUDITS BY
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Provv 2; Pa Prov 2; Pa Pr Pr Tr Pr Mr Tr Pr	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide the ORGANIZATION APPLIES THE PROVISIONS PEROVISIONS, FASB ASC TOPIC 740, AND HAS DETATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE FINANCIAL STATEMENTS. THE ORGANIZATION PAXING JURISDICTIONS; HOWEVER, THERE ARE CONTROLS IN PROGRESS. THE ORGANIZATION BELI	IV, lines 1b and 2b; Part V, line de any additional information. ERTAINING TO UNCETERMINED THAT SUBJECT TO UNCETERMINED TO UNCETERMINED TO UNCETERMINED TO AUITORE SUBJECT TO URRENTLY NO AUITEVES IT IS NO	ERTA CERTA THERE I OR ROUT OTTS I	, line IN TAX ARE NO DISCLOSURE II INE AUDITS BY
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Provv 2; Pa Prov 2; Pa Pr Pr Tr Pr Mr Tr Pr	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide the ORGANIZATION APPLIES THE PROVISIONS PEROVISIONS, FASB ASC TOPIC 740, AND HAS DETATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE FINANCIAL STATEMENTS. THE ORGANIZATION PAXING JURISDICTIONS; HOWEVER, THERE ARE CONTROLS IN PROGRESS. THE ORGANIZATION BELI	IV, lines 1b and 2b; Part V, line de any additional information. ERTAINING TO UNCETERMINED THAT SUBJECT TO UNCETERMINED TO UNCETERMINED TO UNCETERMINED TO AUITORE SUBJECT TO URRENTLY NO AUITEVES IT IS NO	ERTA CERTA THERE I OR ROUT OTTS I	, line IN TAX ARE NO DISCLOSURE II INE AUDITS BY
Provv 2; Pa Prov 2; Pa Pr Pr Tr Pr Mr Tr Pr	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide the ORGANIZATION APPLIES THE PROVISIONS PEROVISIONS, FASB ASC TOPIC 740, AND HAS DETATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE FINANCIAL STATEMENTS. THE ORGANIZATION PAXING JURISDICTIONS; HOWEVER, THERE ARE CONTROLS IN PROGRESS. THE ORGANIZATION BELI	IV, lines 1b and 2b; Part V, line de any additional information. ERTAINING TO UNCETERMINED THAT SUBJECT TO UNCETERMINED TO UNCETERMINED TO UNCETERMINED TO AUITORE SUBJECT TO URRENTLY NO AUITEVES IT IS NO	ERTA CERTA THERE I OR ROUT OTTS I	, line IN TAX ARE NO DISCLOSURE II INE AUDITS BY

Schedule D (F	orm 990) (Rev. 12-	2024FRIENDS	OF ISRAE	L SCI-TECH	SCHOOLS, 26-04920	082 Page 5
Part XIII	Supplementa	I Information (continued)			
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			DOK		ion Co	
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SCHEDULE F (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No. 1545-0047

Open to Public

Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization FRIENDS OF ISRAEL SCI-TECH SCHOOLS, Employer identification number 26-0492682 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 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 X 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. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total of offices in employees, agents, and region (by type) (such as, a program service, describe specific type of expenditures for the region and investments fundraising, program services independent investments, grants to recipients service(s) in the region in the region located in the region) in the region MIDDLE EAST GRANTS TO RECIPIENT\$SCHOOL - SPECIFIC SU 474,924 (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11) (12)(13)(14)(15)(16) (17)3a Subtotal 474,924 **b** Total from continuation sheets to Part I c Totals (add 474,924 lines 3a and 3b)

Schedule F (Form 990) (Rev. 12-2024FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,

Part		eceived more than \$5,000. Part					
1	RS code (c) Region and EIN plicable)	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		KIRYAT SHMONA	83,330		,		
(2)		ISTEAM	18,000				
(3)		WOMEN AND GIRLS EMPO	10,000				
(4)		EDUCATIONAL PROGRAM	131,343				
(5)		JOB PLACEMENT/RETENT	12,850				
(6)		EVERETTE SCHOOL	200,000				
(7)		YESHIVA TICHONIT ORT	15,000				
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)		t are recognized as charities by the fo					

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

³ Enter total number of other organizations or entities

Schedule F (Form 990) (Rev. 12-202F)RIENDS OF ISRAEL SCI-TECH SCHOOLS 26-0492682

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

	Part III can be duplicated	if additiona	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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)			"					
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(10)			1		l .	1	1	

Schedule F (Form 990) (Rev. 12-2024)

Foreign Forms

Part IV

Schedule F (Form 990) (Rev. 12-2024FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682

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 the Instructions for Form 926) Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and	X No
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990) Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471) Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621) Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865) Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990) Yes	X No

Schedule F (Form 990) (Rev. 12-2024)

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Schedule E (Form 990) (Rev	1/-/U/4E KIENUS	OF	TOKACT	OCT-IECH	SCHOOLS 20-0432002	

Part V	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.								
рарт т	, LINE 3 - ACTIVITIES PER REGION								
REGION	EXPENDITURES INVESTMENTS								
MIDDLE	EAST \$ 474,924 \$ 0								

SCHEDULE J

(Form 990)

(Rev. December 2024)

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" on Form 990, Part IV, line 23. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682 INC. Questions Regarding Compensation Part I No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 1a? Indicate which, if any, of the following the 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. Compensation committee X Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: X a Receive a severance payment or change-of-control payment? X **b** Participate in or receive payment from a supplemental nonqualified retirement plan? c Participate in or receive payment from an equity-based compensation arrangement? X If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? X X **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: X **a** The organization? X **b** Any related organization? If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III X 7 8 Were any amounts reported on 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" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Page 2

Schedule J (Form 990) (Rev. 12-2024FRIENDS OF ISRAEL SCI-TECH SCHOOLS, 26-0492682

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 on 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 aren't listed on Form 990, Part VII,

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

(A) Name and Title		and/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			as deferred on prior Form 990
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1 EXECUTIVE DIRECTOR (ii			C	0			0
(i)							
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Schedule J (Form 990) (Rev. 12-2024)

Schedule J (Form 990) (Rev. 12-2024) FRIENDS OF ISRAEL SCI-TECH Part III Supplemental Information	SCHOOLS,26-0492682	Page 3
Provide the information explanation or descriptions required for Part	I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also compl	ete this part
for any additional information.	1, illies 1a, 1b, 5, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 6, and for 1 art ii. Also compr	ete tilis part
Public Inspe	ction Copy	

SCHEDULE O (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Attach to Form 990 or Form 990-EZ. Open to Public Go to www.irs.gov/Form990 for instructions and the latest information Inspection Employer identification number Name of the organization FRIENDS ISRAEL SCI-TECH SCHOOLS INC. 26-0492682 990, VI, PART LINE 11B -ORGANIZATION'S **PROCESS** TO REVIEW FORM FORM THE AUDIT COMMITTEE WILL SHARE THIS FORM 990 WITH THE BOARD OF DIRECTORS PRIOR TO A BOARD MEETING AND IT WILL BE REVIEWED WITH QUESTIONS DURING SUBSEOUENT BOARD MEETING. FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY THE EXECUTIVE DIRECTOR IS AWARE OF ANY CONFLICTS OF INTEREST AND FOLLOWS UP WITH THE APPROPRIATE BOARD MEMEBERS TO DISCUSS THE CONFLICT, IF ANY. HAVE ARISEN IN 2024. FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE EXECUTIVE COMMITTEE REVIEWED THE COMPENSATION OF THE EXECUTIVE DIRECTOR IN CONSULTATION WITH THE ISRAEL SCI-TECH SCHOOLS NETWORK LEADERSHIP, MAJOR RECIPIENT OF SUPPORT. THE EXECUTIVE DIRECTOR WAS NOTIFIED ABOUT CHANGE IN COMPENSATION SUBSEQUENT TO THE REVIEW AND CONVERSATION WITH LEADERSHIP. FORM 990, PART VI, LINE 17 - OTHER STATES WHERE COPY OF RETURN IS FILED OHIO, PENNSYLVANIA, SOUTH CAROLINA, TEXAS, VIRGINIA, WASHINGTON, WISCONSIN FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE ALL FILINGS ARE AVAILABLE UPON REQUEST. FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES DESCRIPTION TOT/PROG SERVICE MGT & GENERAL **FUNDRAISING** 66,967 9,436 22,651 990, PART XII, LINE 2C IN FINANCIAL REVIEW CHANGE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.