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Part III

Statement of Program Service Accomplishments

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

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1

Briefly describe the organization’s mission

JEWISH COMMUNITY CENTERS OF CHICAGO ("JCC CHICAGO" OR "AGENCY") IS AN ILLINOIS NOT-FOR-PROFIT CORPORATION DEDICATED TO ENSURING A STRONG AND VIBRANT JEWISH LIFE AND COMMUNITY FOR GENERATIONS TO COME THROUGH A MIX OF FORMAL AND INFORMAL EDUCATION, RECREATIONAL AND CULTURAL ACTIVITIES, JCC CHICAGO PROVIDES QUALITY EXPERIENCES THAT ENRICH THE LIVES OF INDIVIDUALS, FAMILIES AND THE COMMUNITY AT LARGE. FOUNDED IN 1903, JCC CHICAGO SERVED THE NEEDS OF THE BURGEONING POPULATION OF CHICAGO'S JEWISH IMMIGRANTS, AND OVER A CENTURY LATER, JCC CONTINUES TO MAKE IMPACT THROUGH ITS PROGRAMS AND SERVICES HAPPENING INSIDE AND OUTSIDE THE WALLS OF ITS BUILDINGS. JCC CHICAGO WELCOMES PEOPLE OF ALL AGES, FAITHS, AND BACKGROUNDS AND PROVIDES INNOVATIVE PROGRAMS DESIGNED TO MEET THE NEEDS OF EVERYONE FROM INFANTS TO ADULTS.

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

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

4a	(Code) (Expenses \$ 10,423,570 including grants of \$) (Revenue \$ 7,332,652)	EARLY CHILDHOOD SERVICES - OUR NAEYC ACCREDITED PROGRAMS ASSURE EXCELLENCE AS WE GUIDE EACH CHILD TO REACH THEIR INDIVIDUAL POTENTIAL. AT JCC CHICAGO, PARENTS AND TEACHERS CREATE AN EDUCATIONAL PARTNERSHIP THAT NURTURES AND CHALLENGES EACH CHILD TO GROW AND DEVELOP IN THEIR FIRST FORMAL LEARNING EXPERIENCE. USING DEVELOPMENTALLY APPROPRIATE PRACTICE, JCC CHICAGO ENCOURAGES THE STRENGTHS AND INDIVIDUALITY IN EACH CHILD. THROUGH THE LENS OF JEWISH CULTURE AND TRADITION, CHILDREN HAVE FUN LEARNING ABOUT THEMSELVES, THEIR VALUES, THEIR COMMUNITY AND THE WORLD, PREPARING THEM FOR A LIFELONG JOURNEY OF JOY AND DISCOVERY. THROUGHOUT THE CHICAGO METROPOLITAN AREA, JCC EARLY CHILDHOOD PROGRAMS AND SERVICES ARE PROVIDED FOR CHILDREN FROM SIX WEEKS TO FIVE YEARS, AS WELL AS THEIR FAMILIES, AND INCLUDE FULL-DAY INFANT/TODDLER PROGRAMS, HALF-DAY AND FULL-DAY PRESCHOOL, JUNIOR KINDERGARTEN AND KINDERGARTEN, BACKUP CARE, SUMMER FUN, ENRICHMENT CLASSES, ADULT/CHILD CLASSES, AND PARENTING AND FAMILY EVENTS. JCC EARLY CHILDHOOD ALSO PROVIDES PRESCHOOL FOR ALL, WHICH IS A PUBLICLY FUNDED PROGRAM.
4b	(Code) (Expenses \$ 8,166,076 including grants of \$) (Revenue \$ 7,969,430)	DAY CAMPING - AT JCC CHICAGO DAY CAMPS, CHILDREN HAVE FUN, GROW, MAKE NEW FRIENDS, EXPERIENCE A WIDE RANGE OF ACTIVITIES, AND DISCOVER AND EXPAND THEIR INTERESTS AND TALENTS WITH THE HELP OF QUALIFIED STAFF AND SPECIALISTS WHO CAN BE TRUSTED LIKE FAMILY. JEWISH VALUES, TRADITION, SPIRIT AND ISRAELI CULTURE ARE WOVEN INTO CAMP DAYS THROUGH SONGS, ART, STORIES, SPORTS, DRAMA, GAMES AND CELEBRATIONS OFFERING A WIDE RANGE OF CAMPING ACTIVITIES FOR KIDS THREE YEARS OLD THROUGH 7TH GRADE. JCC DAY CAMPING PROGRAMS INCLUDE TRADITIONAL DAY CAMPS, SPECIALTY CAMPS FOR SPORTS, PERFORMING ARTS, TWEEN ADVENTURE AND COUNSELOR-IN-TRAINING PROGRAMS FOR TEENS. SUMMER PROGRAMS ARE PROVIDED THROUGHOUT METROPOLITAN CHICAGO AND CAMPS ARE TRADITIONAL OR SPECIALTY, HALF-DAY OR FULL-DAY, AND AIM TO BUILD SKILLS, BOOST SELF-ESTEEM AND TEACH IMPORTANT JEWISH VALUES.
4c	(Code) (Expenses \$ 4,248,762 including grants of \$) (Revenue \$ 3,701,980)	RESIDENT CAMPING - SPANNING 600 ACRES ON BEAUTIFUL LAKE BLASS NEAR THE WISCONSIN DELLS, JCC CHICAGO'S CAMP CHI PROVIDES A COMPLETE OVERNIGHT CAMPING EXPERIENCE FOR BOYS AND GIRLS, AGES NINE TO SIXTEEN, WITH MORE THAN 40 SPECIALTY PROGRAMS, INCLUDING AGE AND GENDER SPECIFIC OPPORTUNITIES. AT JCC CAMP CHI, CHILDREN AND TEENS DEVELOP SELF-CONFIDENCE AND CULTIVATE LASTING FRIENDSHIPS IN AN ENVIRONMENT RICH IN JEWISH CULTURE AND SUMMER FUN. PROVIDING A ONE-TO-THREE STAFF-TO-CAMPER RATIO AND SMALL CABIN GROUPS, JCC CAMP CHI ENSURES THAT CAMPERS RECEIVE REGULAR PERSONALIZED ATTENTION. THE MODERN CAMP FACILITIES ARE EQUIPPED WITH UNMATCHED AMENITIES THAT BRING CAMPERS' SUMMERS ALIVE THROUGH ACTIVITIES SUCH AS HORSEBACK RIDING AT PRIVATE STABLES, SPORTS IN AN AIR-CONDITIONED GYMNASIUM, WATER SKIING OFF OF PRIVATE DOCKS AND MUCH MORE. CAMPERS ALSO ENJOY SPECIAL SHABBAT CELEBRATIONS AND ISRAEL EDUCATION PROGRAMS, WHICH COMBINED WITH THE INTERACTIONS AND CONNECTIONS WITH OTHER JEWISH CAMPERS AND ISRAELI STAFF SETS THE GROUNDWORK FOR A UNIQUELY POWERFUL SENSE OF PRIDE FOR THEIR JEWISH HERITAGE.
	(Code) (Expenses \$ 1,723,697 including grants of \$) (Revenue \$ 946,255)	CHILDREN AND FAMILY SERVICES. JCC CHICAGO PROGRAMS ARE PROVIDED TO SCHOOL-AGED CHILDREN, TEENS AND FAMILIES THROUGHOUT THE CHICAGO METROPOLITAN AREA. TEACHING LIFE LESSONS AND SKILLS THAT SERVE THEM FOR A LIFETIME. CHILDREN MAY PARTICIPATE IN SHABBAT ACTIVITIES, BE PART OF MITZVAH PROJECTS, LEARN TO SWIM WITH THE RED CROSS SWIMMING INSTRUCTION PROGRAM, SHARE SPECIAL EXPERIENCES THROUGH THE ME AND MY DAD PROGRAM OR LEARN THE VALUE OF TEAM BUILDING THROUGH OUR SPORTS AND LEAGUES PROGRAMS. FOR TEENS, THERE ARE MANY OPPORTUNITIES TO MAKE FRIENDS THROUGH PROGRAMS LIKE JCC MACCABI AND BBOY. FOR FAMILIES, JCC CHICAGO OFFERS ACTIVITIES THAT INCLUDE HOLIDAY PARTIES, GOT SHABBAT, FRIDAYS AT THE J, FAMILY TRAVEL ADVENTURES, AS WELL AS SPECIAL PROGRAMS FOR YOUNGER CHILDREN LIKE START SMART FOOTBALL AND BASKETBALL. OTHER CHILDREN AND FAMILY SERVICES INCLUDE JCC AFTERSCHOOL AND VACATION DAYS, PROGRAMS THAT EXTEND JCC SERVICES TO FAMILIES WHEN SCHOOL IS NOT IN SESSION.
	(Code) (Expenses \$ 1,504,244 including grants of \$ 106,391) (Revenue \$)	AT-RISK INDIVIDUALS AND FAMILIES - THROUGH THE DINA AND ELI FIELD EZRA MULTI-SERVICE CENTER (MSC) AND JUF UPTOWN CAFE, EMERGENCY SERVICES ARE PROVIDED TO HOMELESS AND DISADVANTAGED INDIVIDUALS AND FAMILIES. MSC IS FUNDED BY THE JEWISH FEDERATION OF METROPOLITAN CHICAGO AND IS ADMINISTERED BY JCC IN CHICAGO'S UPTOWN NEIGHBORHOOD. SERVICES INCLUDE EMERGENCY ASSISTANCE, FOOD AND CLOTHING DISTRIBUTION, EVICTION PREVENTION, ADVOCACY, JOB PLACEMENT, SOCIAL OPPORTUNITIES AND INTERIM HOUSING. THE UPTOWN CAFE IS A JEWISH FEDERATION-SPONSORED KOSHER MEAL PROGRAM COORDINATED BY MSC, DESIGNED TO RESPOND TO THE NEEDS OF CHICAGO'S INDIGENT POPULATION. THE PROGRAM IS STAFFED BY VOLUNTEERS FROM JCC CHICAGO, THE JEWISH UNITED FUND (JUF), SYNAGOGUES AND YOUTH GROUPS PROVIDING HUNDREDS OF MEALS EACH WEEK, AS WELL AS AN ATMOSPHERE THAT OFFERS DIGNITY TO THE PEOPLE IT SERVES.
	(Code) (Expenses \$ 1,269,459 including grants of \$) (Revenue \$ 725,839)	OTHER SERVICES - THE PERLSTEIN RESORT AND CONFERENCE CENTER AND PRITZKER CENTER FOR JEWISH EDUCATION (PRITZKER CENTER) OFFER ADDITIONAL PROGRAMS AND SERVICES THROUGH JCC CHICAGO. THE PERLSTEIN RESORT AND CONFERENCE CENTER, LOCATED IN LAKE DELTON, WISCONSIN, ADJACENT TO JJC CAMP CHI, IS JCC CHICAGO'S PREMIER DESTINATION FOR FAMILIES, GROUPS, BUSINESSES AND INDIVIDUALS THROUGHOUT THE MIDWEST, PROVIDING PROGRAMMING, ACCOMMODATIONS AND MEANINGFUL EVENTS FOR GUESTS. THE PRITZKER CENTER IS CHARGED BY THE JCC BOARD OF DIRECTORS TO SERVE THE JEWISH MISSION OF THE AGENCY BY ENHANCING JEWISH LIFE FOR JEWS OF ALL AGES AND BACKGROUNDS THROUGH FORMAL AND INFORMAL LEARNING EXPERIENCES. THE PRITZKER CENTER STRENGTHENS AND ARTICULATES A JEWISH VISION, DEVELOPS JEWISH EDUCATIONAL MODELS AND PROGRAMS, AND OFFERS RESOURCES FOR STAFF AND LAY LEADERS.
	(Code) (Expenses \$ 1,277,570 including grants of \$) (Revenue \$ 865,834)	ADULT SERVICES - JCC CHICAGO PROVIDES ACTIVITIES FOR ADULTS OF ALL AGES AT SELECT CHICAGOLAND LOCATIONS. JCC OFFERS OPPORTUNITIES TO INVIGORATE THE BODY AND THE MIND. ADULT PROGRAMS AND SERVICES INCLUDE THE SIDNEY N. SHURE KEHILLA PROGRAM FOR ADULTS UNDER 40, MOTHER'S CIRCLE AND GRANDPARENT'S CIRCLE FOR INTERFAITH FAMILIES RAISING JEWISH CHILDREN, VARIOUS FILM SERIES AND LECTURE GROUPS, ROAD SCHOLAR AND "SHALOM OVER 50". IN PARTNERSHIP WITH PRESENTENSE, JCC CHICAGO PROMOTES SOCIAL ENTREPRENEURISM THROUGH THIS INNOVATIVE PROGRAM, PROVIDING COACHING AND MENTORING TO INDIVIDUALS SEEKING TO DEVELOP NEW VENTURES. THERE ARE ALSO DAY-LONG EXCURSIONS TO THEATRE AND SPECIAL EVENTS THROUGHOUT THE YEAR, AS WELL AS DOMESTIC AND INTERNATIONAL TRAVEL OPPORTUNITIES. VOLUNTEER OPPORTUNITIES ARE ALSO AVAILABLE FOR INDIVIDUALS LOOKING TO CONTRIBUTE TO THE COMMUNITY.
	(Code) (Expenses \$ 3,220,237 including grants of \$) (Revenue \$ 819,231)	RECREATION AND WELLNESS - RECREATION AND WELLNESS PROGRAMS INCLUDE SPORTS CLASSES AND LEAGUES - WITH SOME INCLUDING TRAVEL - GROUP AND PRIVATE AQUATICS CLASSES, SWIM TEAM, GROUP EXERCISE, FITNESS AND OPEN SWIM, GENERAL WELLNESS CLASSES AND THE JCC MACCABI GAMES. THE JCC MACCABI GAMES IS AN ATHLETIC COMPETITION THAT INTRODUCES JEWISH TEENS FROM AROUND THE WORLD, INVOLVES THEM IN COMMUNITY, INSTILLS CONFIDENCE IN THEIR SKILLS AND TALENTS, AND INSPIRES THEM TO OPEN THEIR LIVES TO COMMUNITY SERVICE.
4d	Other program services (Describe in Schedule O)	(Expenses \$ 8,995,207 including grants of \$ 106,391) (Revenue \$ 3,357,159)
4e	Total program service expenses	31,833,615

Form 990 (2013)

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 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
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	No
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	No
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	No
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	No
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
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	No
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 Yes	
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 Yes	
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	No
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	No
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 Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
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 Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
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	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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 Yes	
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	No
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	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
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 Yes	
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	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If so, complete Schedule L, Part II</i>	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	Yes	

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

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		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	122	
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0	
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		Yes	
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	1,806	
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 (see instructions)		Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			No
3b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>			
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)?		Yes	
b If "Yes," enter the name of the foreign country CJ See instructions for 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?			No
5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
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?			No
6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7 Organizations that may receive deductible contributions under section 170(c).			
7a 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?		Yes	
7b If "Yes," did the organization notify the donor of the value of the goods or services provided?		Yes	
7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			No
d If "Yes," indicate the number of Forms 8282 filed during the year		7d	
7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			No
7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			No
7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8	
9 Sponsoring organizations maintaining donor advised funds.			
9a Did the organization make any taxable distributions under section 4966?		9a	
9b Did the organization make a distribution to a donor, donor advisor, or related person?		9b	
10 Section 501(c)(7) organizations. Enter			
10a Initiation fees and capital contributions included on Part VIII, line 12		10a	
10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b	
11 Section 501(c)(12) organizations. Enter			
11a Gross income from members or shareholders		11a	
11b 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.			
13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		13a	
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	No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>		14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent		
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	Yes
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	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
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	Yes
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	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
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	No

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	No
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	Yes
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	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
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	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
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	Yes
b	Other officers or key employees of the organization	15b	No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
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 filedIL
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization JEROLD H WOLFF30 SOUTH WELLS STREET SUITE 4000 CHICAGO,IL 606065054 (312) 775-1800

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

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

Form **990** (2013)

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	1,727,541	0	378,610

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 12

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
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? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
FIRST STUDENT INC 22157 NETWORK PLACE CHICAGO IL 606731221	BUSING SERVICES	287,523
ILLINOIS CENTRAL SCHOOL BUS 78 N CHICAGO ST FL 2 JOLIET IL 60432	BUSING SERVICES	243,375
LAMERS BUS LINES INC 2407 SOUTH POINT ROAD GREEN BAY WI 54313	BUSING SERVICES	155,941
MID-AMERICAN PRINTING SYSTEMS INC 1716 W GRAND AVENUE CHICAGO IL 60622	PRINTING	130,301
CANTWELL & CANTWELL 30 N LASALLE STREET SUITE 2850 CHICAGO IL 60602	SETTLEMENT FEES	125,000

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 ▶7

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	1a	Federated campaigns	1a8,722,796			
	b	Membership dues	1b			
	c	Fundraising events	1c152,201			
	d	Related organizations	1d256,828			
	e	Government grants (contributions)	1e134,543			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f1,977,767			
	g	Noncash contributions included in lines 1a-1f \$	1,000			
	h	Total. Add lines 1a-1f	11,244,135			
Program Service Revenue	2a	DAY CAMPING	Business Code 624410	7,969,754	7,969,754	
	b	EARLY CHILDHOOD SERVICES	624410	7,332,442	7,332,442	
	c	RESIDENT CAMPING	721210	3,639,920	3,639,920	
	d	CHILDREN & FAMILY SERVICES	624100	946,750	946,750	
	e	ADULT SERVICES	624100	865,834	865,834	
	f	All other program service revenue		1,546,283	1,546,283	
	g	Total. Add lines 2a-2f	22,300,983			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	434,240			434,240
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	Gross rents	(i) Real 265,149	(ii) Personal		
	b	Less rental expenses	55,657			
	c	Rental income or (loss)	209,492			
	d	Net rental income or (loss)	209,492	12,180		197,312
	7a	Gross amount from sales of assets other than inventory	(i) Securities 3,820,343	(ii) Other		
	b	Less cost or other basis and sales expenses	3,324,952			
	c	Gain or (loss)	495,391			
	d	Net gain or (loss)	495,391			495,391
	8a	Gross income from fundraising events (not including \$ 152,201 of contributions reported on line 1c) See Part IV, line 18	a102,249			
	b	Less direct expenses	b107,419			
	c	Net income or (loss) from fundraising events	-5,170			-5,170
	9a	Gross income from gaming activities See Part IV, line 19	a			
	b	Less direct expenses	b			
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances	a128,732			
	b	Less cost of goods sold	b68,494			
	c	Net income or (loss) from sales of inventory	60,238	60,238		
		Miscellaneous Revenue	Business Code			
	11a	OTHER REBATES	900099	35,804	35,804	
	b	P-CARD REBATES	900099	32,000	32,000	
	c	OTHER REVENUES	900099	10,229	10,229	
	d	All other revenue				
	e	Total. Add lines 11a-11d	78,033			
	12	Total revenue. See Instructions	34,817,342	22,451,434	0	1,121,773

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 governments and organizations in the United States. See Part IV, line 21.				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	106,391	106,391		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	1,103,477	545,406	529,006	29,065
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.	14,078,960	12,880,623	947,609	250,728
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	679,905	595,628	66,319	17,958
9	Other employee benefits.	1,666,382	1,410,869	210,608	44,905
10	Payroll taxes.	1,399,351	1,274,655	100,530	24,166
11	Fees for services (non-employees):				
a	Management.	14,400	14,400		
b	Legal.	52,429		52,429	
c	Accounting.	51,250		51,250	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	33,068		33,068	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	556,098	394,350	142,201	19,547
12	Advertising and promotion.	320,473		320,473	
13	Office expenses.	167,403	149,254	15,027	3,122
14	Information technology.	525,441	374,034	129,231	22,176
15	Royalties.				
16	Occupancy.	7,438,972	7,166,168	240,373	32,431
17	Travel.	66,637	52,211	10,537	3,889
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	165,056	128,691	13,288	23,077
20	Interest.	93,884	85,120	8,365	399
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	1,426,601	1,284,898	130,772	10,931
23	Insurance.	328,850	277,414	51,222	214
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	PROGRAM SUPPLIES	3,551,179	3,540,907	347	9,925
b	BUS TRANSPORTATION	760,530	760,530		
c	BANKING AND CREDIT CARD	376,577	373,623	15	2,939
d	EQUIPMENT AND VEHICLES	126,596	124,888	1,622	86
e	All other expenses	323,175	293,555	14,482	15,138
25	Total functional expenses. Add lines 1 through 24e.	35,413,085	31,833,615	3,068,774	510,696
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)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		1,076,729	1	329,346
	2	Savings and temporary cash investments		1,112,749	2	1,846,192
	3	Pledges and grants receivable, net		1,172,804	3	1,372,707
	4	Accounts receivable, net		373,134	4	307,636
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		115,552	5	119,364
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		2,346,126	9	2,403,816
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a35,707,709			
	b	Less accumulated depreciation	10b22,721,831	11,841,023	10c	12,985,878
	11	Investments—publicly traded securities		12,720,198	11	13,615,527
	12	Investments—other securities See Part IV, line 11		75,045	12	1,000
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		5,542,761	15	6,242,334
	16	Total assets. Add lines 1 through 15 (must equal line 34)		36,376,121	16	39,223,800
Liabilities	17	Accounts payable and accrued expenses		1,927,331	17	2,033,552
	18	Grants payable			18	
	19	Deferred revenue		10,610,100	19	11,311,282
	20	Tax-exempt bond liabilities		710,000	20	650,000
	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		19,770	23	1,610,383
	24	Unsecured notes and loans payable to unrelated third parties		352,607	24	92,174
	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		525,201	25	488,639
	26	Total liabilities. Add lines 17 through 25		14,145,009	26	16,186,030
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		9,237,761	27	8,818,007
	28	Temporarily restricted net assets		8,568,152	28	9,792,191
	29	Permanently restricted net assets		4,425,199	29	4,427,572
	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		22,231,112	33	23,037,770
	34	Total liabilities and net assets/fund balances		36,376,121	34	39,223,800

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	34,817,342
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,413,085
3	Revenue less expenses Subtract line 2 from line 1	3	-595,743
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22,231,112
5	Net unrealized gains (losses) on investments	5	894,738
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	507,663
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	23,037,770

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 ☒ 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? 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	2a	No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	Yes
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes
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	No
3b	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	

Additional Data

Software ID:
Software Version:
EIN: 36-2167758
Name: JEWISH COMMUNITY CENTERS OF CHICAGO

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STUART HOCHWERT PRESIDENT	1 00	X		X				0	0	0
MAURY AVI EPSTEIN VICE-PRESIDENT	1 00	X		X				0	0	0
CAROL COHEN VICE-PRESIDENT	1 00	X		X				0	0	0
CHARLES FRANK VICE-PRESIDENT	1 00	X		X				0	0	0
JAMES MATANKY VICE-PRESIDENT	1 00	X		X				0	0	0
LAURI ZEISSAR VICE-PRESIDENT	1 00	X		X				0	0	0
LISA A REISMAN VICE-PRESIDENT	1 00	X		X				0	0	0
KYLE FREIMUTH TREASURER	1 00	X		X				0	0	0
ANDREW GROSSMANN SECRETARY	1 00	X		X				0	0	0
ALLEN C BERG DIRECTOR	1 00	X						0	0	0
ARLENE RUFF THROUGH 10913 DIRECTOR	1 00	X						0	0	0
BRIAN S CARTER DIRECTOR	1 00	X						0	0	0
DAVID R ENGLE DIRECTOR	1 00	X						0	0	0
GERALD M TENNER DIRECTOR	1 00	X						0	0	0
HELEN SCHECHTMAN DIRECTOR	1 00	X						0	0	0
JONATHAN ROTHSTEIN DIRECTOR	1 00	X						0	0	0
JULIA S GERSTEIN DIRECTOR	1 00	X						0	0	0
KAREN WANDER DIRECTOR	1 00	X						0	0	0
LEE TRESLEY DIRECTOR	1 00	X						0	0	0
LEV KATZ DIRECTOR	1 00	X						0	0	0
ELISABETH M LANDES DIRECTOR	1 00	X						0	0	0
BARBARA HOCHWERT DIRECTOR	1 00	X						0	0	0
MARC SLUTSKY MD DIRECTOR	1 00	X						0	0	0
MARISA H MANDREA DIRECTOR	1 00	X						0	0	0
NICOLE L FRIEDMAN DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PETER G GLICK DIRECTOR	1 00	X						0	0	0
ROBIN FRANK DIRECTOR	1 00	X						0	0	0
SCOTT B JACOBSON DIRECTOR	1 00	X						0	0	0
SHARON LEDERMAN BURACK DIRECTOR	1 00	X						0	0	0
STEVEN BLONDER DIRECTOR	1 00	X						0	0	0
STEVEN A KANNER DIRECTOR	1 00	X						0	0	0
SUSAN J SPECTOR THROUGH 10913 DIRECTOR	1 00	X						0	0	0
BENJAMIN M KLEIN DIRECTOR	1 00	X						0	0	0
DR CHERYL PERLIS DIRECTOR	1 00	X						0	0	0
DAVID SALTZMAN DIRECTOR	1 00	X						0	0	0
MARK D GRUEN DIRECTOR	1 00	X						0	0	0
MARK L SCHWARTZ DIRECTOR	1 00	X						0	0	0
MARK J PUTTERMAN DIRECTOR	1 00	X						0	0	0
LISA BLOOM DIRECTOR	1 00	X						0	0	0
EDWARD M ATKINS MD DIRECTOR	1 00	X						0	0	0
EMILY EMMERMAN DIRECTOR	1 00	X						0	0	0
RON GOULD DIRECTOR	1 00	X						0	0	0
ALAN SATALOFF GENERAL DIRECTOR	37 50			X				311,324	0	7,433
SUSAN ABRAMS ASSOCIATE GENERAL DIRECTOR	37 50				X			199,529	0	20,126
JEROLD H WOLFF CHIEF FINANCIAL OFFICER	37 50			X				196,569	0	26,503
AVRUM I COHEN FORMER GENERAL DIRECTOR	0 00						X	100,130	0	12,597
NINA MIZRAHI DIRECTOR OF PRITZKER CENTER FOR JEWISH EDUCATION	37 50				X			167,921	0	72,318
RONALD A LEVIN DIRECTOR OF RESIDENT CAMPING	37 50				X			162,595	0	72,886
GAYLE MALVIN DIRECTOR OF CAMPING SERVICES	37 50					X		130,265	0	51,471
DOREEN L EDELMAN MARKETING DIRECTOR	37 50					X		124,760	0	20,966

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WENDY PLATT-NEWBERGER DIRECTOR OF EARLY CHILDHOOD SERVICES	37 50					X		121,621	0	18,601
JEAN ALLETAG DIRECTOR OF HUMAN RESOURCES	37 50					X		111,126	0	54,416
JOHN SIMMONS DIRECTOR OF PROPERTY AND SECURITY	37 50					X		101,701	0	21,293

SCHEDULE A

(Form 990 or 990EZ)

Department of the
Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization JEWISH COMMUNITY CENTERS OF CHICAGO	Employer identification number 36-2167758
--	---

Part I

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

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

1	☐	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	☐	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	☐	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	☐	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
5	☐	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	☐	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	☒	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8	☐	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	☐	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10	☐	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	☐	An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated
e	☐	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	☐	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g	☐	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above?
h	☐	Provide the following information about the supported organization(s)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	12,171,952	12,157,048	11,814,549	11,074,042	11,244,135	58,461,726
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	12,171,952	12,157,048	11,814,549	11,074,042	11,244,135	58,461,726
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)						
6 Public support. Subtract line 5 from line 4						58,461,726

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	12,171,952	12,157,048	11,814,549	11,074,042	11,244,135	58,461,726
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	385,276	409,118	522,617	616,344	699,389	2,632,744
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 IV.)	64,286	52,504	63,120	64,160	78,033	322,103
11 Total support (Add lines 7 through 10)						61,416,573
12 Gross receipts from related activities, etc. (see instructions)					12	110,382,524
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						▶

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	95 190 %
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	95 610 %
16a 33 1/3% support test—2013. 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	▶	
b 33 1/3% support test—2012. 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—2013. 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—2012. 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	▶	

Part IIISupport 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. 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—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

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

Facts And Circumstances Test

Return Reference	Explanation	
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b**
▶ **Attach to Form 990.** ▶ **See separate instructions.** ▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

JEWISH COMMUNITY CENTERS OF CHICAGO

Employer identification number

36-2167758

Part I

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

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

Part II

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

1

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

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

2

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

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

3

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

4

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

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

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

7

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

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

Part III

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

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) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2013

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

- 3

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

☒ Public exhibition

b

☐ Scholarly research

c

☒ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

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

- 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 |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- 2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No
- b

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

☐

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	6,021,135	5,875,236	7,376,774	6,330,794	5,940,722
b Contributions	100		400	924	700
c Net investment earnings, gains, and losses	860,325	509,510	-79,790	1,417,554	757,093
d Grants or scholarships					
e Other expenditures for facilities and programs	358,947	363,611	1,422,148	372,498	367,721
f Administrative expenses					
g End of year balance	6,522,613	6,021,135	5,875,236	7,376,774	6,330,794

- 2

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

Board designated or quasi-endowment

1 080 %
- b

Permanent endowment

31 040 %
- c

Temporarily restricted endowment

67 880 %
- The percentages in 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
- (i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes
- b

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

3b

Yes
- 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' to 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		957,106		957,106
b Buildings		14,520,084	9,583,259	4,936,825
c Leasehold improvements		6,543,697	4,533,777	2,009,920
d Equipment		2,737,254	2,144,022	593,232
e Other		10,949,568	6,460,773	4,488,795
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				12,985,878

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	36,275,400
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	894,738
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	507,663
e	Add lines 2a through 2d	2e	1,402,401
3	Subtract line 2e from line 1	3	34,872,999
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	-55,657
c	Add lines 4a and 4b	4c	-55,657
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	34,817,342

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	35,468,742
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	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	55,657
e	Add lines 2a through 2d	2e	55,657
3	Subtract line 2e from line 1	3	35,413,085
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	35,413,085

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.

Return Reference	Explanation
PART III, LINE 1A	THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF RELIGIOUS, ART AND OTHER OBJECTS THAT ARE HELD FOR DISPLAY, EDUCATION AND OTHER PURPOSES. THESE COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE ORGANIZATION'S INCEPTION, ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENTS OF FINANCIAL POSITION.
PART III, LINE 4	THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF RELIGIOUS, ART AND OTHER OBJECTS THAT ARE HELD FOR DISPLAY, EDUCATION AND OTHER PURPOSES. THE ORGANIZATION'S COLLECTION PROVIDE TANGIBLE EXAMPLES OF JEWISH CULTURE.
PART V, LINE 4	THE AGENCY'S ENDOWMENT CONSISTS OF 20 INDIVIDUAL FUNDS ESTABLISHED TO OFFSET COSTS OF SCHOLARSHIPS, OFFSET COSTS OF SPECIFIC PROGRAMS, AND OFFSET COSTS OF FACILITIES.
PART X, LINE 2	THE AGENCY FOLLOWS THE GUIDANCE IN THE FASB CODIFICATION TOPIC RELATED TO UNCERTAINTY IN INCOME TAXES WHICH PRESCRIBES A COMPREHENSIVE MODEL FOR RECOGNIZING, MEASURING, PRESENTING AND DISCLOSING IN THE FINANCIAL STATEMENTS UNCERTAIN TAX POSITIONS THAT THE AGENCY HAS TAKEN OR EXPECTS TO TAKE IN ITS TAX RETURNS. UNDER THE GUIDANCE, THE AGENCY MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS "MORE LIKELY THAN NOT THAT IT IS SUSTAINABLE, BASED ON ITS TECHNICAL MERITS. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION SHOULD BE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT WITH A TAXING AUTHORITY HAVING FULL KNOWLEDGE OF ALL RELEVANT INFORMATION. THE AGENCY BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR THE POSITIONS TAKEN ON ITS RETURNS.
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN BENEFICIAL INTEREST IN JCC ENDOWMENT FOUNDATION 453,826. CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE POLICIES 20,173. NET UNREALIZED GAINS ON OTHER ASSETS 33,664.
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL EXPENSES -55,657.
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES 55,657.

[illegible]

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.
► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
JEWISH COMMUNITY CENTERS OF CHICAGO

Employer identification number
36-2167758

Part I

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			1,830,605
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			1,830,605

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									

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

Part III

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐

Yes

☒

No

Additional Data

Software ID:

Software Version:

EIN: 36-2167758

Name: JEWISH COMMUNITY CENTERS OF CHICAGO

Part V Supplemental Information

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

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	6 MISSION TRIPS PROGRAM IS MARKETING BY THE AGENCY, BUT RUN BY A 3RD PARTY FOR WHICH THE AGENCY RECEIVES A NET COMMISSION THE AGENCY HAS NO DIRECT EXPENSES	
MIDDLE EAST AND AFRICA	0	0	PROGRAM SERVICES	EDUCATIONAL AND HISTORICAL TOURS PROGRAM IS MARKETING BY THE AGENCY, BUT RUN BY A 3RD PARTY FOR WHICH THE AGENCY RECEIVES A NET COMMISSION THE AGENCY HAS NO DIRECT EXPENSES	
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS & PROGRAM SERVICES		1,566,812

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE	0	0	PROGRAM SERVICES	EDUCATIONAL AND HISTORICAL TOUR AND CRUISES PROGRAM IS MARKETING BY THE AGENCY, BUT RUN BY A 3RD PARTY FOR WHICH THE AGENCY RECEIVES A NET COMMISSION THE AGENCY HAS NO DIRECT EXPENSES	
NORTH AMERICA - CANADA AND MEXICO BUT NOT THE U S	0	0	PROGRAM SERVICES	1 HIGH ADVENTURE TRIP SPECIFICALLY FOR TEENAGERS 1 TRIP FOR ADULTS	97,392
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	1 INTERNATIONAL TRIP SPECIFICALLY FOR TEENAGERS	166,401

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization JEWISH COMMUNITY CENTERS OF CHICAGO	Employer identification number 36-2167758
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Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1

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

☐ Mail solicitations
- e

☐ Solicitation of non-government grants
- b

☐ Internet and email solicitations
- f

☐ Solicitation of government grants
- c

☐ Phone solicitations
- g

☐ Special fundraising events
- d

☐ In-person solicitations
- 2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes

☐ No
- b

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

- 3

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>GIVE TO RECEIVE</u>	<u>OLD JEWS TELLING</u>	<u>3</u>	(add col (a) through	
			(event type)	JOKES	(total number)	col (c))	
				(event type)			
1	Gross receipts	. . .	117,692	71,486	65,272	254,450	
2	Less Contributions	. .	75,617	63,194	13,390	152,201	
3	Gross income (line 1 minus line 2)	. . .	42,075	8,292	51,882	102,249	
Direct Expenses	4	Cash prizes	. . .				
	5	Noncash prizes	. .				
	6	Rent/facility costs	. .	3,665		3,665	
	7	Food and beverages	.	38,385	18,230	56,615	
	8	Entertainment	. . .		10,265	3,222	13,487
	9	Other direct expenses	.	39	244	33,369	33,652
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(107,419)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶					-5,170

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

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

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility

13a

%

b An outside facility

13b

%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer

☐ Employee

☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	
Return Reference	Explanation

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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

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Name of the organization
JEWISH COMMUNITY CENTERS OF CHICAGO

Employer identification number
36-2167758

Part I General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

- 2

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

▶
- 3

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

▶

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	GRANTEE ASSISTANCE IS TRACKED THROUGH AN ELECTRONIC DATABASE A COMMITTEE OF CASE MANAGERS MEETS TO REVIEW FINANCIAL ASSISTANCE REQUESTS DECISIONS ARE REVIEWED BY THE DIRECTOR OF EZRA'S MULTI-SERVICE CENTER WHO DEVELOPS THE WORK PLAN AND PROCEDURES FOR EXECUTING THE FINANCIAL ASSISTANCE THE INFORMATION IS FREQUENTLY SUBSTANTIATED BY GRANTOR REPORTING REQUIREMENTS

Additional Data

Software ID:

Software Version:

EIN: 36-2167758

Name: JEWISH COMMUNITY CENTERS OF CHICAGO

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
FOOD & HYGIENE ITEMS	517	12,928	1,700	COST	GIFT CARDS
PUBLIC TRANSPORTATION	843	11	6,074	COST	PROVIDED CLIENTS FARE CARDS
UTILITY ASSISTANCE	20	3,773			
SCHOOL SUPPLIES	10	521			
GENERAL CLIENT ASSISTANCE	66	1,082	3,918	COST	GIFT CARDS
FURNITURE	13	3,650			
VOCATIONAL TRAINING	61	5,715	227	COST	GIFT CARDS
MEDICAL	44	18,206			
RENTAL/MORTGAGE ASSISTANCE	78	47,158			
MOVING AND STORAGE	5	1,428			

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

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

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JEWISH COMMUNITY CENTERS OF CHICAGO

Employer identification number
36-2167758

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 in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in 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	1bYes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	No
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 ☐ Independent compensation consultant ☒ Form 990 of other organizations ☒ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4bYes	
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c	No
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?	5a	No
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b	No
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?	6a	No
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6b	No
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)ALAN SATALOFF GENERAL DIRECTOR	(i)	311,324	0	0	0	7,433	318,757	0
	(ii)	0	0	0	0	0	0	0
(2)SUSAN ABRAMS ASSOCIATE GENERAL DIRECTOR	(i)	199,529	0	0	10,644	9,482	219,655	0
	(ii)	0	0	0	0	0	0	0
(3)JEROLD H WOLFF CHIEF FINANCIAL OFFICER	(i)	196,569	0	0	17,914	8,589	223,072	0
	(ii)	0	0	0	0	0	0	0
(4)AVRUM I COHEN FORMER GENERAL DIRECTOR	(i)	100,130	0	0	0	12,597	112,727	0
	(ii)	0	0	0	0	0	0	0
(5)NINA MIZRAHI DIRECTOR OF PRITZKER CENTER FOR JEWI	(i)	167,921	0	0	24,061	48,257	240,239	0
	(ii)	0	0	0	0	0	0	0
(6)RONALD A LEVIN DIRECTOR OF RESIDENT CAMPING	(i)	162,595	0	0	64,930	7,956	235,481	0
	(ii)	0	0	0	0	0	0	0
(7)GAYLE MALVIN DIRECTOR OF CAMPING SERVICES	(i)	130,265	0	0	35,218	16,253	181,736	0
	(ii)	0	0	0	0	0	0	0
(8)JEAN ALLETAG DIRECTOR OF HUMAN RESOURCES	(i)	111,126	0	0	46,616	7,800	165,542	0
	(ii)	0	0	0	0	0	0	0

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.

Return Reference	Explanation
PART I, LINE 1A	THE AGENCY HAS A RABBI ON STAFF WHO IS PROVIDED A HOUSING ALLOWANCE. THE ADDENDUM TO THE HIRING AGREEMENT PROVIDED TO THE RABBI ALLOWS FOR 26% OF HER GROSS INCOME TO BE ALLOCATED AS A HOUSING ALLOWANCE.
PART I, LINE 1B	THE HOUSING ALLOWANCE IS A UNIQUE CIRCUMSTANCE THAT AFFECTS ONLY ONE STAFF MEMBER AND IT IS INCLUDED AS AN ADDENDUM TO HER EMPLOYMENT CONTRACT.
PART I, LINE 3	EXECUTIVE DIRECTOR COMPENSATION IS DETERMINED VIA NEGOTIATION WITH SELECT MEMBERS OF THE BOARD OF DIRECTORS AS CHOSEN BY THE PRESIDENT. INFORMATION FROM THE JEWISH COMMUNITY CENTERS ASSOCIATION (JCCA) AND THE JEWISH FEDERATION OF METROPOLITAN CHICAGO (JFMC) IS REVIEWED AS PART OF THE NEGOTIATION. A WRITTEN CONTRACT IS SIGNED BY THE GENERAL DIRECTOR AND BY THE PRESIDENT, SECRETARY, AND TREASURER OF THE BOARD OF DIRECTORS AND NOTARIZED. FUTURE INCREASES ARE EITHER SPELLED OUT IN THE CONTRACT OR REVIEWED BY AN AD HOC COMMITTEE.
PART I, LINE 4B	AVRUM COHEN, FORMER GENERAL DIRECTOR RECEIVED \$100,130 AS PART OF A DEFERRED COMPENSATION ARRANGEMENT.

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

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Employer identification number
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Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A SERIES G-3 COLORADO EDUCATIONAL AND CULTURAL FACILITIES AUTHORITY	84-0896727	19645RQN4	06-01-2012	770,000	REFUND PRIOR BOND ISSUE		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	770,000							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	5,000							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds	765,000							
12	Other unspent proceeds								
13	Year of substantial completion	2012							
		Yes	No						
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?	X							
b	Exception to rebate?		X						
c	No rebate due?		X						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV

Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?							
		X						
b	Name of provider							
c	Term of GIC							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?							
6	Were any gross proceeds invested beyond an available temporary period?							
		X						
7	Has the organization established written procedures to monitor the requirements of section 148?							
		X						

Part V

Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?								
	X							

Part VI

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons
▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

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Employer identification number
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) ALAN SATALOFF	GENERAL DIRECTOR	LOAN FOR PURCHASE OF A RESIDENCE INCLUDING ACCRUED INTEREST		X	114,000	119,364		No	Yes		Yes	
Total ▶ \$						119,364						

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV

Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V

Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
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efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493069000475	
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 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
					2013 Open to Public Inspection
		Name of the organization JEWISH COMMUNITY CENTERS OF CHICAGO			Employer identification number 36-2167758

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	CHARLES FRANK (VICE PRESIDENT) IS THE FATHER OF NICOLE FRIEDMAN (DIRECTOR) BARBARA (DIRECTOR)AND STUART HOCHWERT (PRESIDENT) ARE MARRIED
FORM 990, PART VI, SECTION A, LINE 6	MEMBERS ARE THE DIRECT BENEFICIARIES OF THE JCC'S COMMITMENT, WHICH IS IMPROVING THE QUALITY OF LIFE IN THE COMMUNITIES IT SERVES THE JCC IS DEDICATED TO KEEPING MEMBERSHIP VALUABLE BY MAINTAINING A DIVERSE INVENTORY OF QUALITY PROGRAMS AND SERVICES, AND OFFERING AS MANY BENEFITS AS POSSIBLE
FORM 990, PART VI, SECTION A, LINE 7A	AT THE ANNUAL MEETING OF THE JCC, THE ENTIRE SLATE OF THE BOARD OF DIRECTORS IS VOTED ON BY THE MEMBERSHIP
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE DRAFT 990 IS LOADED ON THE AGENCY'S INTRA-NET SITE AND A COMMUNICATION IS SENT TO THE BOARD OF DIRECTORS AND THE AUDIT COMMITTEE REQUESTING THAT THEY REVIEW THE DOCUMENT AND RESPOND TO MANAGEMENT WITH ANY QUESTIONS THE AUDIT COMMITTEE SUBSEQUENTLY MEETS TO APPROVE THE 990 PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY BOARD MEMBERS, OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST THE GENERAL DIRECTOR REVIEWS ANY SUCH DISCLOSURES AND THEY ARE APPROPRIATELY ADDRESSED BY THE BOARD
FORM 990, PART VI, SECTION B, LINE 15A	THE COMPENSATION COMMITTEE REVIEWED COMPARABLE DATA FROM THE JEWISH COMMUNITY CENTERS ASSOCIATION OF NORTH AMERICA (JCCA) FOR THE GENERAL DIRECTOR, ASSOCIATE GENERAL DIRECTOR, AND ASSISTANT GENERAL DIRECTOR RAISES FOR THE GENERAL DIRECTOR HAVE BEEN BASED ON THE CONTRACT SIGNED WHEN THE GENERAL DIRECTOR WAS HIRED THERE IS CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATIONS AND DECISIONS THROUGH THE KEEPING OF COMMITTEE MINUTES THE COMPENSATION OF OTHER KEY AND HIGHLY COMPENSATED EMPLOYEES IS DETERMINED BY TOP MANAGEMENT
FORM 990, PART VI, SECTION C, LINE 19	THE FINANCIAL STATEMENTS, GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST
FORM 990, PART XI, LINE 9	CHANGE IN BENEFICIAL INTEREST IN JCC ENDOWMENT FOUNDATION 453,826 CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE POLICIES 20,173 NET UNREALIZED GAIN ON OTHER ASSETS 33,664
FORM 990, PART XII, LINE 2C	THE AUDIT COMMITTEE OVERSIGHT AND SELECTION PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
JEWISH COMMUNITY CENTERS OF CHICAGO

Employer identification number
36-2167758

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) JEWISH COMMUNITY CENTERS ENDOWMENT FOUNDATION 30 SOUTH WELLS NO 4049 CHICAGO, IL 60606 36-4310828	CARRY OUT THE PURPOSES OF JEWISH COMMUNITY CENTERS OF CHICAGO	IL	501(C)3	509(A)(3)			No

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

Yes

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) JEWISH COMMUNITY CENTERS ENDOWMENT FOUNDATION	C	256,828	CASH

Schedule R (Form 990) 2013

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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