

Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-1150

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

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

A For the 2013 calendar year, or tax year beginning 07/01/13, and ending 06/30/14

B Check if applicable:

- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

C Name of organization
Massachusetts Community & Banking Council, Inc.

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
P.O. Box 45578

City or town, state or province, country, and ZIP or foreign postal code
Somerville MA 02145

D Employer identification number

04-3093735

E Telephone number

800-982-8268

F Group Exemption Number ▶

G Accounting Method: Cash Accrual Other (specify) ▶ _____

I Website: ▶ **mcbc.info**

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

J Tax-exempt status (check only one) — 501(c)(3) 501(c) (**6**) ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

▶ \$ **103,051**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	102,650
	4 Investment income	4	401
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a Gross sales of inventory, less returns and allowances	7a		
b Less: cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	103,051	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	85,508
	13 Professional fees and other payments to independent contractors	13	52,751
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe in Schedule O)	16	10,214
17 Total expenses. Add lines 10 through 16	17	148,473	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-45,422
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	240,070
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	194,648

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2013)

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	241,653	22	162,100
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	917	24	33,101
25 Total assets	242,570	25	195,201
26 Total liabilities (describe in Schedule O)	2,500	26	553
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	240,070	27	194,648

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?

See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 See Schedule O			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a		129,035
29			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a		
30			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a		
31 Other program services (describe in Schedule O)			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a		
32 Total program service expenses (add lines 28a through 31a)	32		129,035

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated— see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Susanne Cameron Director	1.00	0	0	0
Chris Norris Director	1.00	0	0	0
Donna Haynes Treasurer	3.00	0	0	0
Karl C. Renney Director	1.00	0	0	0
Sonia Alleyne Director	1.00	0	0	0
Matthew Wally Chairman	1.00	0	0	0
Thomas Callahan Vice Chairman	1.00	0	0	0
Kevin B. Noyes Director	1.00	0	0	0
Karen Frederick Director	1.00	0	0	0
Marissa Guananja Clerk	1.00	0	0	0
J. Jean Horstman Director	1.00	0	0	0
Joseph Kriesberg Director	1.00	0	0	0

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	0	22
23 Land and buildings	0	23
24 Other assets (describe in Schedule O)	0	24
25 Total assets	0	25 0
26 Total liabilities (describe in Schedule O)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	0	27 0

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Sarita Ledani Director	1.00	0	0	0
Timothy Burrill Director	1.00	0	0	0
Robert Driscoll Director	1.00	0	0	0
Erika Eurus Director	1.00	0	0	0
Thais DeMarco Director	1.00	0	0	0
Sarah Lamitie Director	1.00	0	0	0
Jesus Gerena Director	1.00	0	0	0
Emily Morris Litonjua Director	1.00	0	0	0

Part V

Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

Form 990-EZ (2013) Part V Other Information. Questions 33-45b regarding significant activities, changes, unrelated business income, political expenditures, borrowing, and tax shelter transactions. Includes state information for MA and foreign account details.

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X

Part VI Section 501(c)(3) organizations only
 All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.
 Check if the organization used Schedule O to respond to any question in this Part VI

		Yes	No
47	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		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?		X
49b	If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
N/A				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note. All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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

Sign Here Signature of officer: Donna Haynes Date: Treasurer
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name: Theresa J. Creeden Preparer's signature: Theresa J. Creeden Date: 02/10/15 Check if self-employed PTIN: P00747568
 Firm's name: Sandberg & Creeden, P.C. Firm's EIN: 04-3195921
 Firm's address: 331 Page St Ste 2 Stoughton, MA 02072-1172 Phone no.: 781-344-0850

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

Name of the organization

Massachusetts Community & Banking Council, Inc.

Employer identification number

04-3093735

Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	
Filing fees	\$ 85
Miscellaneous expenses	\$ 999
Office supplies	\$ 735
Post office box fees	\$ 463
Bank Fees	\$ 141
Dues	\$ 200
Payroll Processing	\$ 1,357
Website dev and maintenance	\$ 2,050
Telecommunications	\$ 128
Travel	\$ 2,519
Insurance	\$ 1,100
Non-investment Depreciation	\$ 437
Total	\$ 10,214

Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beg. of Year	End of Year
Accounts Receivable	\$ 0	\$ 30,000
Prepaid Expenses and Deferred Charges	\$ 917	\$ 917
Computers	\$ 0	\$ 2,621
Less Accumulated Depreciation	\$ 0	\$ 437
Total	\$ 917	\$ 33,101

Name of the organization

Massachusetts Community & Banking

Employer identification number

04-3093735

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description	Beg. of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 2,500	\$ 553

Form 990-EZ, Part III - Primary Exempt Purpose

To bring together community organizations and financial institutions to affect positive change in the availability of credit and financial services across Massachusetts by encouraging community investment in low- and moderate-income and underserved neighborhoods.

Form 990-EZ, Part III, Line 28 - First Accomplishment

The Massachusetts Community & Banking Council (MCBC) works through its committees, each co-chaired by a representative of a financial institution and a community organization. Today, over 150 representatives of financial institutions, community organizations, public agencies and others participate in and/or receive regular information on MCBC committee activities. MCBC's 2013-2014 activities included:

- MCBC's Mortgage Lending Committee published Changing Patterns XX, its annual report on mortgage lending in the City of Boston, Greater Boston and Massachusetts. The report included 2012 data on lending by race and income and the comparative performance of major types of lenders. In addition to the data in the report, MCBC also provided data on lending in all Massachusetts cities and towns and in the state's fourteen counties in a set of on-line tables.

- MCBC's Mortgage Lending Committee hosted several panels and speakers,

Name of the organization

Massachusetts Community & Banking

Employer identification number

04-3093735

including; Q&A Session on CRA for Mortgage Lenders by the Division of Banks, Panel on Ability to Repay and the Qualified Mortgage with representatives from CATIC, MassHousing and Enterprise Bank, and a Presentation on the Federal Reserve Bank of Boston New England City Data online tool.

- MCBC's Mortgage Lending Committee continued to work with the Massachusetts Housing Partnership (MHP) Fund to track the performance of the SoftSecond Loan Program and the One Mortgage Program and to identify ways that financial institutions and community organizations can work together to avoid foreclosure. As of June 30, 2014, the delinquency rate for SoftSecond and One Mortgage loans was 5.29 percent, as compared to 4.35 percent for all Massachusetts prime loans and 7.11 percent of all Massachusetts mortgage loans.

* As a partner in the Massachusetts Homeownership Compact, which creates a shared goal between the state and its financial institutions of providing 10,000 mortgage loans over the next five years to first-time homebuyers with household incomes below the area median income, MCBC's Mortgage Lending Committee pledged to collect and distribute data on loans originated to first time homebuyers using either the ONE Mortgage Program or MassHousing mortgage. Data points will include race, income, and other household characteristics of borrowers, the type and location of homes purchased, and performance of loans including delinquency and foreclosure rates.

- MCBC's Economic Development Committee published Small Business Lending in

Name of the organization

Massachusetts Community & Banking

Employer identification number

04-3093735

Massachusetts, 2007-2012. This report is the fifteenth report on small business lending commissioned by MCBC. The report reviewed recent small business lending trends in Massachusetts with an emphasis on traditionally underserved areas across the state and reviewed changes in economic conditions and other factors that effect small business lending. The report primarily utilizes two sources of small business lending data: annual data collected under the Community Reinvestment Act (CRA) and quarterly Call Report data. The report analyzed 2012 lending data and provided comparisons to 2007 through 2012.

- MCBC's Economic Development Committee hosted presentations by several key partners, including the Federal Reserve Bank of Boston Working Cities Challenge, Massachusetts Technology Collaborative, The Boston Foundation and ACCION East. The Committee also held an event on November 13, 2014 titled, "The Road to Success: How Traditional and Non-Traditional Small Business Lenders can Travel it Together."

- MCBC, with the active participation and support of the Massachusetts Division of Banks, the Massachusetts Bankers Association and the Massachusetts Credit Union League, continued to promote Basic Banking for Massachusetts, a unique, voluntary effort to provide low-cost accounts to customers with limited banking needs. This year, 127 banks and credit unions qualified for participation under the Basic Banking for Massachusetts guidelines. MCBC continued to host the Basic Banking for Massachusetts website (www.basicbanking.org) enabling new customers to identify banks in their neighborhood that offer Basic Banking accounts. Flyers promoting the website are available on line for downloading in

Name of the organization

Massachusetts Community & Banking

Employer identification number

04-3093735

English, Spanish and Portuguese.

- MCBC continued to work with the Massachusetts Bankers Association, the Massachusetts Credit Union League, the Midas Collaborative and other organizations to provide significant support to the Massachusetts Financial Education Collaborative as part of MCBC's continuing effort to expand access to and to promote financial education across the state.

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2013

Attachment Sequence No. **179**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **Massachusetts Community & Banking Council, Inc.**

Identifying number
04-3093735

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		2,621	3.0	HY	S/L	437
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	437
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2013)

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
3-year GDS Property:								
1	Apple Computer	6/30/14	2,621		2,621	3 HY S/L	0	437
			<u>2,621</u>		<u>2,621</u>		<u>0</u>	<u>437</u>
	Grand Totals		2,621		2,621		0	437
	Less: Dispositions and Transfers		0		0		0	0
	Less: Start-up/Org Expense		0		0		0	0
	Net Grand Totals		<u>2,621</u>		<u>2,621</u>		<u>0</u>	<u>437</u>

Future Depreciation Report **FYE: 6/30/15**

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
Prior MACRS:					
1	Apple Computer	6/30/14	2,621	874	0
			<u>2,621</u>	<u>874</u>	<u>0</u>
	Grand Totals		<u>2,621</u>	<u>874</u>	<u>0</u>

Federal Statements

Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

<u>Description</u>	<u>Amount</u>
Membership dues	\$ 102,650
Total	\$ 102,650