DLN: 93493135039012 OMB No 1545-0047 Return of Organization Exempt From Income Tax Form 990 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Department of the Treasury Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011 D Employer identification number B Check if applicable JEWISH NEWS SERVICE INC 45-0949784 Address change E Telephone number Doing Business As Name change ✓ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite **G** Gross receipts \$ 280,100 Terminated ROOM/SUITE 418 Amended return City or town, state or country, and ZIP + 4 BRIGHTON, MA 021341346 Application pending Name and address of principal officer H(a) Is this a group return for AMELIA KATZEN affiliates? H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status H(c) Group exemption number ► Website: ► WWW JNS ORG K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► L Year of formation 2011 M State of legal domicile MA Part I Summary 1 Briefly describe the organization's mission or most significant activities SINCE ITS LAUNCH IN SEPTEMBER 2011, JNS HAS HIRED TWO FULL-TIME EDITORS AND ONE PART-TIME ASSISTANT EDITOR, CREATED A WEBSITE, AND ENGAGED DOZENS OF FREELANCE WRITERS, PHOTOGRAPHERS AND GRAPHIC DESIGNERS JNS HAS SECURED 55 SUBSCRIBER NEWSPAPERS (REPRESENTING 550,000 CIRCULATION) FOR ITS WEEKLY ELECTRONIC FEED OF NEWS BRIEFS AND ARTICLES, ANALYSIS AND OPINION COLUMNS AND FEATURE ARTICLES ABOUT SUBJECTS RELATING TO ISRAEL, THE MIDDLE EAST AND JUDAISM CURRENTLY, 8 OF THE TOP 12 JEWISH PAPERS BY CIRCULATION, IN ADDITION TO 10 SMALLER PAPERS, ARE PUBLISHING JNS NEWS MATERIAL ON A Activities & Governance REGULAR WEEKLY BASIS JNS RECENTLY COMMENCED A DAILY FEED OF NEWS BRIEFS TO SUBSCRIBERS HAVING AN ONLINE PRESENCE AND A NEED TO PROVIDE UP-TO-DATE NEWS, AND IT IS ABOUT TO LAUNCH ITS SOCIAL MEDIA STRATEGY FOR ATTRACTING A YOUNGER DEMOGRAPHIC TO ITS UPDATED WEBSITE 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . 5 6 **6** Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 . . 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 280,100 8 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 9 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 0 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 280,100 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines Expenses 59.442 Professional fundraising fees (Part IX, column (A), line 11e) 0 16a b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ 90,803 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 150,245 18 Revenue less expenses Subtract line 18 from line 12 129,855 Net Assets or Fund Balances **Beginning of Current End of Year** Year 129,855 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 129,855 Net assets or fund balances Subtract line 21 from line 20 . Part II Signature Block true, correct, and complete. Declaration of preparer (other knowledge.

Under penalties of perjury, I declare that I have examined this return, including acco knowledge and belief, it is

Sign	Signature of officer								
Here	AMELIA KATZEN CLERK								
	Type or print name and title								
Paid	Preparer's signature ROBERT P RIVET	Date 2012-05-14							
Preparer's Use Only	Firm's name (or yours RIVET CPA LLC if self-employed),								
OSC OIIIY	address, and ZIP + 4 54 JACONNET ST STE 204								
	NEWTON MA 02461								

May the IRS discuss this return with the preparer shown above? (see instructio

-0111	1990 (.	2011)				Page ∠
Par	t III		Program Service Acc O contains a response to a	omplishments any question in this Part III		৮
1	Briefl	ly describe the orga	anization's mission			
CREA SEC BRIE THE SMA FEE	ATED AURED SEFS AN MIDDLLER POOR N	A WEBSITE, AND E 55 SUBSCRIBER N D ARTICLES, ANA LE EAST AND JUD, PAPERS, ARE PUBL EWS BRIEFS TO SI	ENGAGED DOZENS OF FRE EWSPAPERS (REPRESENT LYSIS AND OPINION CO AISM CURRENTLY, 8 OF T LISHING JNS NEWS MATE UBSCRIBERS HAVING AN	RED TWO FULL-TIME EDITOR EELANCE WRITERS, PHOTOGR TING 550,000 CIRCULATION) LUMNS AND FEATURE ARTICL THE TOP 12 JEWISH PAPERS E RIAL ON A REGULAR WEEKLY ONLINE PRESENCE AND A NE DR ATTRACTING A YOUNGER	RAPHERS AND GRAPHIC DES FOR ITS WEEKLY ELECTRON LES ABOUT SUBJECTS RELAT BY CIRCULATION, IN ADDIT BASIS JNS RECENTLY COMM EED TO PROVIDE UP-TO-DA	IGNERS JNS HAS IC FEED OF NEWS ING TO ISRAEL, ION TO 10 MENCED A DAILY TE NEWS, AND IT IS
_						
2		ne organization und rior Form 990 or 99		am services during the year whi		s
	If "Ye	s," describe these i	new services on Schedule C)	,	,
3	servi	ces?	se conducting, or make sigr	nificant changes in how it conduct		s 🗸 No
4	Desci exper	ribe the organizationses Section 501(c	n's program service accomp c)(3) and 501(c)(4) organiz	olishments for each of its three l ations and section 4947(a)(1) t , and revenue, if any, for each pr	rusts are required to report the	
4a	(Code	e) (Expenses \$ 13	8,263 including grants of \$) (Revenue \$)
	DOZE CIRCI RELA ⁻ ARE F ONLIN	INS OF FREELANCE WRI ULATION) FOR ITS WEE TING TO ISRAEL, THE M PUBLISHING JNS NEWS	ITERS, PHOTOGRAPHERS AND GRA KLY ELECTRONIC FEED OF NEWS IDDLE EAST AND JUDAISM CURR MATERIAL ON A REGULAR WEEKL' EED TO PROVIDE UP-TO-DATE NEV	O FULL-TIME EDITORS AND ONE PART-T APHIC DESIGNERS JNS HAS SECURED BRIEFS AND ARTICLES, ANALYSIS AND ENTLY, 8 OF THE TOP 12 JEWISH PAPE Y BASIS JNS RECENTLY COMMENCED A WS, AND IT IS ABOUT TO LAUNCH ITS S	55 SUBSCRIBER NEWSPAPERS (REPR OPINION COLUMNS AND FEATURE AR RS BY CIRCULATION, IN ADDITION TO A DAILY FEED OF NEWS BRIEFS TO SU	ESENTING 550,000 CTICLES ABOUT SUBJECTS O 10 SMALLER PAPERS, BSCRIBERS HAVING AN
4b	(Code	e) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code	e) (Expenses \$	including grants of \$) (Revenue \$)
4d		er program services enses \$	(Describe in Schedule O)) (Revenue \$,
	(Γ×Þ	/спэсэ ф	including gra	шеэ огр	/ (Nevenue p	,

Total program service expenses►\$ 4e

138,263

			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? <i>If</i> "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		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		No
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
С	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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI , XII , and $XIII$	12a		No
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, XII, and XIII 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, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part 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	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		No
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 hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)		
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	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? If "Yes," complete Schedule L, Part I	25b	No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes,"</i> complete Schedule L, Part III	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)		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part		
	IV	28a	No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	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 owner? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	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</i> "Yes," complete Schedule R, Part I	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b	No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	No

Part V	Statements	Regarding	Other II	S Filings	and Tay	Compliance
Pait V	Statements	Regarding	Office Th	G Fillings	allu lax	Compnance

'art	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
a E	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a	11		
h F	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
ם ב	1b	0		
	Old the organization comply with backup withholding rules for reportable payments to vendors and reportab			
_	gaming (gambling) winnings to prize winners?	. <u>1c</u>		Νo
	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			
	eturn	3		
b I1	f at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
N	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
	Old the organization have unrelated business gross income of \$1,000 or more during the			
	rear?	. За		Νo
b I1	f "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	. 3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authoi	rıty		
	over, a financial account in a foreign country (such as a bank account or securities	4a		No
	•			110
1	f "Yes," enter the name of the foreign country 🕨	ınts		
J	rec instructions for mining requirements for Form FD F 30 22 1, Report of Foreign Bunk and Finding Account			
ı V	Nas the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b D	Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	[?] 5b		Νo
c It	f "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
	f "Yes," did the organization include with every solicitation an express statement that such contributions of the	or gifts 6b		
o	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	and 7a		
	services provided to the payor?			
b I	f "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
	Old the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requ	ııred to 7c		
	f "Yes," indicate the number of Forms 8282 filed during the year	/ / /		
u i	74			
	Old the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
	Old the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u> </u>		
	f the organization received a contribution of qualified intellectual property, did the organization file Form 88 required?	899 as 7g		
	f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization f			
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.			
	he supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Old the organization make any taxable distributions under section 4966?	9a		
	Old the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	nitiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	acilities			
L S	Section 501(c)(12) organizations. Enter			
a G	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
S	sources against amounts due or received from them)......... <mark>11b</mark>			
2a S	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b It	f "Yes," enter the amount of tax-exempt interest received or accrued during the			
	/ear Continue FO1(a)(30) qualified nonrestit books incure and incure			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	s the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
q	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organ	nization 13a		
	illocated to each state	13a		
	Enter the aggregate amount of reserves the organization is required to maintain by he states in which the organization is licensed to issue qualified health plans			
	Inter the aggregate amount of reserves on hand			
	13c			
	Old the organization receive any payments for indoor tanning services during the tax year?	. 14a		Νo
b It	f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	. 14b	, 1	

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.

Chack if Schadula O	contains a response to any	guestion in this Bart VI						,
Check ii Schedule O	contains a response to any	question in this Part VI					. *	

	ection A. Governing Body and Management		•••				
	ceton A. Governing body and management		Yes	No			
1 a	Enter the number of voting members of the governing body at the end of the tax vear						
b	year						
U	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		No			
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		No			
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						
а	The governing body?	8a	Yes				
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9							
Se	ection B. Policies (This Section B requests information about policies not required by the Internal						
Re	evenue Code.)			•			
			Yes	No			
	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		No			
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No			
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b					
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					
13	Did the organization have a written whistleblower policy?	13		No			
14							
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?						
а	The organization's CEO, Executive Director, or top management official	15a		No			
ь	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)						
	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					
	ection C. Disclosure						
17							
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 V Upon request

- 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. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 RIVET CPA LLC **54 JACONNET ST**

NEWTON, MA 02461 (617)614-9153

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

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

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

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

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

Check this box if neither the organ	Ization nor any re	lated o	rganı	zatı	ons	compe	nsat	ed any current or fo	ormer officer, direct	or, or trustee
(A) Name and Title	(B) A verage hours per week (describe	unles an	on (d e tha	n on son er aı	e bo ıs bo nd a	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Former Highest compensated employee Key employee Officer			MISC)	related organizations	
(1) JOSHUA W KATZEN PRESIDENT	5 00	х		х				0	0	0
(2) AMELIA KATZEN TREASURER	10 00	х		Х				0	0	0
(3) RUSSEL PERGAMENT		х						0	0	0

\$100,000 of compensation from the organization \blacktriangleright

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

	(A) Name and Title	(B) Average hours per week (describe hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					•	Repo compe fror organiz	D) ortable onsation on the ation (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)		(F) Estima amount o compens from t rganizati	ted fother ation he on and
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			Miscy		organiza	
1b	Sub-Total				_	_		<u> </u> ▶						
c	Total from continuation sheets	to Part VII, Sec	tion A	· ·	<u> </u>	<u> </u>		F						
d	Total (add lines 1b and 1c) .							▶						
2	Total number of individuals (incl \$100,000 of reportable compen					ted	above) who	receive	d more tha	an	·		
3	Did the organization list any form on line 1a? If "Yes," complete Sch.					ey e	mploy	ee, o	or highest	: compens	ated employee		Yes	No
4	For any individual listed on line 1 organization and related organizati	La, is the sum of	f report	able	com							3		No No
5	Did any person listed on line 1a services rendered to the organiz											5		No No
Se	ction B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio												
	Nan	(A) ne and business add	dress							Desc	(B) ription of services	\Box	(C) Compen	
	Cotal number of independent cont			-41		1						\perp		

Part V	7111	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a	_			
亞美	ь	Membership dues 1b				
ರ್ಹ	l c	Fundraising events 1c	-			
£			-			
ਰੂ <u>ਵ</u>	d		-			
≨ેં≣	e	Government grants (contributions) 1e	_			
<u>\$</u> 2	f	All other contributions, gifts, grants, and 1f 100				İ
돌		similar amounts not included above	-			
≣ੂਙ	g	Noncash contributions included in				
5 Z	h	Innes 1a-1f \$ Total. Add lines 1a-1f	280,100			
ပဏ	_ n	Total. Add lilles 1a-11	200,100			
gg.		Business Code				
릹	2a					
æ æ	ь					
ου O	_					
Ģ Se	C					
Ř	d					
Ë	e					7
<u> </u>	f	All other program service revenue				
Program Serwce Revenue		Tabel Addings 2 26				
	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest				
		and other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds •				
	5	Royalties				
		(ı) Real (ıı) Personal				
	6a	Gross rents				
	ь	Less rental				
		expenses Rental income	_			
	C	or (loss)				
	d	Net rental income or (loss)				
		(ı) Securities (ıı) Other				
	7a	Gross amount from sales of				
		assets other				
	١.	than inventory				
	Ь	Less cost or other basis and				
		sales expenses				
	C	Gain or (loss)				
	d	Net gain or (loss)				
	8a	Gross income from fundraising				
÷		events (not including				
₽		of contributions reported on line 1c)				
Other Revenue		See Part IV, line 18				
L		а				
<u> </u>	ь	Less direct expenses b				
ŏ	c	Net income or (loss) from fundraising events	7			
	9a	Gross income from gaming activities				
		See Part IV, line 19				
		a	_			
	ь	Less direct expenses b	_			
	С	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less				
		returns and allowances .				
	.	a	4			
	Ь	Less cost of goods sold b	4			
	С	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11a					<u> </u>
	ь					
	c					
	, ,	All other revenue	+			
	"		+			
	e	Total. Add lines 11a-11d				
	12	Total revenue. See Instructions				
	12	Total revenue. See Instructions	280,100			

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) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

12 Advertising and promotion 5,121 5,121 13 Office expenses		leek it senedule of contains a response to any question in this rate ix		 	· · · · · · · · · · · · · · · · · · ·	
in the United States See Part IV, line 21 2 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, line 22 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 6 Compensation of current officers, directors, trustees, and described in section 4958(f(11)) and persons (as defined under section 4958(f(11)) and persons described in section 4958(f(13)) seed in section 4958(f(11)) and persons described in section 4958(f(11)) and persons described in section 4958(f(11)) and persons described in section 4938(f(11)) and persons described in se				Program service	Management and	(D) Fundraising expenses
United States. See Part IV, line 22 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 not included above, to disqualified persons (as defined under section 4958f(s).1) and persons described in	1					
organizations, and individuals outside the United States See Part IV, lines 15 and 16 depends on the content of	2					
Compensation of current officers, directors, trustees, and key employees	3	organizations, and individuals outside the United				
Compensation of current officers, directors, trustees, and key employees .	4	Benefits paid to or for members				
6 Compensation not included above, to disqualified persons (as defined under section 4958(c)(3)(8)		Compensation of current officers, directors, trustees, and				
### 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) ### 9 Other employee benefits	6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons				
Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 3,382 3,382 3,382 10 Payroll taxes 6,162 6,162 11 Fees for services (non-employees)	7		40.808	40.808		
9 Other employee benefits		Pension plan contributions (include section 401(k) and section	43,030	43,030		
10 Payroll taxes 6,162 6,162 6,162	9	Other employee benefits	3,382	3,382		
### Amangement	10					
### Accounting			1,132	-,_32		
b Legal			1 906	2 629	2 250	
c Accounting	_		<u> </u>	· ·		
Lobbying			<u> </u>	14,942		
Professional fundraising See Part IV, line 17	_		1,500		1,500	
Total functional expenses Si,308 43,184 8,124 12 Advertising and promotion Si,121 Si,1						
Signature Sign						
12	f	-				
13 Office expenses 2,669 2,669 14 Information technology 2,669 2,669 15 Royalties 4,389 4,389 16 Occupancy 4,389 4,389 17 Travel 5,583 5,583 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 5,583 5,583 19 Conferences, conventions, and meetings 6 6 20 Interest 6 6 21 Payments to affiliates 7 7 22 Depreciation, depletion, and amortization 7 295 295 24 Other expenses I temize expenses not covered above (List miscellaneous expenses in line 24f if line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) 6 a 6 6 6 b 7 7 7 c 7 7 7 d 7 7 7 e 7 7 7 d 7 7 7 7 d	g		51,308	43,184	8,124	
14 Information technology 2,669 2,669 15 Royalties . . 16 Occupancy . 4,389 4,389 17 Travel . 5,583 5,583 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . 19 Conferences, conventions, and meetings . . 20 Interest . . 21 Payments to affiliates . . 22 Depreciation, depletion, and amortization . . . 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) . . a b c <td>12</td> <td>Advertising and promotion</td> <td>5,121</td> <td>5,121</td> <td></td> <td></td>	12	Advertising and promotion	5,121	5,121		
15 Royalties	13	Office expenses				
16 Occupancy	14	Information technology	2,669	2,669		
Travel	15	Royalties				
Payments of travel or entertainment expenses for any federal, state, or local public officials	16	Occupancy	4,389	4,389		
state, or local public officials	17	Travel	5,583	5,583		
20 Interest	18					
21 Payments to affiliates	19	Conferences, conventions, and meetings				
Depreciation, depletion, and amortization	20	Interest				
Insurance	21	Payments to affiliates				
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) a b c d e f All other expenses Total functional expenses. Add lines 1 through 24f 150,245 138,263 11,982	22	Depreciation, depletion, and amortization				
miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) a b c d e f All other expenses Total functional expenses. Add lines 1 through 24f 150,245 138,263 11,982	23	Insurance	295	295		
b	24	miscellaneous expenses in line 24f If line 24f amount exceeds 10% of				
c d d d e d f All other expenses 25 Total functional expenses. Add lines 1 through 24f 150,245 138,263 11,982						
d e f All other expenses 25 Total functional expenses. Add lines 1 through 24f 150,245 138,263 11,982	b					
e All other expenses 25 Total functional expenses. Add lines 1 through 24f 150,245 138,263 11,982	С					
f All other expenses Total functional expenses. Add lines 1 through 24f 150,245 138,263 11,982	d					
25 Total functional expenses. Add lines 1 through 24f 150,245 138,263 11,982	е					
	f	All other expenses				
26 Joint costs. Check here ▶ ☐ If following	25	Total functional expenses. Add lines 1 through 24f	150,245	138,263	11,982	0
SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	26	organization reported in column (B) joint costs from a				

Pa	irt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1	129,855
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key highest compensated employees Complete Part II of	y employees, and			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section persons described in section $4958(c)(3)(B)$ Complete Part II of				
60		Schedule L		6		
Assets	7	Notes and loans receivable, net			7	
88	8	Inventories for sale or use			8	_
•	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a			
	ь	Less accumulated depreciation	10ь		10 c	
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		0	16	129,855
	17	Accounts payable and accrued expenses .			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
ر. م	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
æ		persons Complete Part II of Schedule L			22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties .	•		23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related the and other liabilities not included on lines 17-24) Complete Part X of D			25	
	26	D		0	26	0
	20	Organizations that follow SFAS 117, check here ► ✓ and complete	lings 27		20	
ф		through 29, and lines 33 and 34.	illes 27			
or Fund Balance	27	Unrestricted net assets			27	129,855
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and collines 30 through 34.	mplete			
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
ASS	32	Retained earnings, endowment, accumulated income, or other funds			32	
Net	33	Total net assets or fund balances		0	33	129,855
Z	34	Total liabilities and net assets/fund balances		0	34	129 855

Pa	Check if Schedule O contains a response to any question in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7	280,100	
2	Total expenses (must equal Part IX, column (A), line 25)	2			150,24	
3	Revenue less expenses Subtract line 2 from line 1	3			. 29,85!	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			(
5	Other changes in net assets or fund balances (explain in Schedule O)	5				
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))				129,855	
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No	
b	Were the organization's financial statements audited by an independent accountant?	[2b		No	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th 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	e •	2c			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were iss on a separate basis, consolidated basis, or both	ued				
	Separate basis Consolidated basis Both consolidated and separated basis					
За	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?		За		No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the recaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b			

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Name of the organization JEWISH NEWS SERVICE INC

Employer identification number 45-0949784

		D	f D	lalia Charitas Cta	/ A II				1 \ C		
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions										
	ngani.	nization is not a private foundation because it is (For lines 1 through 11, check only one box)									
1	<u> </u>	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).									
2	<u> </u>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	<u> </u>		ital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	ı	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	Г			local government o		al unit desci	rıbed ın secti	on 170(b)(1)(A)(v).		
7	ন	An orga describ	anization the	at normally receives (A)(vi) (Complete P	a substantia					om the gene	ral public
8	\vdash			: described in sectio i		A)(vi) (Com	nnlete Dart II	١			
9	<u>'</u>			at normally receives					uitions mam	harchin faac	and groce
9	,										
				rities related to its e							
		• • •		oss investment inco ganization after June				•		.ax) irom bus	sinesses
10	_				•			•	•		
10 11	<u>'</u>			ganized and operated							h - mm 6
11	ı	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									
е	Γ	other th		ox, I certify that the ion managers and ot							
f				received a written de	etermination	from the IRS	S that it is a ⁻	Type I. Type	II or Type I	II supportin	a organization.
			:his box					,, , ,,	,,		ř
g				2006, has the organ	ızatıon accep	oted any gift	or contribution	on from any	of the		
			ig persons?	rectly or indirectly c	ontrols author	eralone ort	naether with i	nersons des	cribed in (ii)		Yes No
				governing body of th				persons des	cribed iii (ii)	11g(
				er of a person descri			icion.			11g(
				lled entity of a perso			hava2			11g(i	
_				ng information about						119(···/
h		PTOVIGE	tile lollowii	ng miormation about	the supporte	eu organizati	on(s)				
				(iii)					1		
(i) Name of supported or ganization organization FIN lines 1-9 above or IRC section Type of organization in col (i) listed in your governing or IRC section Type of Is the organization in col (i) listed in your governing document?				(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga in the U	on in anized	(vii) A mount of support?			
				(see instructions))	Yes	No	Yes	No	Yes	No	1
				,,,							
ota											

instructions

	Support Schedule							
	(Complete only if younglete only if you							
S	ection A. Public Support	, organization i	iano to quamy t	ander the tests	noted belowy pr		mpiete i	<u> </u>
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	2011	(f) Total
1	membership fees received (Do not include any "unusual						280,100	280,100
2	grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its							
3	behalf The value of services or facilities furnished by a governmental unit to							
	the organization without charge							
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included or						280,100	280,100
	line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public Support. Subtract line 5 from line 4							280,100
S	ection B. Total Support				1			
	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(a) 2000	(d) 2010	(2) 2	011	(6) Total
	ın)	(a) 2007	(b) 2008	(c) 2009	(a) 2010	(e) 2		(f) Total
7	A mounts from line 4						280,100	280,100
8	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
	sources							
9	Net income from unrelated							
	business activities, whether or not the business is regularly							
	carried on							
10	Other income (Explain in Part							
	IV) Do not include gain or loss							
	from the sale of capital assets							
11	Total support (Add lines 7							280,100
12	through 10) [Gross receipts from related activiti	es.etc (See inst	tructions)			12		
13	First Five Years If the Form 990 is			I third fourth or i	fifth tay vear as a		l 3) organiz	ation
	check this box and stop here			.,	Then tax year as a			► [
	ection C. Computation of Pub Public Support Percentage for 201			11 (5)		T		
14 15	Public Support Percentage for 201	-		11 Column (1))		14		100 000 %
				van lina 12 and	lina 1.4 ia 22 1/20	15	a book t	hie hov
тоа	33 1/3% support test—2011. If the and stop here. The organization qua				iine 14 is 33 1/3%	o or more	е, спеск с	nis dox ► ▼
b	33 1/3% support test—2010. If the				a, and line 15 is	33 1/3%	or more,	. ,
	box and stop here. The organization							► □
17a	10%-facts-and-circumstances test							
	is 10% or more, and if the organiza in Part IV how the organization mee							ed
	organization		23	= 3.9=	1	,	,	ĕ ⊢
b	10%-facts-and-circumstances test							
	15 is 10% or more, and if the organization in Part IV how the organization							
10	supported organization	uan did not about	o hav an line 12	160 166 17		hav ard		▶ ┌

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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 (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135039012

OMB No 1545-0047

2011

Open to Public Inspection

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.

Name of the organization JEWISH NEWS SERVICE INC

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

45-0949784

ldentifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	SINCE ITS LAUNCH IN SEPTEMBER 2011, JNS HAS HIRED TWO FULL-TIME EDITORS AND ONE PART-TIME ASSISTANT EDITOR, CREATED A WEBSITE, AND ENGAGED DOZENS OF FREELANCE WRITERS, PHOTOGRAPHERS AND GRAPHIC DESIGNERS JNS HAS SECURED 55 SUBSCRIBER NEWSPAPERS (REPRESENTING 550,000 CIRCULATION) FOR ITS WEEKLY ELECTRONIC FEED OF NEWS BRIEFS AND ARTICLES, ANALYSIS AND OPINION COLUMNS AND FEATURE ARTICLES ABOUT SUBJECTS RELATING TO ISRAEL, THE MIDDLE EAST AND JUDAISM CURRENTLY, 8 OF THE TOP 12 JEWISH PAPERS BY CIRCULATION, IN ADDITION TO 10 SMALLER PAPERS, ARE PUBLISHING JNS NEWS MATERIAL ON A REGULAR WEEKLY BASIS JNS RECENTLY COMMENCED A DAILY FEED OF NEWS BRIEFS TO SUBSCRIBERS HAVING AN ONLINE PRESENCE AND A NEED TO PROVIDE UP-TO-DATE NEWS, AND IT IS ABOUT TO LAUNCH ITS SOCIAL MEDIA STRATEGY FOR ATTRACTING A YOUNGER DEMOGRAPHIC TO ITS UPDATED WEBSITE.
ANY SIGNIFICANT NEW PROGRAM SERVICES NOT LISTED ON A PRIOR RETURN	FORM 990, PAGE 2, PART III, LINE 2	FIRST YEAR FILING NO PRIOR RETURN FILED
FIRST ACCOMPLISHMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4A	YOUNGER DEMOGRAPHIC TO ITS UPDATED WEBSITE
RELATED PARTY INFORMATION AMONG OFFICERS	FORM 990, PAGE 6, PART VI, LINE 2	JOSH KATZEN AMELIA KATZEN PRESIDENT TREASURER SPOUSE
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	NO REVIEW WAS OR WILL BE CONDUCTED
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	NO DOCUMENTS AVAILABLE TO THE PUBLIC

Additional Data

Software ID: Software Version:

EIN: 45-0949784

Name: JEWISH NEWS SERVICE INC

Form 990, Special Condition Description:

Special Condition Description