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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

					5 /01				20	7,000	2010			
	For t	he 2009 calend	lar year,	or tax year begi	nning 7/01	, 20	009, and endir	1 g 6/	30		2010			
В	Check	ıf applicable	Please use	C					1 ' '		cation Number			
	∐ Ad	ddress change	IRS label	DEMISH COL	MMUNITY COU	NCIL OF ERI	ΙE		25-0	<u> </u>	08			
	∏ N	ame change	or print or type.	BOX_3120					E Telephone number					
	See specific ERIE, PA 16508								814	-45 <u>5-</u>	4474			
	Пте	ermination	instruc- tions.											
	$\square_{\mathbb{A}}$	mended return							G Gross re	eceipts \$	425,	848.		
	\vdash	pplication pending	F Name a	and address of princip	al officer			H(a) Is this	a group retur		ates? Yes	X No		
	ш.,		SAME A	AS C ABOVE					II affiliates incl		Yes	No		
ī	Tax	k-exempt statu			(insert no)	4947(a)(1) or	r 527	If 'No,	' attach a fist	(see instr	ructions)			
÷		bsite: ► N/		(c) (3)	(macre no)	13 17 (4)(1) 01		H(c) Group	exemption nu	mher ►				
<u>K</u>		n of organization	Corpora	ation Trust	Association C	Other P	L Year of Forma				gal domicile			
р _а	rt I			ador Trust	Association	other	Le Tear Of Toffile	111011	1147 C	itate of ic	gar dormene			
<u></u>	1			nanization's mis	sion or most sign	ificant activities:	THOUGHIS	WORLD	TEWISH	SOCI	TAT WELFA	RE		
_	•	PROGRAMS						MOIND	05015	700	rva Trans	<u>m</u>		
ဦ		TIVOGIVERS	•					-						
Activities & Governance											-			
ove.	2	Check this bo	x •	ıf the organizatı	on discontinued i	ts operations or o	disposed of m	ore than 2	25% of its	assets				
Ŏ	3				erning body (Part					3		27		
ري وي	4					ng body (Part VI,	line 1b)			4		27		
/tie	5			yees (Part V, III						5		0		
Ę	6			teers (estimate i	• .					6		40		
	•	_				column (C), line	12			7a		0.		
2010	b	Net unrelated	business	s taxable income	from Form 990-	T, line 34				7 b		0.		
20									Prior Year		Current Yo			
N Revenue	8			nts (Part VIII, Im					51,2	64.	51	,205.		
€g	9 Program service revenue (Part VIII, line 2g)									-		<u> </u>		
ڇ	10				(A), lines 3, 4, ar				-51,7	61.		-580.		
<u> </u>	11				ines 5, 6d, 8c, 9d					~-		-605		
	12					rt VIII, column (A), line 12)	_	-4	97.	50	,625.		
ī	13				IX, column (A),	•								
Z	14				IX, column (A), li									
€ %	15					IX, column (A), li	ines 5-10)							
SCANNED Expenses	l			•	column (A), line	•		1200 120 120 120		Z. 3753	200 POR . C . C . C . S .	20 0 2 2 3		
רַאַ מ	b	Total Intrais		nses (Part IX, c	olumn (D), line 2	5) 🏲	2,481.		(ok lež	;;;				
ш	17	Other expens	es (Part	ΙΧ, cq Ι ωλι η (Α),	lines 11a-11d, 11	f-24f)			70,7	94.	64	,539.		
	18	То (al expense	es Add I	nes 132 (mus	t equal Part IX, c	olumn (A), line 25	5)		70,7	94.	64	,539.		
	19			slubijact line		• • •	•		-71,2		-13	,914.		
88								Regi	inning of Y		End of Ye			
Net Assets or Fund Balancos	20	Total assets	Partx, I						1,314,4		1,433			
A B	21	Total habilitie							43,2			,155.		
52	22		•	•	line 21 from line	20			1,271,2		1,423			
Pa	it (II)				mie Zi nom mie	20			1,211,2	41.	1,425	, 300.		
				*							1-1			
		true, correct, a	nd complete	Declaration of prepare	examined this return, in	ncluding accompanying) is based on all informa	ation of which prep	parer has an	y knowledge	or my kno	wjedge and beller,	it is		
Sig	าก	►./ K	10.41	d ケスパ	Mes			1.	/ //	18/1	2010			
He	re	Signature	of officer	1///					ate	70/2	0,0			
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					0 0		Date		Check if	Pre	parer s identifying e instructions)	number		
Pa	id		1	nunai	c) Rec	ACPA		<i>1</i> 1:	self-	X	e instructions)			
Pro		Preparer's signature		HAEL J. RE			10/14	<i> '' </i> '	employed P	M _{N/}	/ 7 .			
	rer's	. -				I & COMPANY	LLP			111/	Α			
yours if self-								11	7.					
On	ıly	employed), address, and						 		/A	1 022 05/			
NA.		IDC duquuq th	ERI		·····	dan a small of the			Phone no	(814		_		
						(see instructions)					X Yes	No (2000)		
DΑ	~ LO	i riivacy ACC a	mu rape	I WOLK MEGUCTION	n ACI NOTICE, SEE	the separate ins	tructions.		TEEA01131	. 12/29/0	9 Form 99	u (2009)		

orm 990 (20	009) JEWISH COMMUNITY COUNCIL OF ERIE	25-0	984608	Pag
Part III	'Statement of Program Service Accomplishments			
1 Briefly	describe the organization's mission:			
	ORT WORLD JEWISH SOCIAL WELFARE PROGRAMS.			
	·	-		
				
	organization undertake any significant program services during the year which were not listed	on the prior	_ ,,	.
Form 9	90 or 990-EZ?		∐ Ye	s 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?	Ye	s X No
If 'Yes	describe these changes on Schedule O			
		ices by exper	ises. Section	501(c)(3)
and 50	be the exempt purpose achievements for each of the organization's three largest program serv 1(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants	and allocation	ns to others	, the total
expens	es, and revenue, if any, for each program service reported			
4 - 10 - d - 1	16 390) (Daylanus	ė	
) (Expenses \$ 16,380. including grants of \$	_		
PROG	RAMS_TO_PROVIDE_COMMUNITY_EDUCATION.	- -		
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AL (0-1-) (Evenes 6 2 125	\ (D=::=	ė	
4b (Code.	(Expenses \$ 3,125. including grants of \$			
	RAMS TO SUPPORT AND ENRICH LIVES OF SENIOR CITIZENS LIVING	<u>IN THE E</u>	RIE	
PENN	SYLVANIA COMMUNITY.			
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4c (Code) (Expenses \$ 1,500. including grants of \$ ING FOR ERIE COMMUNITY RELIGIOUS SCHOOL.	_) (Revenue	\$	
FUND	ING FOR ERIE COMMUNITY RELIGIOUS SCHOOL.			
			· 	-
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4 2 0	Ann 201100111			
	program services. (Describe in Schedule O) SEE SCHEDULE O			
(Expe		e \$		
4e Total ı	program service expenses ► 21,005.			

BAA-

Part IV Checklist of Required Schedules

"a:	t 14/9/2/ Office Rist of Required Schedules		T.,	••
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	_1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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 L	6_		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7	_	х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, 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 term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V			Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	V , 2,	73	, (°
•	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			1385
•	• 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			, a
	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			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		E. C	1 6
	• 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? If 'Yes,' complete Schedule D, Part X			7 . 3
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		X
12/	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No		- 300 - 300 - 300	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
ı	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e ⁹ If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х

<i>y</i> ca	The state of the s		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		_ X _
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? 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		Х
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	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		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a	_	X
ı	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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
;	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	<u> </u>	X
١	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
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		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R , Part V , line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38_		Х
344		_		

Farth	Form 990 (2009) JEWISH COMMUNITY COUNCIL OF ERIE	25-0984608	3_	F	age 5
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S information Returns. Enter 10- in an applicable be Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize wirners? 2a Enter the number of entogess reported or form W.3, Transmital of Wags and Tax Statements, filed for the carlent pre-tending with of with the year covered by this return. 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-life this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. b If Yes' has it filed a Form 990-T for this year? If No.1, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other athority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). b If Yes' hare the name of the foreign country P See the instructions for exceptions and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any travelbe party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did sept stable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes, to line 5 aor 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter fransaction? 5c Did the organization have annual gross receipts that are normally greater than \$100,000, and did the	Part V Statements Regarding Other IRS Filings and Tax Compliance				
be Enter the number of Forms W-26 included in line 1a Enter -0 - if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of engalpses reported on firm W-3. Transmittal of Wage and Tax Statements, filed for the callending replace reported on firm W-3. Transmittal of Wage and Tax Statements, filed for the callending replace reported on firm W-3. Transmittal of Wage and Tax Statements, filed for the callending with the types owered by this return 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) bit Yes' has it filed a Form 990-T for this year? If No,* provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial Accounts bit Yes, enter the name of the foreign country seemed, securities account, or other financial accounts) 5b Was the organization at party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization have an interest in, or a signature or other authority over, a financial Accounts 5b Was the organization have and filing requirements for form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5b Was the organization have an annual gross receipts in that are normally greater than \$100,000, and did the organization? 5c If Yes, to the 5a or 5b, did the organization include with every solicitation an express statement that such contributions or grifts were not deductible. 5c If Yes, the file organization include with every solicitation an express statement that such contributions or a personal benefit c				Yes	No
e Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gamilling) within with minimum of the payer reported or firm W.3. Transmital of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2	1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns Enter -0- if not applicable	1a 1		h JJA VSHig	
(gambling) winnings to prize winners? 2 a Either the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2 b It at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1 a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. b if Yes' has it filed a Form 990-T for this year? If No, 'provide an explanation in Schedule O 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5 b If Yes', enter the name of the foreign country b See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 b Was the organization a party to a prohibited tax sheller transaction? 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5 a Vas 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? 7 b If Yes', did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization of the value of the goods or services provided? 7 b If Yes', did the organization notify the donor of the value of the goods or services provided? 8 b If Yes', if did the organization will exceed the prome 2829 of the ground of the progenization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 b If Yes', if did the organization self, exchange, or otherwise dispose of tangible perso	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b 0			
calledar year ending with or within the year covered by this return. 2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-life this return. (see instructions) 3a Oil the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? bit Yes' has it filed a Form 990-T for this year? If No. 'provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Set the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction? 5a Was the organization aparty to a prohibited tax shelter transaction? 5b Was 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? 5c If Yes, to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 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? 7b If Yes, the did the organization notify the donor of the value of the goods or services provided? 8b If Yes, the did the organization notify the donor of the value of the goods or services provided? 8b If Yes, the did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 filed during the year. 9c Did the organization sell, ex	c Did the organization comply with backup withholding rules for reportable payments to vendo (gambling) winnings to prize winners?	rs and reportable gaming	1 c		X
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. b if 'Yes' has it field a Form 990-T for this year? If No,' provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b if Yes, enter the name of the foreign country • See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Account in a foreign country • See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Account in a foreign country • See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accountry 5a Was the organization a party to a prohibited tax shelter transaction? 5b Was the organization a party to a prohibited tax shelter transaction? 5c If Yes, to line 5a or 5b, did the organization file Form 8885-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 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? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b if Yes, did the organization notify the donor of the value of the goods or services provided? 7 Up the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indir	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	2 a 0		řy	
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c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization, file a Form 1098-C as required? h For contributions of qualified intellectual property, did the organization, file a Form 1098-C as required? 7th X 9 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the organization make any taxable distributions under section 4966? 9 a 10 the organization make any taxable distributions under section 4966? 9 a 10 the organization make any distribution to a donor, donor advisor, or related person? 10 b 11 a 10 a 10 b 11 a 10 a 11 a 10 a 11 a 11 a 12 a 11 a 12 a 12 a 12 a 12	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		-		
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e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization make any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from other members or shareholders b Gross income from other members or shareholders b Gross income from other sources (0o not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d		See .	
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter: a Gross income from other members or shareholders b Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiul	ms on a personal	7e		Х
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8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	g For all contributions of qualified intellectual property, did the organization file Form 8899 as	required?			
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9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	Supporting organization, or a donor advised fund maintained by a sponsoring organization, h	ng organizations. Did the nave excess business			ننگ
a Did the organization make any taxable distributions under section 4966? b Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				73 F T	-
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11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
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b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	•	11 a			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
			12a	***********	<u> </u>
		1 1		<u> </u>	k , , 1

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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.

Sec	ction A.	Governing Body and Management						
							Yes	No
1	a Enter the	number of voting members of the governing body .	1a			27		
	b Enter the	number of voting members that are independent	1 b		;	27		
2	Did any o	fficer, director, trustee, or key employee have a family relationship or a business rector, trustee or key employee?	elation	ship with	any other	2		X
3	Did the o	rganization delegate control over management duties customarily performed by or	under	the direct	supervisio	n		
		s, directors or trustees, or key employees to a management company or other pers	on/			3		X
4		rganization make any significant changes to its organizational documents				4		
_		prior Form 990 was filed?				_		v
2		rganization become aware during the year of a material diversion of the organization	on's as	sets /		5	-	X
6	Does the	organization have members or stockholders?				6		<u>X</u> _
	governing	•			of the	7a		Х
	b Are any o	lecisions of the governing body subject to approval by members, stockholders, or o	ther p	ersons?		7b	1 100 0 10	X
8	Did the o	rganization contemporaneously document the meetings held or written actions undi ring:	ertake	n during f	he year by			
	a The gove	rning body?				8a	Х	***********
	b Each cor	nmittee with authority to act on behalf of the governing body?				8 b	Х	
9	Is there a	iny officer, director or trustee, or key employee listed in Part VII, Section A, who calon's mailing address? If 'Yes,' provide the names and addresses in Schedule O	annot b	oe reache	d at the	9		х
		Policies (This Section B requests information about policies not						
	enue Code	Commence of the commence of th	, 044,	, ou by .	110 111011			
		/					Yes	No
10	a Does the	organization have local chapters, branches, or affiliates?				10a	 	
		oes the organization have written policies and procedures governing the activities	of such	h chanter	c affiliatac			
	and bran	ches to ensure their operations are consistent with those of the organization?	or suci	Chapter	s, annates	′ [10 ь	X	
11	Has the	organization provided a copy of this Form 990 to all members of its governing body	before	e filing the	e form?	11		X
11	A Describe	in Schedule O the process, if any, used by the organization to review this Form 99	0. S	EE SCH	EDULE C) [[]	ļ , , ņ	S. Land
12	a Does the	organization have a written conflict of interest policy? If 'No,' go to line 13				12a		X
	b Are office	ers, directors or trustees, and key employees required to disclose annually interests	that o	could give	rise			
	to conflic					12b	 	├
	c Does the Schedule	organization regularly and consistently monitor and enforce compliance with the property of th	olicy?	If 'Yes,' c	lescribe in	120		
		organization have a written whistleblower policy?				13		X
		organization have a written document retention and destruction policy?				14	 	X
						282)s (*.	3 C
		rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	appro	oval by in	sepenaent		ĽŠ.	
		nization's CEO, Executive Director, or top management official				15a	† 	X
		cers of key employees of the organization				15b	7.7	X
		line 15a or 15b, describe the process in Schedule O (See instructions)						
16	a Did the o entity du	rganization invest in, contribute assets to, or participate in a joint venture or similar ing the year?	r arran	ngement v	vith a taxat	16 a	ć	X
	ın joint ve status wi	as the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard herespect to such arrangements?	n to ev	valuate its organizati	participati on's exemp	on t 16b		
Se	ction C.	Disclosures						
17	List the s	tates with which a copy of this Form 990 is required to be filed PA						
18	Section 6	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available. Check all that apply	and 99	0-T (501(c)(3)s only)	avaılab	le for	public
		website Another's website X Upon request						
19	Describe statemer	in Schedule O whether (and if so, how) the organization makes its governing docuits available to the public	ments,	, conflict	of interest p	policy, a	nd fina	ancıal
20	State the	name, physical address, and telephone number of the person who possesses the			rds of the c	organiza	tion	
	- LAURE	N_UNGER_4832_THOROUGHBRED_LOOP_ ERIE_PA_16506_814-83	5-17	92		- -		
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Form 990 (2009)

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

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 organizations's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of 'key employees.'
- 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 the organization did not compensate any current officer, director, or trustee. (F) (A) (B) (c) (E) Average hours Position (check all that apply) Reportable compensation from the organization (W-2/1099-MISC) Reportable compensation from Name and Title Estimated amount of other compensation per weel Institutional Individual related organizations (W-2/1099-MISC) from the employee rector compensated organizations trustee ANN MANASSE PRESIDENT 5 X 0 0 0. Х LAUREN UNGER **VP-FINANCE** 5 X 0 0. Х 0

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Part VII Section A. Officers, Directors, Trust	tees, K	еу	Em	plo	ye	es,	and	d Highest Con	npensated Em	ployees (cont.)
(A)	(B)			(((D)	(E)	(F)
Name and Title	Average hours			check	all t	hat a	_		Reportable	Estimated amount of other
	per week	indir or d	inst	Officer	Key	Higt	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	
	•	vidua	tutio	E	emţ	nest oloye	ner	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related
		함	nal	1	employee	com		,		organizations
]	stee	nstitutional trustee		ř	Highest compensa employee				
			ee			ated				
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1 b Total							<u> </u>	0.	0	
2 Total number of individuals (including but not limite	d to tho	se li	stec	ab	ove)	wh	o re	ceived more than	\$100,000 in repo	rtable compensation
from the organization > 0										1
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trust	ee,	key	emp	oloy	ee,	or h	ighest compensat	ed employee	1 3 h Sawi Sami
										3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	han \$15	0,00	npe)0?	lf 'Y	'es'	com	ı ouı ıplet	e Schedule J for:	such	
ındıvıdual							•			4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci	ompens	atio	n fro	om a	any	unre	elate	ed organization fo	r services	
	hedule .	l for	suc	h pe	erso	n		···		5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensal	ما سمام		10-4				مطاهد		ham \$100,000 af	
compensation from the organization	ea mae	pend	Jeni	COI	ıırac	ctors	s tria	at received more t	nan \$100,000 oi	
(A)								(B	`	(C)
Name and business addres	s							Description	of Services	Compensation
								L		
2 Total number of independent contractors (including		lımı	ted	to th	nose	list	ted a	above) who receiv	red more than	y sign signi.
\$100,000 in compensation from the organization	0									
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Par	t Vi	II Statement of Re	venue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
25	1 a	Federated campaigns.		1 a					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b	Membership dues		1 b					
윤호		Fundraising events		1c					
Y Z		Related organizations		1 d		ACAMINE 350			
₽₹									
S S	е	Government grants (contribution	ons)	1e	·				
문읍	f	All other contributions, gifts, g similar amounts not included a	rants, and						
를		similar amounts not included a	above.	_1f	51,205.				15 8 10 10 10 10 10 10 10 10 10 10 10 10 10
ξŞ	g	Noncash contribns included in	Ins 1a-1f:	\$		70-12-14-7/2014-14-7/2014K			
8절	h	Total. Add lines 1a-1f			•	51,205.			
3				i	Business Code				47 1147 436. T. 1 . 1969 Estate
Ę	2a								
Ű	b								
핑	_								
줉	ں ۔					 			
S	a								
Z.	е								
PROGRAM SERVICE REVENUE		All other program service	e revenu	ie _	· · · · · · · · · · · · · · · · · · ·		1 (2) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	2 235 2 2	
<u></u>	9	Total. Add lines 2a-2f			<u> </u>		200 St. 4 - 748	438 : - XXX	
	3	Investment income (inc	luding div	ıdends,	interest and				
		other similar amounts)			•	29,321.	29,321.		
	4	Income from investmen	t of tax-e	xempt b	bond proceeds 🟲				
	5	Royalties			•				
		[(ı) R	eal	(II) Personal				
	6a	Gross Rents							
	ь	Less rental expenses	*****						
		Rental income or (loss)							
		Net rental income or (lo		•••	<u> </u>	de a de la la la la la la la la la la la la la	in the second second second second second second second second second second second second second second second		
	u	inet rental income of (id			(1) (1)	100 100 100 100 100 100 100 100 100 100			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	7 a	Gross amount from sales of	(i) Seci		(ii) Other	Habe Elbadi	lankova (787)		
		assets other than inventory	345	<u>,322.</u>					
	b	Less cost or other basis							
		and sales expenses	<u> </u>	<u>,223.</u>				Kalen I I	
	C	Gain or (loss)	-29	,901.					83 4 AMALAH
	d	Net gain or (loss)			>	-29,901.	-29,901.		
щ	8 a	Gross income from fund (not including \$	draising e	vents					
Ę			d on line	10)					
ا پھ		of contributions reported	a on line	10)					40 . 4 . 3 .
2	_	See Part IV, line 18		а			75 x 25 2 3 4 5 6 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5 6		
OTHER REVEN		Less direct expenses		b					
Ĭ	С	Net income or (loss) fro	m fundra	alsing ev	vents -	•			
	9 a	Gross income from gan See Part IV, line 19	ning activ	rities				EXWISCAN	Marka
		See Part IV, line 19	J	а					
	b	Less. direct expenses		b	L	24.767.787	242230000000000000000000000000000000000	1357 Libberto	
	c	Net income or (loss) fro	m gamın	g activit	ties				
						60.891.894.08945.7	77,016,044,380,000	\$:950C000X	00 MARAN
		and allowances	sales of inventory, less returns owances a				100 A		
		Less: cost of goods sold b						مرر کیڈ ریکا	
		Net income or (loss) fro		of inver	ntory		grane was the second as a seco	2000	a managar 6'-a managahitsansah
		Miscellaneous Reven			Business Code	`	3. 43.	· · · · ·	
	11 a						<u> </u>		<u> </u>
	ь								
						-			
	C		 -						
		All other revenue		L		 			ļ
		Total. Add lines 11a-11	_		•		` ` `	. ,	
	12	Total revenue. See inst	ructions		<u> </u>	50,625.	-580.	0.	0.

Form 990 (2009)

Part IX Statement of Functional Expenses

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Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (D) Fundraising (C) (B) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and Total expenses expenses expenses general expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 0. 0 0 0 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) 0. 0 0 0 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees) a Management 18,886 18,886. **b** Legal 3,300 3,300 c Accounting **d** Lobbying Maria de Cardaden Hurting yets e Prof fundraising svcs See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 14 Information technology Royalties 15 16 Occupancy 2,775 2,775 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 10,294 10,294 a INVESTMENT EXPENSES 6,200 b HOLOCAUST MUSEUM TRIPS 6,200 5,400 5,400 c ISRAEL TRAVEL PROGRAM 5,229 d OFFICE EXPENSE 5,229 3,351 3,351 e JEWISH COMMUNITY REL. COUNCIL 2,481 f All other expenses 9,104 6,054 569 25 Total functional expenses. Add lines 1 through 24f 64,539 21,005 41,053 2,481 if following Joint costs. Check here ► SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Form 990 (2009)

BAA

Part X Balance Sheet (B) End of year (A) Beginning of year 14,133. 1 30.048 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4,449 4 2,219. Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. 10a Complete Part VI of Schedule D 10 c 10b **b** Less¹ accumulated depreciation. 1,279,999 1,417,363. Investments - publicly-traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 1,314,496 1,433,715. 16 16 Total assets Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 34,000 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L Secured mortgages and notes payable to unrelated third parties. 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities Complete Part X of Schedule D 9,255 25 10,155. 43,255 26 10,155 Total liabilities. Add lines 17 through 25 X and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 609,389 27 661,406. 27 Unrestricted net assets 661,852 762,154. 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 33 1,423,560. Total net assets or fund balances 1,271,241 33 34 Total liabilities and net assets/fund balances. 1,314,496 34 1,433,715.

TEEA0111L 01/30/10

		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		der († 1964) de 1965 destamo de 1965	Sandania de
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	_
b Were the organization's financial statements audited by an independent accountant?	2b		X
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			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
X Separate basis Consolidated basis Both consolidated and separate basis	تقلفا	12.30 m	1
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		х
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	ıt 3 b		

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Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

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

OMB No 1545-0047 2009

Open to Public

Employer identification number Name of the organization 25-0984608 JEWISH COMMUNITY COUNCIL OF ERIE See instructions Part Reason for Public Charity Status (All organizations must complete this part.) The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 X 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.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I Type II cl Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? a Yes No (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations (III) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (i) Name of Supported Organization (v) Did you notify (ii) ElN (iv) Is the (vi) Is the (vii) Amount of Support organization col (i) of ization in co organization in col (i) listed in your (i) organized in the your support? governing document? Yes No Yes No Yes No

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

TEEA0401L-02/05/10-

Schedule A (Form 990 or 990-EZ) 2009

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25-0984608 JEWISH COMMUNITY COUNCIL OF ERIE Page 2 Schedule A (Form 990 or 990-EZ) 2009 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 1) Section A. Public Support Calendar year (or fiscal year (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total beginning in) 🟲 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants ') 98,219 64,272 51,264 51,205 332,510. 67,550 Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to 0. the public without charge 332,510. Total. Add lines 1-through 3 67,550 98,219 64,272 51,264 51,205 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 0. Public support. Subtract line 5 WK. V. 332,510. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) 7 Amounts from line 4 98,219 64,272 332,510. 67,550 51,264 51,205 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. 92,970 211,956 68,206 46,311 29,321 448,764. Net income from unrelated business activities, whether or not the business is regularly 0. carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 0. Total support. Add lines 7 through 10 781,274. 12 Gross receipts from related activities, etc. (see instructions) 0. 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 2009 (line 6, column (f) divided by line 11, column (f) 42.6% 14 15 44.1% 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2008. 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 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here**. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization
 - b 10%-facts-and-circumstances test 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization
- 18 Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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Schedule A (Form 990 or 990-EZ) 2009

25-0984608 Page 3 JEWISH COMMUNITY COUNCIL OF ERIE Schedule A (Form 990 or 990-EZ) 2009 Partill Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part 1) Section A. Public Support (f) Total Calendar year (or fiscal yr beginning in)▶ (a) 2005 (c) 2007 (d) 2008 (e) 2009 **(b)** 2006 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 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, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the vear c Add lines 7a and 7b 8 Public support (Subtract line .D;*** 75. 040 Ŷ? . 7c from line 6) Section B. Total Support Calendar year (or fiscal yr beginning in) ► (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 **(e)** 2009 (f) Total 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form similar sources

b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add ins 9, 10c, 11, and 12)

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 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)).

19a 33-1/3 support tests – 2009. 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
many and the many and and elep tierer the organization qualified as a publicly supported organization

Investment income percentage from 2008 Schedule A, Part III, line 17

b	33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 1	18	_
	is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	•	L
į	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	•	Γ

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Schedule A (Form 990 or 990-EZ) 2009

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18

%

Schedule A	(Form 990 or	990-EZ) 200	9 JEWISH	COMMUNIT	Y COUNCIL	OF E	RIE	25-0984608	Page 4
Part IV	Supplemen	ital Inform	ation. Comp	lete this pa	rt to provide	the e	explanations	required by Part II, lin formation. See instru	ie 10;
	Part II, line	1/a or 1/	b; and Part	iii, iine 12.	Provide any	other	additional ii	iormation. See instru	Ctions.
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No 1545-0047

2009

Open to Rublic

Open to Public Inspection

JEW	ISH COMMUNITY COUNCIL OF ERIE		25-0984608
Dä	U Overninations Maintaining Dans	r Advised Funds or Other Similar Funds	
r,ar	the organization answered 'Yes' t	o Form 990 Part IV June 6	or Accounts Complete II
	the organization answered Tes t		425
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dofunds are the organization's property, subject	nor advisors in writing that the assets held in dono to the organization's exclusive legal control?	or advised Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	ors, and donor advisors in writing that grant funds the benefit of the donor or donor advisor or for an efit??	may be ny other Yes No
Par	Conservation Easements Comple	ete if the organization answered 'Yes' to	Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held b		, , , , , , , , , , , , , , , , , , , ,
·	Preservation of land for public use (e.g.,		an historically important land area
	Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·	certified historic structure
	Preservation of open space		certified filstoffe structure
2		and the first of a second control of the first of the fir	a farm of a series retire accoment on the
2	last day of the tax year	on held a qualified conservation contribution in the	e form of a conservation easement on the
	Table day of the tax year		Held at the End of the Year
2	Total number of conservation easements		2a
		are arks	
	Total acreage restricted by conservation ease		26
	Number of conservation easements on a certification of conservation easements on a certification of the conservation easements on a certification of the conservation easements on a certification of the conservation easements on a certification of the conservation easements on a certification of the conservation easements on a certification of the conservation easements on a certification of the conservation easements on a certification of the conservation easements on a certification of the conservation easements on a certification of the conservation easement easements of the conservation easement easement easements of the conservation easement easeme	``,	2c
	Number of conservation easements included	• • •	2d
3	Number of conservation easements modified,	transferred, released, extinguished, or terminated	I by the organization during the tax
	year •		
4	Number of states where property subject to co	onservation easement is located >	
5	Does the organization have a written policy reand enforcement of the conservation easeme	egarding the periodic monitoring, inspection, handling it holds?	ling of violations, Yes No
6	Staff and volunteer hours devoted to monitori during the year ▶	ng, inspecting, and enforcing conservation easem	ents
7	Amount of expenses incurred in monitoring, i during the year ▶	nspecting, and enforcing conservation easements	\$
8	Does each conservation easement reported of $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	n line 2(d) above satisfy the requirements of secti	Yes No
9	include, if applicable, the text of the footnote	s conservation easements in its revenue and expense to the organization's financial statements that des	
Day	conservation easements	ations of Art Historical Transcript on C	Athan Cincilar Assats
	Complete if the organization ans	ections of Art, Historical Treasures, or O wered 'Yes' to Form 990, Part IV, line 8.	ther Similar Assets
1 a		er SFAS 116, not to report in its revenue statemen blic exhibition, education, or research in furtheranc ents that describes these items	
Ь	If the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items:	er SFAS 116, to report in its revenue statement an olic exhibition, education, or research in furtherance	d balance sheet works of art, historical e of public service, provide the following
	(i) Revenues included in Form 990, Part VIII	, line 1	►\$
	(ii) Assets included in Form 990, Part X		►\$ ►\$
2	If the organization received or held works of a amounts required to be reported under SFAS	art, historical treasures, or other similar assets for	
_	· · · · · · · · · · · · · · · · · · ·		⊳ ¢
	Revenues included in Form 990, Part VIII, lin	e i .	►\$ - \$
t	Assets included in Form 990, Part X		P\$
BAA	For Privacy Act and Paperwork Reduction A	ct Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2009

Schedule D (Fòrm 990) 2009 JEWIS	н соммилит	ry COUNCIL OF	ERTE	25-098	84608		Page 2
Part HI Organizations Maintai	ning Collect	ions of Art. Histo	orical Treasures. o			ontinu	
3 Using the organization's acquisition items (check all that apply).							
a Public exhibition		d \square Loan	or exchange programs				
b Scholarly research	H						
c Preservation for future genera	ations	- (_)					
4 Provide a description of the organ		tions and explain ho	w they further the orga	nization's exempt purp	ose in		
Part XIV							
5 During the year, did the organizal assets to be sold to raise funds ra	tion solicit or re ather than to be	ceive donations of a	rt, historical treasures, of the organization's co	or other similar ollection?	Yes	Γ	No
Part IV Escrow and Custodial					990, Pa	rt IV,	line
9, or reported an amou	unt on Form	990, Part X, line	21				
1a is the organization an agent, trus	tee, custodian,	or other intermediary	y for contributions or of	ther assets not	—	_	٦
included on Form 990, Part X?	,		,		Yes	L	No
b If 'Yes,' explain the arrangement	ın Part XIV and	l complete the follow	ing table:	г -			
					Amoun	<u>t</u>	
c Beginning balance				1c			
d Additions during the year				1 d			
 Distributions during the year 				1 e			
f Ending balance				1f			
2a Did the organization include an a	mount on Form	990, Part X, line 21	?		Yes	Į	No
b If 'Yes,' explain the arrangement			·				
Part V Endowment Funds Cor	mplete if org	anızatıon answer	ed 'Yes' to Form 9	<u>90, Part IV, line 10</u>). <u> </u>		
	(a) Current ye	ar (b) Prior yea		ck (d) Three years back	(e)	Four year	rs back
1 a Beginning of year balance						ir (* §	
b Contributions					(1) (1.5%)		
c Net Investment earnings, gains, and losses							
d Grants or scholarships.	•				al. 749.	in., ø	`\
e Other expenditures for facilities and programs							
f Administrative expenses			1.35.500				`````\`{\\
g End of year balance					"J 4- ::	5× 32	å, o jer
2 Provide the estimated percentage	e of the year en	d balance held as.					•
a Board designated or quasi-endow	vment -	*					
b Permanent endowment ►	8						
c Term endowment ►	ક						
3a Are there endowment funds not a organization by:	n the possession	on of the organization	n that are held and adn	ninistered for the	ſ	Yes	No
(i) unrelated organizations					3a(i)	-105	"
<u> </u>					3a(ii)		+
(ii) related organizations b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?							+
4 Describe in Part XIV the intended					3b		1
Part VI Investments—Land, B				Cline 10			
Description of investment) Cost or other basis		(c) Accumulated	(4)	Book V	aluo
	\	(investment)	(b) Cost or other basis (other)	Depreciation	(6)	JOOK V	aiue
1 a Land	L				4		
b Buildings	L						
c Leasehold improvements							

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d Equipment **e** Other

Schedule **D** (Form 990) 2009

0.

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

Part VII: Investments-Other Securities See	: Form 990, Part X, line	e 12. N/A
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		Cost of one of your marrie, value
Closely-held equity interests		
Other		
		
Total (Column (b) must equal Form 990 Part X, col (B) line 12) ►		* , , , , , , , , , , , , , , , , , , ,
Part VIII Investments-Program Related (Se	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost or end-or-year market value
		<u> </u>
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13)	▶	
Part IX Other Assets (See Form 990, Part	X, line 15) N/A	
(a	Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (E	R) line 15)	• • • • • • • • • • • • • • • • • • •
Part X : Other Liabilities (See Form 990, Part X : Other Part X : Other Liabilities (See Form 990, Part X : Other	art X line 25)	
(a) Description of Liability	(b) Amount	Profesion of Simple Access to an in-
Federal Income Taxes	(b) Amount	
FUNDS HELD FOR CSJL	7 22	
SENIOR LOUNGE ESCROW	7,23	
SENIOR LOUNGE ESCROW	2,92	
<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	10,15	5.
2. FIN 48 Footnote In Part XIV, provide the text of the	footpote to the organization	's financial statements that reports the organization's liability

Schedule D (Form 990) 2009 JEWISH COMMUNITY COUNCIL OF ERIE

25-0984608

Page 3

Schedule D (Form 990) 2009 JEWISH COMMUNIT			25-0984608	Page 4
Part XI Reconciliation of Change in Net As	ssets from Form 990 to F	inancial Statement	s N/A	
1 Total revenue (Form 990, Part VIII,column (A), lin	e 12)			
2 Total expenses (Form 990, Part IX, column (A), lii	ne 25)			
3 Excess or (deficit) for the year. Subtract line 2 fro	m line 1			
4 Net unrealized gains (losses) on investments				
5 Donated services and use of facilities				
6 Investment expenses				
7 Prior period adjustments.				
8 Other (Describe in Part XIV)				
9 Total adjustments (net) Add lines 4 through 8				
10 Excess or (deficit) for the year per audited financi				
Part XII Reconciliation of Revenue per Aug	dited Financial Statement	ts With Revenue pe	er Return N/A	<u> </u>
1 Total revenue, gains, and other support per audite	ed financial statements		1	
2 Amounts included on line 1 but not on Form 990,	Part VIII, line 12.			
a Net unrealized gains on investments		2a		
b Donated services and use of facilities		2b	1 11	
c Recoveries of prior year grants.		2c		
d Other (Describe in Part XIV)		2d		
e Add lines 2a through 2d			2e	
3 Subtract line 2e from line 1			3	
4 Amounts included on Form 990, Part VIII, line 12,	but not on line 1			
a Investments expenses not included on Form 990,	Part VIII, line 7b	4a		
b Other (Describe in Part XIV)		4b		
c Add lines 4a and 4b			4c	
5 Total revenue Add lines 3 and 4c. (This must eq			5	
Part XIII Reconciliation of Expenses per A		nts With Expenses	per Return N	/A
1 Total expenses and losses per audited financial s			1	
2 Amounts included on line 1 but not on Form 990,	Part IX, line 25.	1 1		
a Donated services and use of facilities		2a		
b Prior year adjustments		2b		
c Other losses		2c	3	
d Other (Describe in Part XIV)		2d		
e Add lines 2a through 2d			2e	
3 Subtract line 2e from line 1		1 1	3	
4 Amounts included on Form 990, Part IX, line 25, t			-, '	
a Investments expenses not included on Form 990,	Part VIII, line 7b	4a		
b Other (Describe in Part XIV)		4b	\$	
c Add lines 4a and 4b			4c	
5 Total expenses Add lines 3 and 4c (This must ed	qual Form 990, Part I, line 18)		5	
Part XIV Supplemental Information				·
Complete this part to provide the descriptions required line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d a information	for Part II, lines 3, 5, and 9, Pa and 4b, and Part XIII, lines 2d a	art III, lines 1a and 4, Pa and 4b Also complete th	art IV, lines 1b and	d 2b, Part V, any additional
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BAA	TEEA3304L 02/02/10		Schedule D	(Form 990) 2009

Schedule D	(Form 990) 2009	JEWISH COMMUNITY	COUNCIL OF ERIE		25-0984608	Page 5
Part XIV	Supplementa	JEWISH COMMUNITY Information (continue	ed)			
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2009

SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATIONPAGE 6

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JEWISH COMMUNITY COUNCIL OF ERIE

25-0984608

10/11/10

12.14PM

SCHEDULE D, PART XI, LINE 8 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED INVESTMENT GAIN

TOTAL \$ 220,208.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Name of the organization	Employer identification number						
JEWISH COMMUNITY COUNCIL OF ERIE	25-0984608						
FORM ONE DART III I INF. 4D. OTHER BROODAN CERVICES RECORDS ON							
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION							
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS							
A BOARD MEMBER FAMILIAR WITH THE FINANCES REVIEWS AND SIGNS TH	E_FORM_990						
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Schedule <b>0</b> (Form 990) 2009 Page 2						Page 2		
Name of the o	rganization						Employer identification nu	ımber
<b>JEWISH</b>	COMMUNITY	COUNCIL O	F ERIE				25-0984608	
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# 2010-2011 Board of Directors

JEWISH COMMUNITY COUNCIL

25-0984608

President Anne Manasse 2011

Past-President Judi Hines / Cathy Shabtai 2011

Treasurer Lauren Unger 2012

VP Finance David Lipsitz 2011

VP Education Jack Marcus 2012

VP Social Service Dr. Joel Waldman 2012

Secretary Darlene Przybyszewski 2011

JCRC Jan Mandel

Campaign ----

Congregation Brith Sholom Rabbi Leonard Lifshen

Temple Anshe Hesed Rabbi John Bush

CBS Representative Allen Selling TAH Representative

General Board

Phil Friedman 2011 Walter Harf 2011 Cathy Zacks 2011 Phil Zacks 2011

Wendy Sherman 2012 Eta Howell 2012 Arlene Sandelstein 2012 Beth Lester 2012

Lyman Cohen 2013 Dr. Joseph Hines 2013 Leonard Lechtner 2013 Leon Mandel 2013 2013 John Newlin Melissa Romero 2013 Jessie Rubinfield 2013 Marilyn Selling 2013

3 Presidential 1 year appointments.

NO BOARD MEMBERS ARE COMPENSATED