

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), section 527, or section 4947(a)(1) nonexempt charitable trust

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

OMB No 1545-0047

2000

Open to Public Inspection

A For the 2000 calendar year OR tax year period beginning **JUL 1, 2000** and ending **JUN 30, 2001**

B Check if applicable <input type="checkbox"/> Change of address <input type="checkbox"/> Change of name <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return (use also for state reporting)	Please use IRS label or print or type See Specific Instructions	C Name of organization SIMON WIESENTHAL CENTER, INC.	D Employer identification number 95-3964928	
		Number and street (or P O box if mail is not delivered to street address) 1399 S. ROXBURY DRIVE	Room/suite 	E Telephone number (310) 553-9036
		City or town state or country and ZIP LOS ANGELES, CA 90035		F Check <input type="checkbox"/> if application pending

G Organization type (check only one) 501(c) (03) (insert no) 527
 OR 4947(a)(1)

(H and I are not applicable to section 527 orgs)
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes" enter number of affiliates

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)
J Accounting method Cash Accrual Other (specify)

H(c) Are all affiliates included? N/A Yes No (if "No," attach a list)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return

I Enter 4-digit group exemption no. (GEN) N/A
L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	20,214,768.		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	8,119,172.		
	d	Total (add lines 1a through 1c) (cash \$ <u>26,703,502.</u> noncash \$ <u>1,630,438.</u>) SLE STATEMENT 8	1d	28,333,940.		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	2,851,119.		
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4	191,246.		
	5	Dividends and interest from securities	5	388,151.		
	6a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe UNREALIZED GAIN ON INVESTMENTS)	7	181,733.			
8a	Gross amount from sale of assets other than inventory	(A) Securities	8a	20,887,916.		
		(B) Other	8b	22,719,836.		
			8c	<1,831,920.>		
		d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1	8d	<1,831,920.>	
9	Special events and activities (attach schedule)					
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a				
		9b				
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
10	Gross sales of inventory less returns and allowances	10a				
		10b				
c	Gross profit (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				
11	Other revenue (from Part VII line 103)	11	176.			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	30,114,445.			
Expenses	13	Program services (from line 44, column (B))	13	21,455,323.		
	14	Management and general (from line 44, column (C))	14	2,786,453.		
	15	Fundraising (from line 44 column (D))	15	4,828,805.		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17	29,070,581.		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	1,043,864.		
	19	Net assets or fund balances at beginning of year (from line 73 column (A))	19	69,507,685.		
	20	Other changes in net assets or fund balances (attach explanation)	20	0.		
	21	Net assets or fund balances at end of year (combine lines 18 19 and 20)	21	70,551,549.		

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C) and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) cash \$ 90,000 . noncash \$	22 90,000.	90,000.	STATEMENT 3	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 668,474.	213,912.	240,650.	213,912.
26 Other salaries and wages	26 7,200,028.	5,780,411.	827,794.	591,823.
27 Pension plan contributions	27			
28 Other employee benefits	28 1,417,738.	968,603.	345,206.	103,929.
29 Payroll taxes	29 496,668.	360,366.	101,484.	34,818.
30 Professional fundraising fees	30 351,331.			351,331.
31 Accounting fees	31 52,998.		52,998.	
32 Legal fees	32			
33 Supplies	33 43,508.		43,508.	
34 Telephone	34			
35 Postage and shipping	35 46,382.	29,102.	17,280.	
36 Occupancy	36 227,768.		227,768.	
37 Equipment rental and maintenance	37 88,352.		88,352.	
38 Printing and publications	38 499,760.	499,760.		
39 Travel	39 4,490.	4,490.		
40 Conferences, conventions, and meetings	40			
41 Interest	41 62,356.	62,356.		
42 Depreciation, depletion, etc (attach schedule)	42 3,126,430.	3,017,617.	48,236.	60,577.
43 Other expenses (itemize)				
a OTHER	43a			
b EXPENSE-STATEMENT 9	43b 14,210,882.	10,428,706.	793,177.	2,988,999.
c BAD DEBTS EXPENSE	43c 483,416.			483,416.
d	43d			
e	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 29,070,581.	21,455,323.	2,786,453.	4,828,805.

Reporting of Joint Costs Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ 3,260,341. (ii) the amount allocated to Program services \$ 1,839,879. (iii) the amount allocated to Management and general \$ and (iv) the amount allocated to Fundraising \$ 1,420,462.

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? **SEE STATEMENT 2**

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts but optional for others)
a SIMON WIESENTHAL CENTER CONFRONTS HATE AND BIGOTRY AROUND THE WORLD. THE CENTER OPERATES A MUSEUM OF TOLERANCE OPEN TO THE PUBLIC THAT PROMOTES TOLERANCE AND EDUCATES THE PUBLIC ABOUT THE LEGACY OF THE HOLOCAUST AND THE (Grants and allocations \$ 90,000.)	21,455,323.
b DANGERS OF HATE AND PREJUDICE. IN ADDITION, THE MUSEUM CONDUCTS DIVERSITY TRAINING COURSES FOR POLICE OFFICERS, EDUCATORS AND OTHER PROFESSIONALS AND IS CURRENTLY BUILDING A SIMILAR FACILITY IN NEW YORK CITY. (Grants and allocations \$)	
c (Grants and allocations \$)	
d (Grants and allocations \$)	
e Other program services (attach schedule) (Grants and allocations \$)	
f Total of Program Service Expenses (should equal line 44, column (B) Program services)	21,455,323.

Part IV Balance Sheets

Note Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	17,745.	45 19,375.
	46 Savings and temporary cash investments	250,152.	46 10,872,532.
	47 a Accounts receivable	47a	
	b Less allowance for doubtful accounts	47b	47c
	48 a Pledges receivable	48a 11,560,409.	
	b Less allowance for doubtful accounts	48b 549,000.	48c 11,011,409.
	49 Grants receivable	1,869,049.	49 2,685,314.
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a 31,636.	
	b Less allowance for doubtful accounts	51b	51c 31,636.
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	406,629.	53 435,176.
	54 Investments - securities STMT 4 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	24,735,813.	54 9,601,805.
	55 a Investments - land, buildings, and equipment basis	55a	
	b Less accumulated depreciation	55b	55c
56 Investments - other		56	
57 a Land, buildings and equipment basis	57a 68,431,283.		
b Less accumulated depreciation STMT 5	57b 29,934,526.	57c 38,496,757.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 6)	1,281,129.	58 1,299,456.	
59 Total assets (add lines 45 through 58) (must equal line 74)	72,576,026.	59 74,453,460.	
Liabilities	60 Accounts payable and accrued expenses	2,215,154.	60 2,825,318.
	61 Grants payable		61
	62 Deferred revenue		62 650,000.
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe <input type="checkbox"/> NOTE PAYABLE)	853,187.	65 426,593.
66 Total liabilities (add lines 60 through 65)	3,068,341.	66 3,901,911.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		
	67 Unrestricted	27,623,326.	67 27,717,099.
	68 Temporarily restricted	40,575,805.	68 41,525,896.
	69 Permanently restricted	1,308,554.	69 1,308,554.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)	69,507,685.	73 70,551,549.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	72,576,026.	74 74,453,460.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes in Part III the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	30,114,445.
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments \$ _____		
(2)	Donated services and use of facilities \$ _____		
(3)	Recoveries of prior year grants \$ _____		
(4)	Other (specify) \$ _____		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	30,114,445.
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 \$ _____		
(2)	Other (specify) \$ _____		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	30,114,445.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	29,070,581.
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities \$ _____		
(2)	Prior year adjustments reported on line 20, Form 990 \$ _____		
(3)	Losses reported on line 20, Form 990 \$ _____		
(4)	Other (specify) \$ _____		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	29,070,581.
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 \$ _____		
(2)	Other (specify) \$ _____		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	29,070,581.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
RABBI MARVIN HIER 1265 EDRIS RD, LOS ANGELES, CA 90035	*Includes Pension 40 DEAN	*403,404.	Insurance Package 34,648.	0.
SUSAN BURDEN 11482 TWIN HILLS AVE., NORTHRIDGE, CA	*Includes Pension 40 TREASURER	*265,070.	Insurance Package 30,015.	0.
OTHER OFFICERS & DIRECTORS SEE ATTACHED STATEMENT 10	AS NEEDED	0.	0.	0.

75 Did any officer, director trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule Yes No Form 990 (2000)

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2000

Department of the Treasury
Internal Revenue Service

Supplementary Information

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

SIMON WIESENTHAL CENTER, INC.

Employer identification number

95 3964928

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ABRAHAM COOPER ----- 9327 OAKMORE RD, L.A., CA 90035	ASSOC DEAN * 40	Includes Pension Insurance Package *312,933.	30,531.	
MEYER MAY ----- 353 S HIGHLAND AVE, L.A., CA 90036	EXEC DIR * 40	Includes Pension Insurance Package *269,550.	29,082.	
MARLENE HIER ----- 1265 EDRIS RD, L.A., CA 90035	MBSHP DIR * 40	Includes Pension Insurance Package *244,694.	30,705.	
LIEBE GEFT ----- 1240 S. BEDFORD DR, L.A., CA 90035	MUSEUM DIR * 40	Includes Pension Insurance Package *206,213.	27,500.	
ROBERT NOVAK ----- 4601 SHERIDAN ST. #220, HOLLYWOOD, FL 40	NAT DVLOP DIR * 40	Includes Pension Insurance Package *188,590.	19,000.	
Total number of other employees paid over \$50,000 ▶	38			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
GUARDSMARK ----- 22 SOUTH 2ND STREET, MEMPHIS, TN 38103	SECURITY	687,437.
WHITNEY ASSOCIATES ----- 812 SW WASHINGTON ST., STE 300 PORTLAND, OR 97205	FUNDRAISING	351,331.
VIDERIKSEN & COMPANY ----- 507 CALLE SAN PABLO, CAMARILLO, 93012	ARCHITECTURAL SERVICES	278,937.
ISIS NEW MEDIA ----- 1335 COLUMBUS AVENUE, SAN FRANCISCO, CA 91433	WEBSITE MANAGEMENT	267,423.
TAFT DESIGN & ASSOCIATES ----- P.O. BOX 708, MANCHESTER, VT 05254	EXHIBIT DESIGN	244,032.
Total number of others receiving over \$50,000 for professional services ▶	19	

SIMON WIESENTHAL CENTER, INC
YEAR ENDED JUNE 30, 2001
ID# 95-3964928

FORM 990 SCHEDULE A, PART III, LINE 2D

Compensation to family members of trustees, directors, officers, creators or
key employees

	<u>Name/Title</u>	<u>Compensation</u>		<u>Benefits</u>	<u>Relationship</u>
1	Marlene Hier Membership Director	* 244,694	* Includes pension insurance package	30,705	Related to Marvin Hier
2	Alan Hier Fundraiser	* 107,365	* Includes pension insurance package	13,306	Related to Marvin Hier
3	Rabbi Aron Hier Associate Director, J S I	* 76,018	* Includes pension insurance package	6,973	Related to Marvin Hier