EXTENDED TO AUGUST 15, 2017

Form **990** — **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.

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

Department of the Treasury Internal Revenue Service

OMB No. 1545-0047 — **2015** — Open to Public Inspection

A For the 2015 calendar year, or tax year beginning OCT 1, 2015 and ending SEP 30, 2016

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Final return/terminated [ ] Amended return [ ] Application pending

C Name of organization: JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 126 HIGH STREET — Room/suite: 3 FL

City or town, state or province, country, and ZIP or foreign postal code: BOSTON, MA 02110

D Employer identification number: 04-2104347

E Telephone number: 617-457-8662

G Gross receipts $ 2,762,965.

F Name and address of principal officer: ADAM SUTTIN SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No — If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.JCRCBOSTON.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶ — L Year of formation: 1944 — M State of legal domicile: MA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: REPRESENTATIVE VOICE OF THE ORGANIZED JEWISH COMMUNITY IN THE GREATER BOSTON AREA.

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	31
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	31
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	25
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	3,095,983.	2,703,269.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,865.	6,873.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	52,823.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,102,848.	2,762,965.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,828,109.	1,839,591.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 338,059.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,147,112.	739,116.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,975,221.	2,578,707.
	19	Revenue less expenses. Subtract line 18 from line 12	127,627.	184,258.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	1,013,457.	1,257,444.
	21	Total liabilities (Part X, line 26)	104,368.	205,302.
	22	Net assets or fund balances. Subtract line 21 from line 20	909,089.	1,052,142.

Part II Signature Block

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

Sign Here

DocuSigned by: AA5C22B85545439 — Signature of officer — Date: 6/29/2017

ADAM SUTTIN, PRESIDENT — Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
JOLANTA TUCK, CPA	JOLANTA TUCK, CPA	06/28/17		P01340068

Firm's name ▶ KEVIN P MARTIN ASSOCIATES, P.C. — Firm's EIN ▶ 04-3097400

Firm's address ▶ 10 FORBES WEST BRAINTREE, MA 02184 — Phone no. (781)380-3520

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III .... [X]

1 Briefly describe the organization's mission:
REPRESENTATIVE VOICE OF THE ORGANIZED JEWISH COMMUNITY IN THE GREATER BOSTON AREA.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? .... [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 2,019,968. including grants of $) (Revenue $)
IN PURSUIT OF ITS GOALS, THE COUNCIL PURSUES AN ACTION AGENDA BY FORGING COLLABORATIVE PARTNERSHIPS WITHIN THE JEWISH COMMUNITY; AND BETWEEN THE JEWISH COMMUNITY AND THE BROADER SOCIETY. TO THIS END, THE COUNCIL EDUCATES, ASSISTS AND ENABLES THE JEWISH COMMUNITY TO PURSUE SOCIAL JUSTICE.
THE COUNCIL ADVOCATES ON ISSUES OF JEWISH COMMUNAL CONCERN. THE COUNCIL BUILDS COALITIONS FOR EFFECTIVE ACTION AND OPPORTUNITIES FOR COMMUNITY INVOLVEMENT AND CONVENES THE COMMUNITY IN TIMES OF CRISIS, CELEBRATION AND COMMEMORATION.

THESE PURPOSES ARE ACCOMPLISHED THROUGH THE FOLLOWING PROGRAM ACTIVITIES:

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 2,019,968.

SEE SCHEDULE O FOR CONTINUATION(S)

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*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	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	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		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 foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	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		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X

Part IV | Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
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
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on 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 organization's current and former officers, directors, trustees, key employees, and highest compensated 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 through 24d and complete Schedule K. If "No", go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 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? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *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 Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
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 sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, 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 related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part 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	1a	22		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
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	25		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		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
c	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).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	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	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
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	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		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	13b			
c	Enter the amount of reserves on hand	13c			
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 in Schedule O*		14b		

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

Check if Schedule O contains a response or note to any line in this Part VI ..... [X]

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 ..... 1a: 31 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b: 31			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such 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	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and 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	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	X	
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?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶MA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O)*

19 Describe in 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.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

THE CORPORATION - 617-457-8600
126 HIGH STREET, BOSTON, MA 02110

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

Check if Schedule O contains a response or note to any line in this Part VII ☐

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ADAM SUTTIN PRESIDENT	5.00	X		X				0.	0.	0.
(2) MIRIAM MAY VICE PRESIDENT	5.00	X		X				0.	0.	0.
(3) STACEY BLOOM VICE PRESIDENT	5.00	X		X				0.	0.	0.
(4) DEBBIE ISAACSON VICE PRESIDENT	5.00	X		X				0.	0.	0.
(5) SCOTT GILEFSKY TREASURER	5.00	X		X				0.	0.	0.
(6) CAMPE GOODMAN ASST TREASURER	5.00	X		X				0.	0.	0.
(7) ALEX KLIBANER SECRETARY	5.00	X		X				0.	0.	0.
(8) HOWARD BRICK ASST SECRETARY	5.00	X		X				0.	0.	0.
(9) BETH BADIK DIRECTOR	5.00	X						0.	0.	0.
(10) DARREN BLACK DIRECTOR	5.00	X						0.	0.	0.
(11) RONNE FRIEDMAN DIRECTOR	5.00	X						0.	0.	0.
(12) ALEX GOLDSTEIN DIRECTOR	5.00	X						0.	0.	0.
(13) PHILIP GORDON DIRECTOR	5.00	X						0.	0.	0.
(14) LESLEY INKER DIRECTOR	5.00	X						0.	0.	0.
(15) SAMANTHA JOSEPH DIRECTOR	5.00	X						0.	0.	0.
(16) FREDIE KAY DIRECTOR	5.00	X						0.	0.	0.
(17) ANN LEVIN DIRECTOR	5.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) FRANK LITWIN DIRECTOR	5.00	X						0.	0.	0.
(19) MEL SHUMAN DIRECTOR	5.00	X						0.	0.	0.
(20) SAM SLATER DIRECTOR	5.00	X						0.	0.	0.
(21) AMIEL WEINSTOCK DIRECTOR	5.00	X						0.	0.	0.
(22) PAUL BERNON DIRECTOR	5.00	X						0.	0.	0.
(23) SCOTT BRIGHTMAN DIRECTOR	5.00	X						0.	0.	0.
(24) ABBY FLAM DIRECTOR	5.00	X						0.	0.	0.
(25) MARK FRIEDMAN DIRECTOR	5.00	X						0.	0.	0.
(26) CHUCK KOPLIK DIRECTOR	5.00	X						0.	0.	0.
1b Sub-total ▶								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								559,148.	0.	65,250.
d Total (add lines 1b and 1c) ▶								559,148.	0.	65,250.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 3

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

Section B. Independent Contractors

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

(A) Name and business address NONE	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(27) BEN PEARLMAN DIRECTOR	5.00	X						0.	0.	0.
(28) CARL PERKINS DIRECTOR	5.00	X						0.	0.	0.
(29) BENJAMIN SAMEULS DIRECTOR	5.00	X						0.	0.	0.
(30) GEORGI VOGEL ROSEN DIRECTOR	5.00	X						0.	0.	0.
(31) ANNE SCHNADER DIRECTOR	5.00	X						0.	0.	0.
(32) JEREMY BURTON EXECUTIVE DIRECTOR	40.00			X				188,477.	0.	14,088.
(33) MICHAEL SELSMAN DIRECTOR OF FINANCE & ADMIN	40.00			X				99,052.	0.	21,476.
(34) ELANA MARGOLIS ASSOCIATE DIRECTOR	40.00					X		134,904.	0.	22,655.
(35) NAHMA NADICH ASSOCIATE DIRECTOR	40.00					X		136,715.	0.	7,031.
Total to Part VII, Section A, line 1c								559,148.		65,250.

532201
04-01-15

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 2,703,269.				
	g Noncash contributions included in lines 1a-1f: $					
	h **Total.** Add lines 1a-1f ▶		2,703,269.			
Program Service Revenue		Business Code				
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f ▶					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		6,873.			6,873.
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real / (ii) Personal				
	6 a Gross rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ▶					
	7 a Gross amount from sales of assets other than inventory	(i) Securities / (ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss) ▶					
	8 a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events ▶					
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities ▶					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue	Business Code				
	11 a DISCOUNT ON NOTE PAYAB	900099	52,823.	52,823.		
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d ▶		52,823.			
	12 **Total revenue.** See instructions. ▶		2,762,965.	52,823.	0.	6,873.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	343,091.	284,765.	17,155.	41,171.
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	1,218,180.	1,009,626.	57,352.	151,202.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	45,743.	37,967.	2,287.	5,489.
9 Other employee benefits	127,878.	105,938.	5,907.	16,033.
10 Payroll taxes	104,699.	86,800.	4,991.	12,908.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	9,497.		9,497.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	113,105.	52,267.	34,514.	26,324.
12 Advertising and promotion				
13 Office expenses	127,495.	81,178.	36,715.	9,602.
14 Information technology				
15 Royalties				
16 Occupancy	136,180.	113,409.	6,349.	16,422.
17 Travel	237,693.	218,225.	18,628.	840.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	77,088.	7,289.	12,328.	57,471.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	11,939.	1,685.	10,003.	251.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD	26,119.	20,819.	4,954.	346.
b				
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	2,578,707.	2,019,968.	220,680.	338,059.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	849,839.	2	722,723.
	3	Pledges and grants receivable, net	124,485.	3	362,648.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net	15,000.	7	153,969.
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	24,133.	9	18,104.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D (10a)			
	b	Less: accumulated depreciation (10b)		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	1,013,457.	16	1,257,444.
Liabilities	17	Accounts payable and accrued expenses	92,053.	17	71,704.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	12,315.	24	133,598.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	104,368.	26	205,302.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	784,604.	27	689,494.
	28	Temporarily restricted net assets	124,485.	28	362,648.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	909,089.	33	1,052,142.
	34	Total liabilities and net assets/fund balances	1,013,457.	34	1,257,444.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,762,965.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,578,707.
3	Revenue less expenses. Subtract line 2 from line 1	3	184,258.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	909,089.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	138,969.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-180,174.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,052,142.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII [ ]

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule 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			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ **Attach to Form 990 or Form 990-EZ.**
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047
2015
Open to Public Inspection

Name of the organization: JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Employer identification number: 04-2104347

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,724,390.	2,321,897.	2,846,487.	3,095,983.	2,703,269.	13,692,026.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	2,724,390.	2,321,897.	2,846,487.	3,095,983.	2,703,269.	13,692,026.
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)						23,119.
6 **Public support.** Subtract line 5 from line 4.						13,668,907.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	2,724,390.	2,321,897.	2,846,487.	3,095,983.	2,703,269.	13,692,026.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,120.	5,136.	4,414.	6,865.	6,873.	25,408.
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.)					52,823.	52,823.
11 **Total support.** Add lines 7 through 10						13,770,257.

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 99.26 %

15 Public support percentage from 2014 Schedule A, Part II, line 14 15 99.82 %

16a **33 1/3% support test - 2015.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [X]

b **33 1/3% support test - 2014.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2015.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2014.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2014** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	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.*	1		
2	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).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*	3b		
c	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.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	4a		
b	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.*	4b		
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) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) 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).*	5a		
b	**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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	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.*	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
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.*	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*	9b		
c	Did a disqualified person (as defined in 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.*	9c		
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 10b below.*	10a		
b	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.)*	10b		

Part IV | Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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		

Section 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 the supported organization(s).*	1		

Section 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 in (2), 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 supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions):***

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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 those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) 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 have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	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? Provide details in *Part VI.*	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in *Part VI the role played by the organization in this regard.*	3b		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
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		

Section 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		
e **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 1-1/2% 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 .035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 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 Type III supporting organization (see instructions).

Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 **Total annual distributions.** Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A — Identification of Excess Contributions Included on Part II, Line 5 — 2015

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
KRUPP FAMILY FOUNDATION	298,524.	23,119.

Total Excess Contributions to Schedule A, Part II, Line 5 .... 23,119.

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at *www.irs.gov/form990* .

OMB No. 1545-0047

2015

Name of the organization	Employer identification number
JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.	04-2104347

Organization type (check one):

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

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year .... ▶ $ ________

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
JEWISH COMMUNITY RELATIONS COUNCIL
OF GREATER BOSTON, INC.

Employer identification number
04-2104347

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	COMBINED JEWISH PHILANTHROPIES 126 HIGH STREET BOSTON, MA 02110	$ 2,078,925.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	KRUPP FAMILY FOUNDATION ONE BEACON STREET BOSTON, MA 02108	$ 298,524.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.	04-2104347

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

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

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

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

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

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

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

Name of organization	Employer identification number
JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.	04-2104347

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

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

Name of organization: JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Employer identification number: 04-2104347

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

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

2 Political expenditures ▶ $

3 Volunteer hours

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

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

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

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

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

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

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

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

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

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

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

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)	34,800.	
c Total lobbying expenditures (add lines 1a and 1b)	34,800.	
d Other exempt purpose expenditures	2,543,907.	
e Total exempt purpose expenditures (add lines 1c and 1d)	2,578,707.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	278,935.	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	69,734.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount	276,388.	283,516.	298,761.	278,935.	1,137,600.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,706,400.
c Total lobbying expenditures	419,208.	129,784.	24,000.	34,800.	607,792.
d Grassroots nontaxable amount	69,097.	70,879.	74,690.	69,734.	284,400.
e Grassroots ceiling amount (150% of line 2d, column (e))					426,600.
f Grassroots lobbying expenditures	393,708.	105,784.			499,492.

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

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

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

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

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

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

Part IV **Supplemental Information**

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047
2015
Open to Public Inspection

Name of the organization: JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Employer identification number: 04-2104347

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of a historically important land area
- ☐ Preservation of a certified historic structure

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

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

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ ______

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

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

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

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

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

(i) 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 SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

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

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

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other ____________

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V | Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four 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 current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ ________ %

b Permanent endowment ▶ ________ %

c Temporarily restricted endowment ▶ ________ %

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

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI | Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				0.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	2,762,965.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	2,762,965.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	2,762,965.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	2,758,881.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b	180,174.		
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	180,174.
3	Subtract line 2e from line 1			3	2,578,707.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	2,578,707.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization: JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Employer identification number: 04-2104347

Part I Questions Regarding Compensation

		Yes	No
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 (e.g., maid, chauffeur, chef)			
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2 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 in line 1a?	2	X	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☒ Form 990 of other organizations ☒ Approval by the board or compensation committee			
4 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:			
a Receive a severance payment or change-of-control payment?	4a		X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		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?	5a		X
b Any related organization?	5b		X
If "Yes" to line 5a or 5b, describe in Part III.			
6 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:			
a The organization?	6a		X
b Any related organization?	6b		X
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 non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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 are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
(1) JEREMY BURTON	(i)	188,477.	0.	0.	0.	0.	188,477.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	7,721.	6,367.	14,088.	0.
(2) ELANA MARGOLIS	(i)	134,904.	0.	0.	0.	0.	134,904.	0.
ASSOCIATE DIRECTOR	(ii)	0.	0.	0.	5,758.	16,897.	22,655.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III | Supplemental Information

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 complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

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.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.	04-2104347

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

SOCIAL JUSTICE - THE COUNCIL WORKS TO ENGAGE MEMBERS OF BOSTON'S JEWISH COMMUNITY IN THE WORK OF SOCIAL JUSTICE THROUGH COMMUNITY SERVICE AND COMMUNITY ORGANIZING, IN PARTNERSHIP WITH OTHER FAITH COMMUNITIES AND A RANGE OF COMMUNITY BASED NONPROFITS. THE FOUR SOCIAL JUSTICE PROGRAM AREAS ARE: THE GREATER BOSTON JEWISH COALITION FOR LITERACY, WHICH MOBILIZES HUNDREDS OF VOLUNTEERS TO PROVIDE WEEKLY TUTORING TO ELEMENTARY SCHOOL CHILDREN IN UNDER RESOURCED URBAN ELEMENTARY SCHOOLS; TELEM, A TEEN SERVICE LEARNING PROGRAM WHICH ENGAGES OVER 900 MIDDLE AND HIGH SCHOOL STUDENTS IN ONGOING COMMUNITY SERVICE (CONNECTED WITH SPECIALLY PREPARED CURRICULA); REACHOUT!, WHICH ENGAGES YOUNG ADULTS IN SERVICE, FOSTERS THEIR LEADERSHIP AND BUILDS A COHESIVE COMMUNITY; SYNAGOGUE ORGANIZING, WHICH INVOLVES LEADERS FROM AREA SYNAGOGUES IN ORGANIZING AND ADVOCACY IN THE PUBLIC ARENA. THE COUNCIL COLLABORATES CLOSELY WITH THE GREATER BOSTON INTERFAITH ORGANIZATION IN GRASSROOTS COMMUNITY ORGANIZING.

THE COUNCIL ALSO PROVIDES HOLOCAUST PROGRAMMING AND EDUCATION, IN CONJUNCTION WITH THE NEW ENGLAND HOLOCAUST MEMORIAL.

ISRAEL ENGAGEMENT - JCRC IS COMMITTED TO ENGAGING WITH PEOPLE FROM DIVERSE BACKGROUNDS TO FOSTER CIVIL DIALOGUE AND BUILD SUPPORT FOR ISRAEL, THE NATIONAL HOMELAND OF THE JEWISH PEOPLE. THE COUNCIL PURSUES THESE GOALS BY ENGAGING IN WORK SUCH AS COMMUNITY EDUCATION, CULTIVATING RELATIONSHIPS THROUGHOUT GREATER BOSTON, LEADING STUDY

Name of the organization	Employer identification number
JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.	04-2104347

TOURS TO ISRAEL WITH COMMUNITY LEADERS AND SUPPORTING NATIONAL EFFORTS THROUGH OUR PARTNERSHIPS WITH THE JEWISH COUNCIL FOR PUBLIC AFFAIRS. STUDY TOUR PARTICIPANTS ARE STRATEGICALLY SELECTED INFLUENTIAL LEADERS, INCLUDING CLERGY AND ELECTED OFFICIALS.

GOVERNMENT AFFAIRS - WORKING TOGETHER WITH THE MASSACHUSETTS ASSOCIATION OF JEWISH FEDERATIONS (MAJF), THE COUNCIL BRINGS TOGETHER BROAD COALITIONS OF JEWISH AGENCIES, ORGANIZATIONS AND INDIVIDUALS, TO ADVOCATE FOR COMPASSIONATE PUBLIC POLICIES AND ADEQUATE FUNDING TO ASSIST THOSE MOST IN NEED AND IMPROVE THE QUALITY OF LIFE FOR ALL. THROUGH SUCCESSFUL COLLABORATIONS WITH A VARIETY OF ADVOCACY ORGANIZATIONS IN THE BROADER COMMUNITY, THE COUNCIL MULTIPLIES ITS IMPACT AND THE REACH OF ITS CONTACTS AND FOSTERS AND DEVELOPS RELATIONSHIPS WITH GOVERNMENTAL OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS IN ORDER TO ACHIEVE POLICY SUCCESSES IN THE BUDGETARY, ADMINISTRATIVE AND LEGISLATIVE ARENAS.

FORM 990, PART VI, SECTION B, LINE 11:

THE RETURN IS REVIEWED WITH THE DIRECTOR OF FINANCE & ADMINISTRATION AND THE FINANCE COMMITTEE PRIOR TO APPROVAL AND SUBMISSION

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION ANNUALLY DISCLOSES ANY CONFLICT OF INTEREST AND REQUIRES APPROVAL PRIOR TO ACTIONS

FORM 990, PART VI, SECTION B, LINE 15:

ALL COMPENSATION IS APPROVED BY THE BOARD COMPENSATION COMMITTEE ON AN ANNUAL BASIS WITH REASONABLE AND COMPARABLE COMPENSATION CONSIDERED.

Name of the organization JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Employer identification number 04-2104347

FORM 990, PART VI, SECTION C, LINE 19:

UPON WRITTEN REQUEST AND ON STATE GOVERNMENT WEBSITES.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN ESTIMATE	-180,174.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print

File by the due date for filing your return. See instructions

Name of exempt organization or other filer, see instructions.
JEWISH COMMUNITY RELATIONS COUNCIL
OF GREATER BOSTON, INC.

Employer identification number (EIN) or
04-2104347

Number, street, and room or suite no. If a P.O. box, see instructions.
126 HIGH STREET, NO. 3 FL

Social security number (SSN)

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
BOSTON, MA 02110

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ THE CORPORATION
126 HIGH STREET - BOSTON, MA 02110

Telephone No. ▶ 617-457-8600 Fax No. ▶ 617-457-8600

- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until AUGUST 15, 2017 .

5 For calendar year ______ , or other tax year beginning OCT 1, 2015 , and ending SEP 30, 2016 .

6 If the tax year entered in line 5 is for less than 12 months, check reason: [ ] Initial return [ ] Final return
[ ] Change in accounting period

7 State in detail why you need the extension
THE INFORMATION NEEDED TO FILE A COMPLETE AND ACCURATE TAX RETURN IS NOT YET AVAILABLE.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Title ▶ C.P.A. Date ▶

TAX RETURN FILING INSTRUCTIONS

MASSACHUSETTS FORM PC

FOR THE YEAR ENDING

September 30, 2016

Prepared for	Jewish Community Relations Council of Greater Boston, Inc. 126 High Street No. 3 Fl Boston, MA 02110
Prepared by	Kevin P Martin Associates, P.C. 10 Forbes West Braintree, MA 02184
Amount due or refund	Balance due of $500.00
Make check payable to	Not Applicable
Mail tax return and check (if applicable) to	Non-Profit Org/Public Charities Div Office of the Attorney General One Ashburton Place Boston, MA 02108
Return must be mailed on or before	August 15, 2017
Special Instructions	The report should be signed and dated by the authorized individual(s). Payment for the balance due must be made electronically via the Commonwealth of Massachusetts website at: Www.mass.gov/ago/epay All the necessary attachments should be included with Form PC before filing.

Office Use Only: Fiscal Year

THE COMMONWEALTH OF MASSACHUSETTS
OFFICE OF THE ATTORNEY GENERAL
NON-PROFIT ORGANIZATIONS/PUBLIC CHARITIES DIVISION
ONE ASHBURTON PLACE
BOSTON, MASSACHUSETTS 02108

(617) 727-2200, ext. 2101
www.mass.gov/ago/charities

Form PC

Report for the Fiscal Period: 10/01/15 to 09/30/16

Attorney General's Account #: 004769

Federal ID #: 04-2104347

Electronic Payment Confirmation #: 181004

When did the organization first engage in charitable work in Massachusetts? 01/01/1944

Has the organization applied for or been granted IRS tax exempt status? [X] Yes [ ] No

If yes, date of application OR date of determination letter: 01/01/1944

IRS Exemption under 501(c): 3

If exempt under 501(c), are contributions to the organization tax deductible as charitable contributions? [X] Yes [ ] No

Check all items attached *(if applicable)*

- [X] Filing Fee or Electronic Payment Confirmation #
- [X] Copy of IRS Return
- [X] Audited Financial Statements/Review
- [ ] Amended Articles/ By-Laws
- [X] Schedule A-1
- [X] Schedule A-2
- [ ] Schedule RO
- [ ] Probate Account

Organization Data

Name: JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Mailing Address: 126 HIGH STREET, NO. 3 FL

City: BOSTON State: MA ZIP: 02110

Phone Number: 617-457-8662 Fax Number: 617-988-6255

Email: MSELSMAN@JCRCBOSTON.ORG Website: WWW.JCRCBOSTON.ORG

In the table below, please enter the appropriate codes from the corresponding tables found in the instructions.
Enter up to 2 codes from Table 3 for your organization's main purpose(s)

Category	Code	Category	Code
County (Table 1)	13	Organization Purpose Code 1	61
Type of Organization (Table 2)	18	Organization Purpose Code 2	

Please check box if final return prior to dissolution: [ ]

Office Use Only: **Payment Received**

All questions must be completed in their entirety whether or not similar questions are answered in an attached federal form. See instructions and definition section for guidance.

1. On what date was the organization created? 01/01/1944

2. Where was the organization created? MASSACHUSETTS

3. What is the form of organization? *(check one)*

Corporation	X	Testamentary Trust	☐
Unincorporated Association	☐	Inter Vivos Trust	☐

Other (please describe): ____________________

4. Was your organization related to any other organization(s) during the reporting year (see definition of "Related Organization")? *If yes, please complete the Schedule RO on pages 13 and 14.* ☐ Yes ☒ No

5. Enter your summary of financial data:

	Financial Data	Amounts
A.	Contributions, gifts, grants, and similar amounts received	2,703,269.
B.	Gross support and revenue	2,762,965.
C.	Program services and similar amounts paid out	2,019,968.
D.	Fundraising expenses	338,059.
E.	Management and general expenses	220,680.
F.	Payments to affiliates	0.
G.	Total expenses	2,578,707.
H.	Net assets or fund balances at the end of the year	1,052,142.

6. List the total compensation you provided to your five highest paid employees:

	Name/Title	Hrs/ Week	Salary and Other Income	Benefit Plans	Other Compensation
1.	JEREMY BURTON EXECUTIVE DIRECTOR	40.00	193,031.	14,088.	0.
2.	ELANA MARGOLIS ASSOC DIRECTOR	40.00	143,951.	22,655.	0.
3.	NAHMA NADICH ASSOC DIRECTOR	40.00	140,781.	7,031.	0.
4.	MICHAEL SELSMAN DIR FINANCE & ADMIN	40.00	114,496.	21,476.	0.
5.	AARON AGULNEK PROGRAM DIR	40.00	91,815.	20,569.	0.

7. Was any compensation provided to any of the individuals listed in question 6 above which was not quantified in your response to 6? *If yes, please provide explanation (attach separate sheet).* ☐ Yes ☒ No

8. List the name, amount of compensation paid, and the nature of services rendered by each of the organization's five highest paid consultants providing professional services (e.g. attorneys, architects, accountants, management companies, investment advisors, professional solicitors, professional fundraising counsel).

	Name/Title	Amount of Compensation	Type(s) of Service
1.	KORIN DEVELOPMENT ASSOCIATES	41,400.	DEVELOPMENT CONSULTING
2.	CHARLES GROUP CONSULTING	34,800.	LOBBYIST CONSULTING
3.	KEVIN P. MARTIN & ASSOCIATES	15,000.	ACCOUNTING CONSULTING
4.	ELLEN KAYE	12,602.	PROGRAM CONSULTING
5.	FLOW	12,522.	MARKETING CONSULTING

9. Bank(s) in which the organization's funds are deposited *(include bank addresses and phone number)*:

Bank	Address	Phone Number
CITIZENS BANK	53 STATE STREET, BOSTON, MA 02108	800-862-6200
BELMONT SAVINGS	2 LEONARD STREET, BELMONT, MA 02478	617-484-6700

10. What is the organization's accounting method? ☐ Cash ☒ Accrual

☐ Other *(specify)*: ____________________

11. If organization's mailing address is a P.O. Box, list the organization's full street address:

Address: ____________________

City: ____________________ State: ________ ZIP Code: ________

12. Contact Person Name: MICHAEL SELSMAN

Street Address: 126 HIGH STREET

City: BOSTON State: MA ZIP Code: 02110

Phone Number: 617-457-8600

13. During the fiscal year reported here, did your organization solicit contributions or have funds solicited on its behalf? [X] Yes [ ] No

14. At any time during the fiscal year following the year reported here, will your organization, or others acting on its behalf, solicit contributions? [X] Yes [ ] No

If you answered yes to Question 13 or 14, you must complete Schedule A-1 and/or Schedule A-2 unless you are exempt from the solicitation certificate requirement.

15. If you are claiming an exemption from the solicitation certificate requirement, please indicate by checking the box to the right to identify which exemption applies to your organization.

a religious organization	[ ]
an organization which: (a) does not raise more than $5,000 during a calendar year Or does not receive contributions from more than ten persons during a calendar year; AND (b) carries out all of its activities, including fundraising, through unpaid volunteers. *(The conditions at both (a) and (b) must be met for your organization to qualify for this exemption.)*	[ ]

16. Attach a list of names, addresses (street and/or mailing), and telephone numbers of other offices/chapters/branches/affiliates.

17. Attach a list of names, titles, and addresses (street and/or mailing) of officers, directors, trustees, and the principal salaried executives of organization.
STATEMENT 1

18. Attach a list of names, titles, and addresses (street and/or mailing) of any individual(s) authorized to sign checks, and any individual(s) responsible for: custody of funds; distribution of funds; fundraising; and custody of financial records.
STATEMENT 2

19. Has this organization or any of its officers, directors, employees or fundraisers solicited funds in any other state? [ ] Yes [X] No

If you attach list of states where solicitation was conducted, including registered agency, dates of registration, registration numbers, any other names under which the organization was/is registered, and the dates and type (mail, telephone, door to door, special events, etc.) of the solicitation conducted.

JEWISH COMMUNITY RELATIONS COUNCIL OF GR 04-2104347

FORM PC OFFICERS, DIRECTORS, TRUSTEES AND EXECUTIVES STATEMENT 1

NAME AND ADDRESS	TITLE
JEREMY BURTON 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	EXECUTIVE DIRECTOR
MICHAEL SELSMAN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR OF FINANCE & ADMIN
ADAM SUTTIN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	PRESIDENT
MIRIAM MAY 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	VICE PRESIDENT
STACEY BLOOM 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	VICE PRESIDENT
DEBBIE ISAACSON 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	VICE PRESIDENT
SCOTT GILEFSKY 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	TREASURER
CAMPE GOODMAN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	ASST TREASURER
ALEX KLIBANER 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	SECRETARY
HOWARD BRICK 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	ASST SECRETARY
BETH BADIK 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
DARREN BLACK 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR

RONNE FRIEDMAN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
ALEX GOLDSTEIN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
PHILIP GORDON 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
LESLEY INKER 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
SAMANTHA JOSEPH 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
FREDIE KAY 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
ANN LEVIN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
FRANK LITWIN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
MEL SHUMAN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
SAM SLATER 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
AMIEL WEINSTOCK 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
PAUL BERNON 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
SCOTT BRIGHTMAN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
ABBY FLAM 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR

MARK FRIEDMAN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
CHUCK KOPLIK 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
BEN PEARLMAN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
CARL PERKINS 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
BENJAMIN SAMEULS 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
GEORGI VOGEL ROSEN 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR
ANNE SCHNADER 126 HIGH STREET, NO. 3 FL BOSTON, MA 02110	DIRECTOR

FORM PC PAGE 4, LINE 18 STATEMENT 2

NAME AND ADDRESS	AREA OF RESPONSIBILITY
MICHAEL SELSMAN 126 HIGH STREET BOSTON, MA 02110	RESPONSIBLE FOR CUSTODY OF FUNDS
MICHAEL SELSMAN 126 HIGH STREET BOSTON, MA 02110	RESPONSIBLE FOR DISTRIBUTION OF FUNDS
MICHAEL SELSMAN 126 HIGH STREET BOSTON, MA 02110	RESPONSIBLE FOR FUNDRAISING
MICHAEL SELSMAN 126 HIGH STREET BOSTON, MA 02110	CUSTODY OF FINANCIAL RECORDS
SCOTT GILEFSKY 126 HIGH STREET BOSTON, MA 02110	AUTHORIZED TO SIGN CHECKS

JEREMY BURTON 126 HIGH STREET BOSTON, MA 02110	AUTHORIZED TO SIGN CHECKS
MICHAEL SELSMAN 126 HIGH STREET BOSTON, MA 02110	AUTHORIZED TO SIGN CHECKS

20. Has this organization or any of its officers, directors, or employees:
If yes, please attach an explanation.

(a) Been enjoined or otherwise prohibited by a government agency/court from operating or soliciting contributions? ☐ Yes ☒ No

(b) Ever been refused registration or had its registration or tax exemption denied, suspended, modified or revoked by a governmental agency? ☐ Yes ☒ No

(c) Been the subject of a proceeding regarding any solicitation or registration? ☐ Yes ☒ No

(d) Entered into a voluntary agreement of compliance or consent judgment with any government agency or in a case before a court or administrative agency? ☐ Yes ☒ No

21. Have any restrictions been removed during the year from donor-restricted funds? ☐ Yes ☒ No
If yes, please attach an explanation.

22. Have donor-restricted funds been loaned to unrestricted funds? ☐ Yes ☒ No
If yes, please attach an explanation.

23. This question involves "Termination of Employment or Changes of Control Compensatory Arrangements" with certain "Related Parties" (*see instructions and definition sections*). Report only if payments made or promised to any individual are in excess of four months salary or $100,000, whichever dollar amount is less.

(a) Did you make actual payments or otherwise transfer value under such an arrangement to any individual described in Related Party definition, sections (a) or (b), which payments are not reported in Question 6 or 7 above? ☐ Yes ☒ No

(b) Do you have an agreement with any individual described in Related Party definition, sections (a) or (b), containing such an agreement? ☐ Yes ☒ No

If you answered **yes** *for Question 23(a) or 23(b) above, please attach an explanation identifying the individual(s) involved, stating the amount of any payments made or value transferred, and describing the terms of each agreement.*

24. This question applies to related party transactions, which include transactions with officers, directors, trustees, certain employees, relative, and organizations they own or control. Please consult the instructions and definition sections for the definition of a "Related Party" and "Indebtedness" before answering. Note that transactions involving related parties must be reported even when there is no accounting recognition (e.g. in-kind gifts, waiver of interest not otherwise reported).

*If the answer to any part of Question 24 is **yes**, attach a schedule stating the name and address of the related party, the nature of the transaction, the value or the amounts involved in the transaction, and the procedure followed in authorizing the transaction.*

	During the year:		
A.	Has your organization sold or transferred assets to or purchased assets from or exchanged assets with a related party?	[ ] Yes	[X] No
B.	Has your organization leased assets to or leased assets from a related party?	[ ] Yes	[X] No
C.	Has your organization been indebted to a related party?	[ ] Yes	[X] No
D.	Has your organization allowed a related party to be indebted to it?	[ ] Yes	[X] No
E.	Has your organization made or held an investment in a related party?	[ ] Yes	[X] No
F.	Has your organization furnished goods, services, or facilities to a related party?	[ ] Yes	[X] No
G.	Has your organization acquired goods, services, or facilities from a related party who received compensation or other value in return?	[ ] Yes	[X] No
H.	Has your organization paid or became obligated to pay wages, salary, or other compensation to a related party?	[X] Yes	[ ] No
I.	Has your organization transferred income or assets to or for use by a related party?	[ ] Yes	[X] No
J.	Was your organization a party to any transaction in which any of its officers, directors, or trustees has a material financial interest, or did any officer, director or trustee receive anything of value not reported as compensation?	[ ] Yes	[X] No
K.	Has your organization invested in any corporate stock of a company in which any officer, director, or trustee owns more than 10% of the outstanding shares?	[ ] Yes	[X] No
L.	Is any property of the organization held in the name of or commingled with the property of any other person or organization?	[ ] Yes	[X] No
M.	Did your organization make a grant award or contribution to any other organization in which any of this organization's officers, directors or trustees has a relationship?	[ ] Yes	[X] No

STATEMENT 3

FORM PC | PAGE 6, LINE 24 | STATEMENT 3

NAME AND ADDRESS

JEREMY BURTON
126 HIGH STREET
BOSTON, MA 02110

NATURE OF TRANSACTION	AMOUNT INVOLVED
24H) COMPENSATION PAID TO EXECUTIVE DIRECTOR	207,119.

PROCEDURE FOLLOWED

BOD APPROVAL

NAME AND ADDRESS

MICHAEL SELSMAN
126 HIGH STREET
BOSTON, MA 02110

NATURE OF TRANSACTION	AMOUNT INVOLVED
24H) COMPENSATION PAID TO DIRECTOR OF FINANCE & ADMIN	135,972.

PROCEDURE FOLLOWED

BOD APPROVAL

JEWISH COMMUNITY RELATIONS COUNCIL
OF GREATER BOSTON, INC. 04-2104347

Signature Required

Under penalty of perjury, I declare that the information furnished in this report, including all attachments, is true and correct to the best of my knowledge.

DocuSigned by:
Adam Suttin
AA5C22B85545439...

Signature: ____ Date: 6/29/2017

Printed Name: ADAM SUTTIN

Title: PRESIDENT

Name of Preparer: KEVIN P MARTIN ASSOCIATES, P.C.

Address 10 FORBES WEST

City BRAINTREE State MA ZIP Code 02184

Phone Number (781)380-3520

Schedule A-1
Solicitation Activities During Fiscal Year Covered By This Report

List any names which will be used by the organization in connection with the solicitation of funds, other than the official name which appears on page 1.

JCRC

Types of solicitation activities in which you expect to engage *(check all that apply)*:

Mass Mailing	[ ]	Via the Internet	[X]
Door-to-door	[ ]	Raffle, beano, bingo or gaming event	[ ]
Entertainment event	[X]	Sale of goods other than by telephone	[ ]
Telemarketing without sale of goods or ads	[ ]	Individual Mailings	[X]
Telemarketing with sale of goods	[ ]	Corporate solicitations	[X]
Telemarketing with sale of ads	[ ]	Grant Proposals	[X]

[ ] Other *(specify)*: ______

Identify the method or methods you expect to use for the fundraising *(check all that apply)*:

Professional solicitor*	[ ]	Own employees	[X]
Professional fundraising counsel*	[ ]	Volunteers	[X]
Commercial co-venturer*	[ ]		

* Provide applicable names and addresses:

Professional Solicitor Name: ______

Address ______

City ______ State ______ ZIP Code ______

Professional Fundraising Counsel Name: ______

Address ______

City ______ State ______ ZIP Code ______

Commercial Co-Venturer Name: ______

Address ______

City ______ State ______ ZIP Code ______

Schedule A-1 ctd.

Solicitation Activities During Fiscal Year Covered By This Report

Identify the individuals who will have final responsibility for the charity's custody of contributions:

Name and Title: MICHAEL SELSMAN
DIRECTOR OF FINANCE & ADMINISTRATION

Address 126 HIGH STREET

City BOSTON State MA ZIP Code 02110

Name and Title:

Address

City State ZIP Code

Name and Title:

Address

City State ZIP Code

Identify the individuals who will have final responsibility for the charity's distribution of contributions:

Name and Title: MICHALE SELSMAN
DIRECTOR OF FINANCE & ADMINISTRATION

Address 126 HIGH STREET

City BOSTON State MA ZIP Code 02110

Name and Title:

Address

City State ZIP Code

Name and Title:

Address

City State ZIP Code

Schedule A-2

Solicitation Activities Planned for Fiscal Year Which Follows the Reporting Year

List any names which will be used by the organization in connection with the solicitation of funds, other than the official name which appears on page 1.

JCRC

Types of solicitation activities in which you expect to engage *(check all that apply)*:

Mass Mailing	[ ]	Via the Internet	[X]
Door-to-door	[ ]	Raffle, beano, bingo or gaming event	[ ]
Entertainment event	[X]	Sale of goods other than by telephone	[ ]
Telemarketing without sale of goods or ads	[ ]	Individual Mailings	[X]
Telemarketing with sale of goods	[ ]	Corporate solicitations	[X]
Telemarketing with sale of ads	[ ]	Grant Proposals	[X]

[ ] Other *(specify)*: ______

Identify the method or methods you expect to use for the fundraising *(check all that apply)*:

Professional solicitor*	[ ]	Own employees	[X]
Professional fundraising counsel*	[ ]	Volunteers	[X]
Commercial co-venturer*	[ ]		

* Provide applicable names and addresses:

Professional Solicitor Name: ______

Address ______

City ______ State ______ ZIP Code ______

Professional Fundraising Counsel Name: ______

Address ______

City ______ State ______ ZIP Code ______

Commercial Co-Venturer Name: ______

Address ______

City ______ State ______ ZIP Code ______

Schedule A-2 ctd.
Solicitation Activities Planned for Fiscal Year Which Follows the Reporting Year

Identify the individuals who will have final responsibility for the charity's custody of contributions:

Name and Title: MICHALE SELSMAN
DIRECTOR OF FINANCE & ADMINISTRATION

Address: 126 HIGH STREET

City: BOSTON State: MA ZIP Code: 02110

Name and Title: ______

Address: ______

City: ______ State: ______ ZIP Code: ______

Name and Title: ______

Address: ______

City: ______ State: ______ ZIP Code: ______

Identify the individuals who will have final responsibility for the charity's distribution of contributions:

Name and Title: MICHAEL SELSMAN
DIRECTOR OF FINANCE & ADMINISTRATION

Address: 126 HIGH STREET

City: BOSTON State: MA ZIP Code: 02110

Name and Title: ______

Address: ______

City: ______ State: ______ ZIP Code: ______

Name and Title: ______

Address: ______

City: ______ State: ______ ZIP Code: ______

Certification by Organization

Two different signatures required. Signers must be organization president or other authorized officer or trustee.

Under penalty of perjury, we declare that the information furnished in this report, including all attachments, is true and correct to the best of our knowledge.

DocuSigned by:
Adam Suttin
AA5C22B85545430

Signature: ______________________ Date: 6/29/2017

Printed Name: ADAM SUTTIN

Title: PRESIDENT

Signature: ______________________ Date: ______________

Printed Name: ______________________

Title: ______________________

KPM

Jewish Community Relations Council of Greater Boston, Inc.

Financial Statements

September 30, 2016

Kevin P. Martin & Associates, P.C

JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Index

September 30, 2016

KPM

Business Ideas at Work℠

ASSURANCE | TAX | RISK MANAGEMENT | IT ADVISORY

Independent Auditors' Report

To the Board of Directors of
Jewish Community Relations Council of Greater Boston, Inc.

We have audited the accompanying financial statements of Jewish Community Relations Council of Greater Boston, Inc. (a nonprofit organization) (the Council) which comprise the statement of financial position as of September 30, 2016, and the related statements of activities, cash flows and functional expenses for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Council as of September 30, 2016, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Emphasis of Matter - Prior Period Adjustment

As described in Note 10 to the financial statements, the Council's September 30, 2015 notes receivable balance and net asset balance have been restated as the result of the correction of an error. Our opinion is not modified with respect to this matter.

Report on Summarized Comparative Information

We have previously audited the Council's 2015 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated March 4, 2016. The prior year summarized comparative information is not intended to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. In our opinion, the summarized comparative information presented herein as of and for the year ended September 30, 2015, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Munis P. Martin & Amato P.C.

March 14, 2017

JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Statement of Financial Position

As of September 30, 2016
With Comparative Totals as of September 30, 2015

	2016	2015
Current Assets		
Cash	$ 722,723	$ 849,839
Pledges receivable - current, net of allowance	279,124	124,485
Prepaid expenses	18,104	24,133
Total current assets	1,019,951	998,457
Other Assets		
Pledges receivable, net of current portion	83,524	-
Notes receivable	153,969	153,969
Total other assets	237,493	153,969
Total Assets	1,257,444	1,152,426
Current Liabilities		
Accounts payable	25,135	14,446
Accrued expenses	46,569	77,607
Notes payable - current	6,214	6,158
Total current liabilities	77,918	98,211
Long Term Liabilities		
Notes payable - net of current portion and discount	127,384	6,157
Total long term liabilities	127,384	6,157
Net Assets		
Unrestricted	689,494	923,573
Temporarily restricted	362,648	124,485
Total net assets	1,052,142	1,048,058
Total Liabilities and Net Assets	$ 1,257,444	$ 1,152,426

The accompanying notes are an integral part of the financial statements.

JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Statement of Activities

For the Year Ended September 30, 2016
With Comparative Totals for the Year Ended September 30, 2015

	Unrestricted	Temporarily Restricted	2016 Total	2015 Total
Revenue and Support				
Contributions and donations	$ 828,178	$ 1,409,333	$ 2,237,511	$ 2,859,783
Event fees and sponsorships	135,585	330,173	465,758	236,200
Released from restrictions	1,501,343	(1,501,343)	-	-
Investment income	6,873	-	6,873	6,865
Total revenue and support	2,471,979	238,163	2,710,142	3,102,848
Expenses				
Program services	2,019,968	-	2,019,968	2,395,782
General and administrative	220,680	-	220,680	280,005
Fundraising	338,059	-	338,059	299,434
Total expenses	2,578,707	-	2,578,707	2,975,221
Total Change in Net Assets from Operations	(106,728)	238,163	131,435	127,627
Non-Operating Revenue and Expenses				
Change in estimate (see Note 11)	(180,174)	-	(180,174)	-
Discount on note payable	52,823	-	52,823	-
Total non-operating revenue and expenses	(127,351)	-	(127,351)	-
Total Change in Net Assets	(234,079)	238,163	4,084	127,627
Net Assets at Beginning of Year, as restated	923,573	124,485	1,048,058	920,431
Net Assets at End of Year	$ 689,494	$ 362,648	$ 1,052,142	$ 1,048,058

The accompanying notes are an integral part of the financial statements.

JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Statement of Cash Flows

For the Year Ended September 30, 2016
With Comparative Totals for the Year Ended September 30, 2015

	2016	2015
Cash Flows from Operating Activities		
Change in net assets	$ 4,084	$ 127,627
Adjustments to reconcile change in net assets to net cash (used in) provided by operating activities:		
Change in estimate (see Note 11)	180,174	-
Discount on notes payable	(52,823)	-
Decrease (increase) in assets:		
Pledges receivable	(238,163)	(80,935)
Prepaid expenses	6,029	15,256
Increase (decrease) in liabilities:		
Accounts payable	10,689	13,856
Accrued expenses	(31,038)	38,315
Net Cash (Used in) Provided by Operating Activities	(121,048)	114,119
Cash Flows from Financing Activities		
Repayment of notes payable	(6,068)	(6,158)
Net Cash Used in Financing Activities	(6,068)	(6,158)
Net (Decrease) Increase in Cash and Cash Equivalents	(127,116)	107,961
Cash and Cash Equivalents - Beginning	849,839	741,878
Cash and Cash Equivalents - Ending	$ 722,723	$ 849,839
Supplemental Disclosure of Non-Cash Investing and Financing Activities		
Notes payable for accrued pension liability	$ 180,174	$ -

The accompanying notes are an integral part of the financial statements.

JEWISH COMMUNITY RELATIONS COUNCIL OF GREATER BOSTON, INC.

Statement of Functional Expenses

For the Year Ended September 30, 2016
With Comparative Totals for the Year Ended September 30, 2015

	Program Services	General and Administrative	Fundraising	2016 Total	2015 Total
Salaries	$ 1,264,873	$ 72,729	$ 188,105	$ 1,525,707	$ 1,529,255
Payroll taxes	86,800	4,991	12,908	104,699	108,539
Fringe benefits	173,423	9,972	25,790	209,185	190,315
Subtotal	1,525,096	87,692	226,803	1,839,591	1,828,109
Bank charges	-	4,318	-	4,318	7,038
Consultants	52,267	34,514	26,324	113,105	238,110
Dues and subscriptions	4,950	2,301	1,448	8,699	9,615
Equipment	11,380	3,544	1,944	16,868	9,911
Equipment rental and maintenance	35,169	1,872	4,842	41,883	43,036
Food	20,819	4,954	346	26,119	37,397
Insurance	1,685	10,003	251	11,939	14,960
Meeting expenses	3,987	1,924	57,396	63,307	93,862
Membership fees	9,660	905	3	10,568	9,740
Miscellaneous expenses	2,112	-	-	2,112	1,739
Mission travel	152,656	-	-	152,656	147,302
Occupancy	110,426	6,349	16,422	133,197	134,390
Payroll service charges	-	6,530	-	6,530	6,783
Postage	203	1,348	-	1,551	3,713
Printing	7,950	2,088	821	10,859	13,912
Professional fees	-	9,497	-	9,497	8,335
Program meeting space	2,983	-	-	2,983	6,436
Program speakers	-	-	-	-	250
Special project supplies, equipment and travel costs - DNEP	-	-	-	-	233,637
Sponsorships	5,780	-	-	5,780	350
Staff training	3,302	10,404	75	13,781	9,860
Supplies	1,627	4,928	-	6,555	8,160
Telephone	2,347	8,881	544	11,772	14,134
Travel	65,569	18,628	840	85,037	94,442
Total Functional Expenses	$ 2,019,968	$ 220,680	$ 338,059	$ 2,578,707	$ 2,975,221

The accompanying notes are an integral part of these financial statements.

(1) Summary of Significant Accounting Policies

The financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP). The significant accounting policies followed by Jewish Community Relations Council of Greater Boston, Inc. (the Council) are described below to enhance the usefulness of the financial statements to the reader.

(a) Nature of Activities

The Council was founded in 1944 and was incorporated in 1973 in the Commonwealth of Massachusetts as a not-for-profit corporation. Rooted in Jewish values and informed by Jewish history, the Council serves as the representative voice of the organized Jewish Community in the greater Boston area. The Council's mission also reflects the ideals of American democracy while serving as a catalyst for building a strong and vibrant Jewish community in Boston and around the world. The Council advocates for a safe and secure, democratic Jewish state of Israel and promotes an American society which is democratic, pluralistic and just.

In pursuit of its goals, the Council pursues an action agenda by forging collaborative partnerships within the Jewish community; and between the Jewish community and the broader society. To this end, the Council educates, assists and enables the Jewish community to pursue social justice. The Council advocates on issues of Jewish communal concern. The Council builds coalitions for effective action and opportunities for community involvement and convenes the community in times of crisis, celebration and commemoration.

These purposes are accomplished through the following program activities:

<u>Social Justice</u> - The Council works to engage members of Boston's Jewish community in the work of social justice through community service and community organizing, in partnership with other faith communities and a range of community based nonprofits. The four social justice program areas are: The Greater Boston Jewish Coalition for Literacy, which mobilizes hundreds of volunteers to provide weekly tutoring to elementary school children in under resourced urban elementary schools; TELEM, a teen service learning program which engages over 900 middle and high school students in ongoing community service (connected with specially prepared curricula); ReachOut!, which engages young adults in service, fosters their leadership and builds a cohesive community; and synagogue organizing, which involves leaders from area synagogues in organizing and advocacy in the public arena. The Council collaborates closely with the Greater Boston Interfaith Organization in grassroots community organizing.

The Council also provides Holocaust programming and education, in conjunction with the New England Holocaust Memorial.

(1) Summary of Significant Accounting Policies - continued

(a) Nature of Activities - continued

Israel Engagement - The Council is committed to engaging with people from diverse backgrounds to foster civil dialogue and build support for Israel, the national homeland of the Jewish people. The Council pursues these goals by engaging in work such as community education, cultivating relationships throughout greater Boston, leading Study Tours to Israel with community leaders and supporting national efforts through our partnerships with the Jewish Council for Public Affairs. Study Tour participants are strategically selected influential leaders, including clergy and elected officials.

Government Affairs - Working together with the Massachusetts Association of Jewish Federations (MAJF), the Council brings together broad coalitions of Jewish agencies, organizations and individuals, to advocate for compassionate public policies and adequate funding to assist those most in need and improve the quality of life for all. Through successful collaborations with a variety of advocacy organizations in the broader community, the Council multiplies its impact and the reach of its contacts and fosters and develops relationships with governmental officials at the federal, state and local levels in order to achieve policy successes in the budgetary, administrative and legislative arenas.

The Dnepropetrovsk Kehillah Project, formerly housed at the Council, is now a program of Combined Jewish Philanthropies (CJP).

(b) Basis of Presentation

The statement of activities reports all changes in net assets, including changes in unrestricted net assets from operating activities. Operating revenues consist of those monies received and other contributions attributable to the Council's ongoing efforts.

(c) Standards of Accounting and Reporting

The Council's net assets (excess of its assets over liabilities) and its revenues, expenses, gains and losses are classified based on the existence or absence of donor-imposed restrictions.

The statement of financial position presents two classes of net assets (unrestricted and temporarily restricted) and the statement of activities displays the change in each class of net assets. The classes of net assets applicable to the Council are presented as follows:

Unrestricted - Unrestricted net assets are not subject to donor imposed restrictions. Unrestricted net assets consist of assets and contributions available for the support of operations. Unrestricted net assets may be designated for specific purposes by management or the Board of Directors. Gains and losses on investments are reported as increases or decreases in unrestricted net assets unless their use is restricted by explicit donor stipulations or law.

(1) Summary of Significant Accounting Policies - continued

(c) Standards of Accounting and Reporting - continued

Temporarily Restricted - Temporarily restricted net assets are subject to donor-imposed stipulations that may or will be met, either by actions of the Council and/or passage of time. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

(d) Cash and Cash Equivalents

The Council considers all highly liquid investments purchased with an original maturity of three months or less to be cash equivalents.

The Council maintains its cash balances at several financial institutions located in Massachusetts. The cash balances are secured by the Federal Deposit Insurance Corporation (FDIC). At times these balances may exceed the federal insurance limits; however, the Council has not experienced any losses with respect to its bank balances in excess of government provided insurance. Management believes that no significant concentration of credit risk exists with respect to these cash balances as of September 30, 2016.

(e) Revenue Recognition

The Council earns revenue as follows:

Contributions - Contributions, which include both donations and grants, are recorded upon receipt or pledge as unrestricted or temporarily restricted support depending on the existence and/or nature of any donor restrictions. All contributions are considered to be available for unrestricted use unless specifically restricted by the donor.

Special Events - Special event revenue is primarily derived from contributions collected and fees charged for admission at various sponsored events. Special events revenue is recognized when earned. Special events are incidental to the Council's operations and the related direct expenses have been reported with fundraising expense in the accompanying statement of activities.

During the year ended September 30, 2016, the Council derived approximately 77% of its total operating revenue from CJP, an unrelated nonprofit organization, of which 17% of that percentage is from targeted gifts and 60% from grants, and the remaining 23% of total operating revenue is from foundations and individuals. All revenue is recorded at estimated net realizable value.

(1) Summary of Significant Accounting Policies - continued

(f) Promises to Give

Conditional promises to give are not recognized in the financial statements until the conditions are substantially met. Unconditional promises to give that are expected to be collected within one year are recorded at net realizable value. Unconditional promises to give that are expected to be collected in more than one year are recorded at fair value, which is measured as the present value of their future cash flows. The discounts on those amounts are computed using risk-adjusted interest rates applicable to the years in which the promises are received. Amortization of the discounts is included in contribution revenue. In the absence of donor stipulations to the contrary, promises with payments due in future periods are restricted to use after the due date.

Unconditional promises to give are periodically reviewed to estimate an allowance for doubtful accounts. Management estimates the allowance by review of historical experience and a specific review of collections trends that differ from scheduled collections on individual promises. As of September 30, 2016, the allowance for doubtful accounts was $10,000.

(g) Fundraising

Fundraising relates to the activities of raising general and specific contributions for the Council.

(h) Functional Allocation of Expenses

The costs of providing various programs and other activities have been summarized on a functional basis in the statement of activities and in the statement of functional expenses. Directly identifiable expenses are charged to programs and supporting services. Expenses related to more than one function are allocated to programs and supporting services. Administration expenses include those expenses that are not directly identifiable with any other specific function but provide for the overall support and direction of the Council.

Payroll and associated costs are allocated to functions based upon actual time charges. Occupancy costs are allocated based upon the allocation of salary.

(i) Use of Estimates

In preparing the Council's financial statements in conformity with U.S. GAAP, management is required to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

During the year ended September 30, 2016, a significant change in estimate occurred concerning the funding of a former employee's defined benefit pension plan; see Note 11.

(1) Summary of Significant Accounting Policies - continued

(j) Income Taxes

The Council qualifies as an organization formed for charitable purposes under Section 501(c)(3) of the Internal Revenue Code (IRC) and is generally not subject to income tax. However, income from certain activities not directly related to the Council's tax-exempt purpose is subject to taxation as unrelated business income. In addition, the Council is not a private foundation under Section 509(a)(1).

(k) Summarized Financial Information for 2015

The financial statements include certain prior year summarized comparative information in total but not by net asset class. Also, the financial statements do not include a full presentation of the statement of functional expenses for the year ended September 30, 2015. In addition, the financial statements do not include full financial statement disclosures for the prior year. Such information does not include sufficient detail to constitute a presentation in conformity with U.S. GAAP. Accordingly, such information should be read in conjunction with the Council's financial statements for the year ended September 30, 2015, from which the summarized information was derived.

(l) Reclassifications

Certain amounts in the prior year comparative statements have been reclassified to conform to the current year presentation.

(m) Compensated Absences

Vacation and sick pay are considered expenditures in the year paid.

(2) Pledges Receivable

The Council has unconditional promises to give that are expected to be collected within one to five years, with corresponding expenses to be incurred in future years as well. As of September 30, 2016, table below reflects how these unconditional promises to give are being recorded as pledges receivable at net realizable value (see Note 1f and Note 6).

	Gross Promise	Allowance	Net Promise	Unamortized Discount	Total
Receivable less than 1 year	$ 289,124	$ 10,000	$ 279,124	$ -	$ 279,124
Receivable in 1 to 5 years	85,000	-	85,000	1,476	83,524
	$ 374,124	$ 10,000	$ 364,124	$ 1,476	$ 362,648

(3) Notes Receivable

In May 2006, various individuals and organizations donated funds to the Council for the purpose of loaning said funds to Boston Community Capital to assist with the development of affordable housing in the Boston area.

The Council participated directly in this initiative by entering into a note receivable with Boston Community Capital totaling $138,969 at 2% interest dated December 12, 2004 (see Note 10). The note requires interest only payments each June with the principal balance due on June 30, 2019. As of September 30, 2016, the note receivable amounted to $138,969.

The Council participated directly in this initiative by entering into another note receivable with Boston Community Capital totaling $15,000 at 2% interest dated December 12, 2004. The note requires interest only payments each June with the balance due when called upon. As of September 30, 2016, the note receivable amounted to $15,000.

(4) Notes Payable

An interest free loan in the original amount of $67,736 was extended by CJP effective January 1, 2006 to assist the Council in meeting the funding obligations associated with employees who were participants in the "Retirement Plan for Certain Former participants in the Pension Plan of Combined Jewish Philanthropies of Greater Boston, Inc. and Affiliated Agencies and the Excess Benefit Retirement Plan for Certain Former Participants in the Pension Plan of Combined Jewish Philanthropies and Affiliated Agencies". On or about December 31 of each year, commencing with December 31, 2006, and ending on December 31, 2016, the Council will provide CJP a payment of $6,158, adjusted for investment results, to be applied to the outstanding principal of the loan. If the repayment is found to be in default by more than 30 days, the outstanding balance shall begin to accrue interest at 10% per annum including costs. During the year ended September 30, 2016, the remaining balance was repaid directly with funds from the new CJP note (see below).

An interest free loan in the original amount of $186,421 was extended by CJP effective June 30, 2016 to assist the Council in funding the pension liability of a former employee (see Note 11) as well as to repay the remaining balance on the original CJP note (see above). On or about December 31 of each year, commencing with December 31, 2016, and ending on December 31, 2045, the Council will provide CJP a payment of $6,214 to be applied to the outstanding principal of the loan. As of September 30, 2016, the outstanding balance on the note payable amounted to $186,421.

In accordance with U.S. GAAP, a discount is required to be calculated on the non-interest bearing note payable for imputed interest. This discount was calculated in accordance with a risk free rate of return, determined by management to be the U.S. Treasury's 30-year Daily Yield Curve rate as of the date of the note issuance, June 30, 2016, which was 2.30%. As of September 30, 2016, this discount was determined to be $52,823 which is netted against the corresponding note payable in the accompanying statement of financial position. This discount has been recognized as non-operating revenue on the accompanying statement of activities for the year ended September 30, 2016 and will decline annually as principal payments are made and a corresponding interest expense is recorded in relation to the discount.

(4) Notes Payable - continued

Future minimum payments are as follows:

Year ended September 30, 2017	$	6,214
Year ended September 30, 2018		6,214
Year ended September 30, 2019		6,214
Year ended September 30, 2020		6,214
Year ended September 30, 2021		6,214
Thereafter		155,351

(5) Operating Lease Commitments

The Council is a tenant-at-will for office space in Boston, MA owned by CJP. The Council pays monthly rent in the amount of $11,169 which includes occupancy, common area maintenance and utility costs. Total rent expenses for the year ended September 30, 2016 totaled $133,197.

(6) Temporarily Restricted Net Assets

Temporarily restricted net assets consist of resources available to meet future obligations, but only in compliance with the restrictions specified by donors. As of September 30, 2016, temporarily restricted net assets amounted to $362,648 and consists of amounts restricted by time.

(7) Specific Program Expenses - Unaudited

The Council has allocated direct and administrative expenses to the following projects for 2016:

Designated Program Expenses

Service Programs		
TELEM	$ 330,253	
Greater Boston Jewish Coalition for Literacy	168,841	
ReachOut!	131,651	
Total Service Programs		630,745
Advocacy and Organization		
Synagogue Organizing	123,724	
Government Affairs	332,900	
Disability Advocacy	117,393	
Anti-gun Violence Advocacy	102,313	
Total Advocacy and Organization		676,330
Community Outreach		
Community Outreach	237,384	
NE Holocaust Memorial	88,336	
Total Community Outreach		325,720
Israel Engagement Center	387,173	
Total Israel Engagement Center		387,173
Total allocated expenses		$ 2,019,968

(8) Employee Benefits

(a) Defined Contribution Plan

The Council has a defined contribution pension plan that qualifies as a tax-sheltered account under Section 403(b)(7) of the Internal Revenue Code (IRC) for the benefit of eligible employees. All regular employees are eligible to participate in this plan. Under the plan, benefit eligible employees can invest pre-tax dollars. The employees are not taxed on contributions or earnings until they receive distributions from the account. For the year ended September 30, 2016, the Council's contributions under this plan amounted to $58,044.

(b) Section 125 Plan

The Council has a plan that qualifies as a "Cafeteria Plan" under Section 125 of the IRC. The plan allows the Council's employees to pay for medical and dental insurance and daycare on a pre-tax basis. All employees whose customary employment is at least 20 hours per week are eligible to participate in the plan.

(9) Concentrations

The Council is significantly supported by CJP, an unrelated nonprofit organization with similar missions and goals to that of the Council. CJP accounted for 77% of the Council's operating revenue, of which 17% of that percentage is from targeted gifts and 60% from grants, during the year ended September 30, 2016 (see Note 1e). The Council's notes payable are held by CJP (see Note 4) and the Council also rents their office space from CJP (see Note 5).

(10) Prior Period Adjustment

During the year ended September 30, 2016, it was determined that there was an error that needed to be corrected to properly state prior years' net assets and notes receivable that was recorded as a prior period adjustment.

The prior period adjustment involved the recording of a note receivable from Boston Community Capital in the amount of $138,969. This note was erroneously excluded from the Council's statement of financial position in prior years. When the note reached maturity in 2016, Boston Community Capital reached out to the Council to determine if the note was to be repaid or reinvested in Boston Community Capital's mission. The Council reinvested the proceeds with Boston Community Capital, therefore extending the maturity date of the note (see Note 3) and corrected the reporting error. The September 30, 2015 notes receivable balance, net asset balance and the net asset balance as of September 30, 2014 have been properly restated to show this correction. The restatement has no impact on current year or prior year profit or loss as the restatement increased preceding years' net asset balances. Prior period financial statements have not been reissued.

The September 30, 2015 notes receivable have been restated as follows:

Notes receivable, as of September 30, 2015, as previously reported	$	15,000
Prior period adjustment		138,969
Notes receivable, as of September 30, 2015, as restated	$	153,969

The September 30, 2015 net assets have been restated as follows:

Net assets, as of September 30, 2015, as previously reported	$	909,089
Prior period adjustment		138,969
Net assets, as of September 30, 2015, as restated	$	1,048,058

The September 30, 2014 net assets have been restated as follows:

Net assets, as of September 30, 2014, as previously reported	$	781,462
Prior period adjustment		138,969
Net assets, as of September 30, 2014, as restated	$	920,431

(11) Change in Estimate

The Council was a participant employer in a non-contributing multiemployer defined benefit plan maintained by CJP in which certain Council employees were eligible to participate in. This Plan had been frozen in 2005. During the year ended September 30, 2016, a former employee officially retired and, at that time, the Plan was determined to be underfunded by $180,174 due to changes in original estimates in the calculation of the accrued benefit liability. The Council met this additional liability in full during the year ended September 30, 2016 by entering into a note payable with CJP who directly provided the funds for the additional liability (see Note 4). As this additional liability represents a change in estimate, the expense has been included in the statement of activities for the year ended September 30, 2016 as a non-operating expense.

(12) Subsequent Events

The Council has performed an evaluation of subsequent events through March 14, 2017, which is the date the Council's financial statements were available to be issued. No material subsequent events have occurred since September 30, 2016 that required recognition or disclosure in these financial statements.