DLN: 93493032004229 OMB No 1545-0047 **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

Department of the Treasury

foundations)

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www IRS gov/form990

Interna	l Revenue	Service	P Information about	Tomi yyo ana ito motractions	15 GC <u>177777 2</u>	9017	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Inspection
A F	or the 2	017 с <u>а</u>	ı lendar year, or tax year beginr	ning 07-01-2017 , and end	ng 06-30-	2018			
☐ Ad	ck ıf applı dress cha	nge	C Name of organization CFA SOCIETY BOSTON INC				D Employ 23-7069		ication number
□ Ini	me chang tıal return al return/ter		Doing business as						
☐ Am	nended rei plication p	turn	Number and street (or P O box if ma 2 FINANCIAL CTR STE 1010 60 S ST	ll is not delivered to street address)	Room/suite	1	E Telephon (617) 4	e number 26-0270	
			City or town, state or province, count BOSTON, MA 02111	ry, and ZIP or foreign postal code			G Gross re	ceipts \$ 2,	211,484
			F Name and address of principal	officer		H(a) Is	this a group re	turn for	
			JEANNE WOLF 2 FINANCIAL CTR STE 1010 60 S	ST			ibordinates?		□Yes 🗹 No
T Ta	x-exempt	ctatus	BOSTON, MA 02111				e all subordinat cluded?	es	☐ Yes ☐No
			☐ 501(c)(3) ☐ 501(c)(6) ◀(nsert no)	I		"No," attach a l roup exemption	•	•
) W	ebsite: i	> VV VV \	N CFABOSTON ORG			(0) (3)	oup exemption	Hullibei	
K Forr	n of orgar	nization	✓ Corporation ☐ Trust ☐ Assoc	ation ☐ Other ▶	L	Year of f	ormation 1946	M State MA	of legal domicile
Pa		Sumn							
Governance	TO PRC	BÉ A CO	ribe the organization's mission or MMUNITY OF INVESTMENT PROFE NAL DEVELOPMENT OF CURRENT	ESSIONALS WHICH PROMOTES	THE HIGH	EST ETH IT OF CL	ICAL STANDARI IENTS AND THE	OS, BEST BROADE	PRACTICES AND R INVESTING
9			box ▶ ☐ If the organization disc						•
ಸ ್	1		voting members of the governing				•	3	18
Activities &	1		findependent voting members of t ber of individuals employed in cale					5	17 5
Ć			ber of volunteers (estimate if nece		•	٠. ٠.		6	200
Q			lated business revenue from Part	**				7a	0
	b Ne	t unrela	ted business taxable income from	Form 990-T, line 34				7b	0
							Prior Year		Current Year
Ġ			ons and grants (Part VIII, line 1h)		1,554,8	0	0		
Rəvenue		9 Program service revenue (Part VIII, line 2g)							1,461,179 88,592
æ			enue (Part VIII, column (A), lines !		•		204,8		151,623
	1		nue—add lines 8 through 11 (mus		ıne 12)		1,909,2		1,701,394
			d sımılar amounts paıd (Part IX, co		•			0	O
	14 Be	nefits p	aid to or for members (Part IX, co	lumn (A), line 4)				0	0
æ	15 Sa	laries, c	ther compensation, employee ber	efits (Part IX, column (A), line	s 5–10)		700,7	793	685,981
Expenses	16a Pro	ofession	al fundraising fees (Part IX, colum	nn (A), line 11e)				0	0
Ä	1		ising expenses (Part IX, column (D), lin						
	1		enses (Part IX, column (A), lines 1	•	•		1,352,1	_	920,348
			nses Add lines 13–17 (must equa ess expenses Subtract line 18 fro			-	2,052,9 -143,6	_	1,606,329 95,065
<u>አ ኞ</u>	19 Ke	venue n	ss expenses Subtract line 10 ho		•	Beginn	ning of Current Y		End of Year
Net Assets or Fund Balances	l								
Ass I Ba			ts (Part X, line 16)		•	-	4,392,0	_	4,463,942
N S	1		ities (Part X, line 26)			-	488,6 3,903,3	_	341,760 4,122,182
Par			ture Block	THOM mile 20	•		3,903,.	007	4,122,102
Under knowl	r penaltie	es of pe d belief	rjury, I declare that I have examır , it is true, correct, and complete						
		*****					2018-12-04		
Sign		' Sıgnatuı	re of officer				Date		
Here	•		WOLF EXECUTIVE DIRECTOR print name and title						
			nt/Type preparer's name	Preparer's signature	Dat	ا م		PTIN	
Paid	4		SEPH M GISO CPA MST	JOSEPH M GISO CPA MST		8-12-04		200030126	;
	parer	Fir	m's name > JOHNSON O'CONNOR FE	RON & CARUCCI LLP	I		Firm's EIN ► 20-	3985546	
	Only	Fir	m's address ▶ 101 EDGEWATER DRIVE	SUITE 210			Phone no (781)	914-3400	
			WAKEFIELD, MA 01880						
May t	he IRS d	liscuss t	his return with the preparer show	n above? (see instructions) .				✓ Y	'es 🗌 No

Cat No 11282Y

Form **990** (2017)

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2017)					Page 2
Par	t IIII Statement	of Program Service	Accomplis	hments		
	Check if Sche	dule O contains a respor	nse or note to	any line in this Part III		🗹
1	Briefly describe the o	organization's mission				
					ST ETHICAL STANDARDS, BEST F	
PROF	ESSIONAL DEVELOPM	ENT OF CURRENT AND F	UTURE MEMBE	ERS TO BENEFIT CLIEN	TS AND THE BROADER INVESTI	NG PUBLIC
2	-	undertake any significar		- ·	hich were not listed on	
	the prior Form 990 o	r 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	ese new services on Sch	edule O			
3	Did the organization	cease conducting, or ma	ike significant	changes in how it cond	ucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedule	0			
4					largest program services, as me	
	Section 501(c)(3) an expenses, and reven	rs, the total				
	expenses, and reven	de, il aliy, lor each prog	iaiii seivice ie	ported		
4a	(Code) (Expenses \$	459,647	including grants of \$) (Revenue \$	277,913)
	See Additional Data					
4b	(Code) (Expenses \$	78,657	including grants of \$) (Revenue \$	343,366)
	See Additional Data					
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
	-					
	(Code) (Expenses \$		including grants of \$) (Revenue \$	839,900)
	MEMBERSHIP DUES					
4d		ces (Describe in Schedul	,) (B	030 000 \
	(Expenses \$		ding grants of	·) (Revenue \$	839,900)
<u>4e</u>	Total program serv	/ice expenses ►	538,3	04		Form 990 (2017)

or X as applicable

Checklist of Required Schedules

Page 3

No

Nο

Nο

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

14b

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16

17

18

19

Yes

Yes

Nο No Nο Yes Nο

Nο Nο Nο No Nο Nο Nο Nο Νo Nο No Nο Form **990** (2017) 20a

b

23

29

Νo

Nο

Page 4

Part IV	Checklist of Required Schedules (continued)

		Yes	No
Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

22 Yes 23

24a

24b

24c

24d

25a

25b

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28a

28b

28c

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33

34

35a

35h

36

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Yes

Form 990 (2017)

10 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Nο 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. Νo column (A), line 2? If "Yes," complete Schedule I, Parts I and III

current and former officers, directors, trustees, key employees, and highest compensated employees If "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? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

21

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

orm	990 (2017)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	. ,		
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 22			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		10
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation 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 facilities 10b			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them)			
.2a	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			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
c	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Page **6**

01111		,				rage
Par		Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	a "No"	respo	nse to lii	nes
		Check if Schedule O contains a response or note to any line in this Part VI				✓
Se		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 la	18			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or r committee, explain in Schedule O				
b		the number of voting members included in line 1a, above, who are independent	17			
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any o r, director, trustee, or key employee?	ther	2		No
3	Did the	e organization delegate control over management duties customarily performed by or under the direct supe cers, directors or trustees, or key employees to a management company or other person?	rvision	3		No
4	Did the	e organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did th	e organization become aware during the year of a significant diversion of the organization's assets? .	İ	5		No
6		e organization have members or stockholders?	.	6	Yes	
7a	Did th	e organization have members, stockholders, or other persons who had the power to elect or appoint one or	more			
		pers of the governing body?		7a	Yes	
b		ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, as other than the governing body?	or	7b		No
8		e organization contemporaneously document the meetings held or written actions undertaken during the ye llowing	ar by			
а	The go	overning body?		8a	Yes	
b	Each c	committee with authority to act on behalf of the governing body?	. [8b	Yes	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the ization's mailing address? If "Yes," provide the names and addresses in Schedule O	.	9		No
Se	ction	B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code	2.)	
					Yes	No
10a	Did th	e organization have local chapters, branches, or affiliates?		10a		No
b		s," did the organization have written policies and procedures governing the activities of such chapters, affilia ranches to ensure their operations are consistent with the organization's exempt purposes?	tes,	10b		
11a	Has th	ne organization provided a complete copy of this Form 990 to all members of its governing body before filing	the	11a	Yes	
b	Descri	be in Schedule O the process, if any, used by the organization to review this Form 990	f			
		e organization have a written conflict of interest policy? If "No," go to line 13	ŀ	12a	Yes	
		officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	i to	12b	Yes	
С	Did th	e organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe</i> lule O how this was done	ın	12c	Yes	
12		e organization have a written whistleblower policy?	}	13	Yes	
13		- ,	.			
14		e organization have a written document retention and destruction policy?		14	Yes	
15	persor	e process for determining compensation of the following persons include a review and approval by independing, comparability data, and contemporaneous substantiation of the deliberation and decision?	ent	_		
		rganization's CEO, Executive Director, or top management official		15a	Yes	
b		officers or key employees of the organization	ļ	15b	Yes	
		" to line 15a or 15b, describe the process in Schedule O (see instructions)				
16a		e organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a e entity during the year?	.	16a		No
b	ın join	s," did the organization follow a written policy or procedure requiring the organization to evaluate its particip t venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exe				
	status	with respect to such arrangements?		16b		
Se		C. Disclosure				
17		e States with which a copy of this Form 990 is required to be filed▶				
18	availal	n 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s ble for public inspection. Indicate how you made these available. Check all that apply	only)			
	□∘	wn website 🔲 Another's website 🗹 Upon request 🔲 Other (explain in Schedule O)				
19	policy,	be in Schedule O whether (and if so, how) the organization made its governing documents, conflict of intere , and financial statements available to the public during the tax year				
20		the name, address, and telephone number of the person who possesses the organization's books and record SOCIETY BOSTON INC 60 SOUTH STREET NO 1010 BOSTON, MA 02111 (617) 426-0270	is			
				E	orm 99 0	(2017

(10) STEPHEN PETERSEN CFA

(11) SCOTT STEWART CFA

(12) CHRISTINE TODD CFA

(13) EMERY TRAHANCFA

(14) MICHAEL TROTSKY CFA

(15) VITALY VEKSLER CFA

(16) PAMELA YANG CFA

(17) HEATHER YOUNG CFA

DIRECTOR

PAST CHAIR

DIRECTOR

DIRECTOR

DIRECTOR

PAST CHAIR

DIRECTOR

Part VII

0

0

0

Form 990 (2017)

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

- year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's **current** key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

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- 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
- compensated employees, and former such persons

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (E) (A) (B) (D) (F) (C) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation week (list person is both an officer from the from related compensation anv hours and a director/trustee) organization organizations from the for related (W- 2/1099-(W-2/1099organization and Highest or employee Individual to or director organizations MISC) MISC) 6 related Institutional 호 below dotted organizations employ 3 line) con trustee P pensat Ě 10.00 Х 2 00 0 2 00 (3) LISA L CHIOFFI CFA Х DIRECTOR 2 00 (4) HUGH CROWTHER DIRECTOR 5 00 (5) SUSAN FARRIS CFA Х Х 0 TREASURER 5 00 (6) ROB FERNANDEZ CFA X Х 0 CHAIR, EDUCATION & PROGRAMS 2.00 (7) LEAH HIRSHFIELD CFA Х DIRECTOR/SECRETARY 2 00 (8) GEORGE HOGUET CFA Х IMMEDIATE PAST CHAIR 5 00 (9) ERINN KING CFA Х n 0 X VICE CHAIR 2.00

(1) JEFF AUGUSTINE CFA CHATR (2) BRENT BELL CFA DIRECTOR

(A)

Name and Title

compensation from the organization ▶ 0

Part VII

(F) Estimated amount of other

(E)

Reportable

compensation

Page 8

		week (list any hours			n of	ficer	and a		f orgai	rpensi rom ti nizatio	ne n (W-	from relate organization	d ns	compen from	sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1	099-M	ISC)	(W- 2/1099 MISC)	3 -	organizat relat organiz	:ed
	EANNE WOLF	40 00	х		х						206,838		0		14,858
LALC	JTIVE DIRECTOR STEPHANIE FIELD		••••												
	DIRECTOR, LEARNING & OPERATIONS	40 00					×			:	L41,450		0		12,390
(20)	GEORGE DUDLEY	40 00													
	OF MARKETING & COMMUNICATIONS						×			:	120,004		0		11,458
1b 9	Sub-Total			<u>. </u>	<u>. </u>	-	<u> </u>						\top		
_	otal from continuation sheets to Part	•				•	• 🗀								
d 7	otal (add lines 1b and 1c)			•		•	•			468,29	2		0		38,706
2	Total number of individuals (including but of reportable compensation from the organization)		those li	sted a	abov	e) v	vho re	ceive	ed mo	re tha	n \$100	,000			
														Yes	No
3	Did the organization list any former offic				emp	loye	e, or h	nghe	est cor	npens	ated er	nployee on			
	line 1a? If "Yes," complete Schedule J for	such individual		•	•	•		•	•		•		3		No
4	For any individual listed on line 1a, is the organization and related organizations gr individual											he 	4	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
5	Did any person listed on line 1a receive o	r accrue compo	neation	from	-		rolator	- l or-		tion o	· malisas	lual for	−	Yes	
5	services rendered to the organization? If '	,			,			-	•				5		No
Se	ction B. Independent Contractors														
1	Complete this table for your five highest of from the organization. Report compensation	compensated in ion for the caler	depend ndar ye	lent c ar en	ontr dıng	acto wit	rs tha h or w	t rec ithin	eived the o	more rganız	than \$: ation's	100,000 of cor tax year	npen	sation	
		(A) ousiness address										(B)		(C Compen	
	Na.He dild E											2. 23, 7,003		23111201	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

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

(C)

Position (do not check more

than one box, unless person

(D)

Reportable

compensation

(B)

Average

hours per

Part \		I Statement of	Revenue								rage 3
			e O contains	a respo	onse or note to an	y line in thi	s Part VII				<u> </u>
						(A Total re		(B) Related exemp function revenue	t n	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
10	1 a	Federated campaig	ns	1a		1	l	revenu	<u> </u>		
Contributions, Gifts, Grants and Other Similar Amounts	ı	b Membership dues		1 b							
		: Fundraising events		1c							
	١,	d Related organizatio	ns	1d							
		e Government grants (co	ontributions)	1e							
ns, Siri	1	All other contributions	, gıfts, grants,								
utio		and similar amounts n above	ot included	1f							
	و	Noncash contribution									
Cont and	١,	in lines 1a-1f \$ Total.Add lines 1a-1			_						
	ــــــــــــــــــــــــــــــــــــــ	Totali/(dd lilles 1d 1		• •	Busines	s Code				ı	
n e	22	EDUCATIONAL COURSE	c		Busines	611710	3	143,366	343,366		
3		MEETINGS	<u> </u>			611430		77,913	277,913		
3											
Ę.	c d										
ε	e			_			-	130,000	000 ===		
Program Service Revenue	f	All other program se	rvice revenue)		464 1==	8	39,900	839,900	1	
ğΪ	g	Total.Add lines 2a-2i	f		▶ 1	,461,179					
		Investment income (ii				r	106,14	5			106,145
		imilar amounts) . Income from investm				-					
		Royalties		-		▶	151,62	3			151,623
			(ı) Rea	ıl	(II) Personal						
	6a	Gross rents									
	b	Less rental expenses				-					
:	С	Rental income or (loss)									
	d	Net rental income o	r (loss)			7					
			(ı) Securi	ties	(II) Other						
	7a	Gross amount from sales of		192,537							
		assets other than inventory									
	b	Less cost or				-					
		other basis and sales expenses		510,090							
		Gain or (loss)		-17,553		_	17.55	2			17.55
		Net gain or (loss) . Gross income from f			•	_	-17,55	3			-17,553
	- Ca	(not including \$		of							
Other Revenue		contributions reporte See Part IV, line 18									
Re	b	Less direct expense	s	ь		_					
e	c	Net income or (loss)	from fundrais	sing ev	ents						
O.	9a	Gross income from g See Part IV, line 19		ies							
				a							
		Less direct expense		ь							
		Net income or (loss)		activiti	ies >	_					_
ľ	TU	Gross sales of invent returns and allowand	ces								
				a							
		Less cost of goods s		- b -							
ŀ		Net income or (loss) Miscellaneous		rinvent	Business Code						
Ì	11	а				1					
	b	,									
	c										
								1			
		All other revenue						1			
		Total. Add lines 11a			•						
	12	Total revenue. See	Instructions	• •	· · · · •		1,701,39	4 1	,461,179		0 240,215 Form 990 (2017)
											Form 990 (2017

	Part IX	Statement of	Functional Expenses
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orm 990 (2017)				Page 10
Part IX Statement of Functional Expenses section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nizations must com	plete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX		<u></u>	<u> </u>
Do not include amounts reported on lines 6b, 'b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	206,837			
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	384,524			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	24,422			
9 Other employee benefits	21,618			
10 Payroll taxes	48,580			
11 Fees for services (non-employees)				
a Management				
b Legal	41,806			
c Accounting	6,163			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	65,953			
L2 Advertising and promotion	20,990			
L3 Office expenses	22,881			
L4 Information technology	37,487			
L5 Royalties				
L 6 Occupancy	88,843			
L 7 Travel	37,445			
L8 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	11,962			
23 Insurance	8,820			
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 EXPENSE	318,556			
b FACILITY AND FOOD	87,717			
c PRACTICE EXAM	72,705			
d ANNUAL MEETING	21,649			
e All other expenses	77,371			
25 Total functional expenses. Add lines 1 through 24e	1,606,329			
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)				

1

Liabilities

Fund Balances

Assets or 30

Net

27

28

29

31

32

33

34

151,620

4.463.942

101,110

240.650

341,760

4,122,182

4,122,182

4.463.942

Form **990** (2017)

Page **11**

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

	(A) Beginning of year		End of year
Cash-non-interest-bearing	201,614	1	
Savings and temporary cash investments	76.094	2	

38.484 2 3 Pledges and grants receivable, net . . 3 69.393 4 124,033 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L

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) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Assets Notes and loans receivable, net . . Inventories for sale or use . 8 5.434 9 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

4.098 10a 259,841 basis Complete Part VI of Schedule D 238.994 26.951 20,847 b Less accumulated depreciation 10b 10c 4.012.514 4.124.860 11 Investments—publicly traded securities . 11 Investments—other securities See Part IV, line 11 . 12 12 13 13 Investments—program-related See Part IV, line 11 . 14 14 Intangible assets 15 15

Other assets See Part IV, line 11 . 16 **Total assets.**Add lines 1 through 15 (must equal line 34) . . . 17 Accounts payable and accrued expenses 18 Grants payable . . . 19 Deferred revenue . . . Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 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 . Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third parties,

23 24 25 and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 .

check here

and complete lines 30 through 34.

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

complete lines 27 through 29, and lines 33 and 34.

Unrestricted net assets

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Temporarily restricted net assets

Permanently restricted net assets

Organizations that do not follow SFAS 117 (ASC 958),

32 3,903,387 33 4.392.000 34

4,392,000

249,263

239.350

488.613

3.903.387

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

☐ Both consolidated and separate basis

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Consolidated basis

consolidated basis, or both Separate basis

Audit Act and OMB Circular A-133?

2b

2c

3a

3b

Yes

Nο

No

Form 990 (2017)

Additional Data

Software ID:

Software Version:

EIN: 23-7069432

Name: CFA SOCIETY BOSTON INC

Form 990 (2017)

ETHICAL PROFESSIONALS

Form 990, Part III, Line 4a:

CFA SOCIETY BOSTON AND ITS 5,800 MEMBERS REPRESENT THE 5TH LARGEST SOCIETY OF CFA INSTITUTE'S 150 CFA SOCIETIES GLOBALLY DELIVERING MEMBER VALUE REMAINS AT THE CORE OF WHAT THE SOCIETY OFFERS TO ITS MEMBERS FROM NETWORKING OPPORTUNITIES TO CAREER SERVICES TO COMMUNITY INVOLVEMENT TO BRANDING AND AWARENESS, THERE IS A WAY FOR EVERYONE TO GET INVOLVED AND REALIZE VALUE NETWORKING REMAINS ONE OF THE BIGGEST BENEFITS OF MEMBERSHIP, ACCORDING TO MEMBER SURVEYS OUR HOLIDAY AND SUMMER NETWORKING RECEPTIONS PROVE TO BE AMONG OUR MOST POPULAR EVENTS IN 2017, WE HOSTED FORMER CHAIR OF THE FEDERAL RESERVE, DR BEN BERNANKE, TO SPEAK OVER 1100 MEMBERS ATTENDED AND USED THAT AS AN OPPORTUNITY TO NETWORK AS WELL AS BUILD THEIR INVESTMENT PROFESSION KNOWLEDGE CAREER SERVICES ARE ALSO A SIGNIFICANT BENEFIT OF MEMBERSHIP CFA SOCIETY BOSTON OFFERS AN ONLINE TO BROADD. WHICH CONNECTS EMPLOYERS WITH POTENTIAL EMPLOYEES IT IS THE MOST CLICKED PAGE ON THE WERSTIFE CFA SOCIETY.

NETWORK AS WELL AS BUILD THEIR INVESTMENT PROFESSION KNOWLEDGE. CAREER SERVICES ARE ALSO A SIGNIFICANT BENEFIT OF MEMBERSHIP CFA SOCIETY BOSTON OFFERS AN ONLINE JOB BOARD, WHICH CONNECTS EMPLOYERS WITH POTENTIAL EMPLOYEES IT IS THE MOST CLICKED PAGE ON THE WEBSITE. CFA SOCIETY BOSTON ALSO OFFERS A MENTORSHIP PROGRAM, WHICH PAIRS INDUSTRY EXECUTIVES WITH YOUNG MEMBERS TO HELP GUIDE THEM ON THEIR JOURNEY THROUGH THE PROFESSION GIVING BACK TO THE COMMUNITY THROUGH FINANCIAL LITERACY IS AN IMPORTANT PART OF THE SOCIETY'S OUTREACH OVER 200 VOLUNTEERS REGULARLY DELIVER FINANCIAL EDUCATION PRESENTATIONS TO UNDERSERVED CONSTITUENTS. BRANDING AND AWARENESS REMAINS AT THE CORE OF THE ORGANIZATION AND WHAT THE CFA CHARTER STANDS FOR A VERY SUCCESSFUL REBRANDING CAMPAIGN IN 2017 RESONATED WELL WITH MEMBERS AND THE GENERAL INVESTING PUBLIC, WITH MEMBER AND PUBLIC PERCEPTION RECEIVING HIGH MARKS THE ORGANIZATION CONTINUES TO GROW AND DIVERSIFY, AND OUR WOMEN IN INVESTMENT MANAGEMENT INITIATIVE HAS INTRODUCED A CONVERSATION AROUND DIVERSITY AND INCLUSION IN THE INVESTMENT PROFESSION GROWING AND PROMOTING THE PROFESSION REMAINS IMPORTANT AND RELEVANT, ESPECIALLY AT A TIME WHEN AUTOMATED TECHNOLOGIES ARE BECOMING MORE ADVANCED. WE HAVE AN EXTENSIVE UNIVERSITY OUTREACH PROGRAM TO ENSURE THE NEXT GENERATION OF PROFESSIONALS IS WELL-INFORMED AND EDUCATED. OVERALL THE SOCIETY TO FURTHER THEIR CARFERS AND RECOME BETTER AND MORE.

CFA SOCIETY BOSTON OFFERS A LEARNING ENVIRONMENT FOR MEMBERS TO FURTHER THEIR INVESTMENT PROFESSION COMPETENCY FEATURING THOUGHT LEADERS FROM ALL ASPECTS OF INVESTMENT MANAGEMENT, THE SOCIETY'S CONFERENCES AND SEMINARS ARE EDUCATIONAL, THOUGHT-PROVOKING AND EXTREMELY WELL-REGARDED BY MEMBERS IN THE LAST FISCAL YEAR, THE SOCIETY OFFERED A FULL-LENGTH ESG (ENVIRONMENTAL, SOCIAL AND GOVERNANCE) INVESTING CONFERENCE AS ESG BECOMES MORE RELEVANT DUE TO INVESTOR DEMANDS. CFA SOCIETY BOSTON HELPS ITS MEMBERS REMAIN RELEVANT TO CLIENTS BY FEATURING ESG EXPERTS FROM AROUND THE GLOBE ANOTHER AREA CFA SOCIETY BOSTON HAS BEEN CUTTING-EDGE FOR ITS MEMBERS HAS BEEN THROUGH OUR THOUGHT LEADERSHIP IN FINTECH OUR INAUGURAL FINTECH CONFERENCE WAS HELD THIS YEAR, AND IT FEATURED ACADEMICS, TECHNOLOGY EXECUTIVES AND

Form 990, Part III, Line 4b:

INVESTMENT PROFESSIONALS DISCUSSING THE INTERSECTION OF FINANCE AND TECHNOLOGY IN ADDITION TO CONFERENCES. THE SOCIETY ALSO OFFERS INDUSTRY ANALYSIS SEMINARS. CFA CANDIDATE PREP. AND ONLINE LEARNING OPPORTUNITIES THROUGH WEBINARS AND VIDEOS OUR CFA PRACTICE EXAM IS USED BY CFA CANDIDATES GLOBALLY TO PREPARE FOR THE CFA EXAM WE ALSO WORK WITH EDUCATIONAL PARTNERS TO DELIVER CANDIDATE EXAM PREP TO LOCAL CANDIDATES OUR ANNUAL CIO ROUNDTABLE FEATURES INVESTMENT EXECUTIVES FROM ASSET OWNERS AND ASSET MANAGERS DISCUSSING TRENDS IN INVESTMENTS AND ASSET

ALLOCATION EDUCATION REMAINS AT THE CORE OF WHO WE ARE AND WHAT WE DO CONTINUING EDUCATION NOT ONLY MAKES THE PROFESSIONAL BETTER. IT MAKES FOR A BETTER PROFESSION

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Political Campaign and Lobbying Activities

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

DLN: 93493032004229

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

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

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Inspection

Schedule C (Form 990 or 990-EZ) 2017

Cat No 50084S

f the	Section 527 organizations Complet e organization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 99 t have filed Form 5768 (election under si t have NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax s), then	90-EZ, Part VI, Iir ection 501(h)) Co der section 501(h	ne 47 (Lobbying omplete Part II-A)) Complete Part	Actıvit Do not II-B D	i es), i comp o not	olete Part II-E complete Pa	art II-A
	me of the organization	·		Emplo	yer id	entif	ication nun	ıber
CFA	A SOCIETY BOSTON INC			23-70	59432			
Par	t I-A Complete if the organ	nization is exempt under sectio	n 501(c) or is			niza	tion.	
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political cam	npaign activities in	n Part IV (see inst	ruction	s for	definition of	
2	Political campaign activity expend	litures (see instructions)			>	\$		
3	Volunteer hours for political camp	paign activities (see instructions)				_		
Par	t I-B Complete if the organ	nization is exempt under sectio	n 501(c)(3).					
1	Enter the amount of any excise ta	ax incurred by the organization under se	ction 4955		>	\$		
2	•	ax incurred by organization managers ur			>	\$		
3	•	tion 4955 tax, did it file Form 4720 for t					☐ Yes	
4-	Was a correction made?		•				_	_
4a	was a correction mader						☐ Yes	∐ No
b	If "Yes," describe in Part IV		- 501/->		4/->/	-		
		nization is exempt under sectio			1(c)(.	·).		
1	·	ed by the filing organization for section	•		•	\$_		
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other or	ganizations for se	ection 527 exemp	t ▶	\$_		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and on	Form 1120-POL,	line 17b	>	\$		
4	Did the filing organization file For	m 1120-POL for this year?				•	☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere se (PAC) If additional space is needed,	unt paid from the ed to a separate p	filing organizatio olitical organizatio	n's fun	ds Al	so enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount pa filing organiz- funds If none -0-	ation's		(e) Amount (contributions) and promp directly delived separate programments or an intermediate for the control of the control	s received otly and vered to a political If none,
L								
2								
3								
1								
5								
5								

Calendar year (or fiscal year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Schedule C (Form 990 or 990-EZ) 2017

Return Reference

activity

Volunteers?

1

b

(b)

Amount

(a)

No

Yes

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Yes 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Yes Did the organization agree to carry over lobbying and political expenditures from the prior year? No Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year c Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

SCHEDULE D Supplemental Fina

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2017

DLN: 93493032004229

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

(Form 990)

► Attach to Form 990.

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

Name of the organization **Employer identification number** CFA SOCIETY BOSTON INC 23-7069432 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 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 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 Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 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 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenue included on Form 990, Part VIII, line 1 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) 2017

Par	t IIII	Organizations Maintaining Col	lections of Art,	Histori	cal Ti	reasu	ires, or	Other	Similar A	ssets (continued	1)
3		the organization's acquisition, accession (check all that apply)	n, and other records	, check	any of	the fo	llowing th	nat are a	sıgnıfıcant ı	use of its	s collectio	n
а		Public exhibition		d		Loan	or excha	nge prog	rams			
b		Scholarly research		e		Othe	r					
С		Preservation for future generations										
4	Provid Part >	de a description of the organization's col XIII	lections and explain	how the	ey furth	ner the	e organiza	ation's ex	empt purpo	se in		
5		ng the year, did the organization solicit o is to be sold to raise funds rather than to							ılar	□ Ye	es 🗆	No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		rm 990	, Part	IV, lı	ne 9, or	reporte	d an amou	unt on I	Form 99	0, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	diary for	contril	bution	s or othe	r assets I	not	☐ Y €	es 🗌	No
b	If "Y∈	es," explain the arrangement in Part XIII	and complete the f	ollowing	table				Α	mount		
С	Begin	nning balance						1c				
d	Addıt	ions during the year						1d				
е	Dıstrı	butions during the year						1e				
f	Endın	ng balance						1f				
2 a	Did th	he organization include an amount on Fo	rm 990, Part X, line	21, for	escrow	or cu	stodial ad	count lia	bility?	□ Ye	s 🗆	No
b	If "Yo	es," explain the arrangement in Part XIII	Check here if the	vnlanat	on has	heen	provided	l in Part S	(111		Г	7
	irt V	Endowment Funds. Complete if					'					
		znaowniene i anabi complete n	(a)Current year		rior year				(d)Three ye		(e)Four y	ears back
1a	Beginn	ing of year balance	,				, , ,					
b	Contrib	outions										
С	Net inv	estment earnings, gains, and losses										
d	Grants	or scholarships										
e		expenditures for facilities ograms										
f	Admını	strative expenses										
g	End of	year balance										
2	Provid	de the estimated percentage of the curre	ent year end balance	e (line 1	g, colui	mn (a))) held as	;				
а	Board	d designated or quasi-endowment 🕨										
b	Perm	anent endowment ►										
С	Temp	orarily restricted endowment >										
	The p	percentages on lines 2a, 2b, and 2c shou	ld equal 100%									
3a	organ	here endowment funds not in the posses nization by	sion of the organiza	tion tha	t are h	eld an	d adminis	stered fo	r the		Ye	s No
		nrelated organizations			•						a(i)	
b		elated organizations es" on 3a(ii), are the related organization	s listed as required	on Scho	 dulo P	•				<u> </u>	a(ii) 3b	
4		ribe in Part XIII the intended uses of the				•	•			' L	30	
	rt VI	Land, Buildings, and Equipmen										
		Complete if the organization answ		rm 990	, Part	IV, lı	ne 11a.	See For	m 990, Pa	art X, lii	ne 10.	
	Descri	iption of property (a) Cost or oth (investme		t or other	basis (d	other)	(c) Accu	ımulated o	epreciation		(d) Book v	alue
1a	Land											
b	Buildin	gs										
		nold improvements				6,909			4,957			1,952
		nent			17	79,136			160,241			18,895
	Other					73,796			73,796			0
		lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colui			10(c)) .		>			20,847

Part VII	Investments—Other Securities. Complete if the o	rganıza	tion ansv	vered "Yes" on For	m 990, Part IV, line 11b.	_
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value		Method of valuation end-of-year market value	
(1) Financia	l derivatives					
(2) Closely- (3)Other	held equity interests	· ·				
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	n (b) must equal Form 990, Part X, col (B) line 12)	•	,			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Forr	n 990, F	Part IV, lı	ne 11c. See Form	990, Part X, line 13.	
	(a) Description of investment	(b) B	ook value	(c) Cost or e	Method of valuation end-of-year market value	
(1)						
(2)						
(3)						
(4)						
(5) ————————————————————————————————————						
(6)						
(7)						
(8)						
(9)						
Part IX	n (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered 'Ye	▶ es' on For	m 990, Pa	rt IV, line 11d See F	Form 990, Part X, line 15	
(1)	(a) Description				(b) Book value	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15)				•	_
Part X	Other Liabilities. Complete if the organization answ See Form 990, Part X, line 25.	vered 'Y	es' on Fo	orm 990, Part IV, lı	ne 11e or 11f.	
1.	(a) Description of liability		(b) B	ook value		
(1) Federal I				240.650		
(2)	MEMBERSHIP DUES			240,650		
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25)	•		240,650		
	or uncertain tax positions. In Part XIII, provide the text of the 's liability for uncertain tax positions under FIN 48 (ASC 740)					7
or garrization	a nability for uncertain tax positions under FIN 46 (ASC 740)	CHECK	icic ii tile	text of the loothote i	nas been provided in Part AIII	_

Schedule D (Form 990) 2017

	Complete if the organi	ization answered 'Yes' on Form 990, Part	IV, li	ne 12a.		
1	Total revenue, gains, and other si		1			
2	Amounts included on line 1 but no					
а	Net unrealized gains (losses) on i					
b	Donated services and use of facili					
С	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 40	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem			Returi	n.
		ization answered 'Yes' on Form 990, Part	IV, l	ne 12a.		_
1	Total expenses and losses per aud	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25	ı			
а	Donated services and use of facili	ities	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, P	Part IX, line 25, but not on line 1:				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b 🔒 🔒	4a			
b	Other (Describe in Part XIII) .		4b			
c	Add lines 4a and 4b				4c	
5	Total expenses Add lines 3 and 4	4c. (This must equal Form 990, Part I, line 18) .		5	
Par	t XIII Supplemental Info	ormation				
Prov XI,	vide the descriptions required for Pa lines 2d and 4b, and Part XII, lines	art II, lines 3, 5, and 9, Part III, lines 1a and 4 s 2d and 4b Also complete this part to provide	4, Pari any a	t IV, lines 1b and 2b, Part idditional information	V, line	4, Part X, line 2, Part
	Return Reference		Ex	planation		
See A	Additional Data Table					

Page 4

Page 5		Schedule D (Form 990) 2017		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Additional Data

Software ID: Software Version:

EIN: 23-7069432

Name: CFA SOCIETY BOSTON INC

Supplemental Information

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	THE SOCIETY REGULARLY REVIEWS AND EVALUATES ITS TAX POSITIONS TAKEN IN ITS FILED RETURNS A ND RECOGNIZES THE BENEFIT FROM A TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE POSITION WOULD BE SUSTAINED UPON AUDIT BASED SOLELY ON THE TECHNICAL MERITS OF THE TAX POS ITION THE SOCIETY FILES A FEDERAL TAX RETURN THE STATUTE OF LIMITATIONS FOR THIS JURISDI CTION IS GENERALLY THREE YEARS THE SOCIETY HAS NO RETURNS UNDER EXAMINATION AS OF JUNE 30

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19303	32004	229
Schedule J		Co	mpensati	on Information	01	1B No	1545-0	0047
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.						alic
•	tment of the Treasury al Revenue Service	► Information at		(Form 990) and its instructions gov/form990.	is at		to Pul	
	ne of the organiz				Employer identificat			
CFA	SOCIETY BOSTON I	INC			23-7069432			
Pa	rt I Questi	ons Regarding Compensa	tion					
							Yes	No
1a				the following to or for a person liste y relevant information regarding the				
	First-class	s or charter travel		Housing allowance or residence for	personal use			
		companions	님	Payments for business use of perso				
		nification and gross-up payments	s L	Health or social club dues or initiati				
	□ Discretion	nary spending account	Ш	Personal services (e g , maid, chauf	feur, chef)			
b		xes in line 1a are checked, did th all of the expenses described abo		ollow a written policy regarding payn plete Part III to explain	nent or reimbursement	1b		
2				or allowing expenses incurred by all	. 1-3	2		
	directors, truste	ees, officers, including the CEO/E	xecutive Director	r, regarding the items checked in line	e Ia'			
3	organization's C	EO/Executive Director Check all	l that apply Don	d to establish the compensation of the check any boxes for methods CEO/Executive Director, but explain				
	✓ Compens	ation committee	✓	Written employment contract				
		ent compensation consultant	\checkmark	Compensation survey or study				
	✓ Form 990	of other organizations	\checkmark	Approval by the board or compensa	tion committee			
4	During the year related organiza		990, Part VII, Sed	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cont	trol pavment?			4a		No
b		r receive payment from, a suppl		fied retirement plan?		4b		No
c	•	r receive payment from, an equi	•	· ·		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	d provide the app	licable amounts for each item in Par	t III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9				
5	For persons liste		n A, line 1a, did t	the organization pay or accrue any				
а	The organization					5a		
a b	Any related orga					5b		
_	, -	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any				
а	The organization	n?				6a		
b	Any related orga					6b		
	If "Yes," on line	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Sectio escribed in lines 5 and 6 ⁷ If "Yes		the organization provide any nonfixe rt III	d	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," di	escribe	8		
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		
For F	Panerwork Redu	uction Act Notice, see the Ins	tructions for Fo	rm 990. Cat No 5	50053T Schedule J	(Forn	1990)	2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

			y Employees, and Hig					
instructions, on row (ii)	Do no	ot list any individuals that	rted on Schedule J, report t are not listed on Form 99 dividual must equal the to	90, Part VII				t individual
(A) Name and Title	13 (3		of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 JEANNE WOLF EXECUTIVE DIRECTOR	(i)	172,365	34,473	0	0	14,858	221,696	0
	(ii)	0	0	0	0	0	0	0
2 STEPHANIE FIELD MNG DIRECTOR, LEARNING	(i)	123,000	18,450	0	0	12,390	153,840	0
& OPERATIONS	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2017 Page 3 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

Schedule 1 (Form 990) 2017

efile GRAPH	DL	DLN: 93493032004229					
SCHEDUL	FΩ	Supplemental Information to Form 9	990 or 990-F7	OMB No 1545-0047			
(Form 990 or EZ) Department of the T	· 990-	Complete to provide information for responses to spe Form 990 or 990-EZ or to provide any additional Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) an www.irs.gov/form990.	nformation for responses to specific questions on -EZ or to provide any additional information. Attach to Form 990 or 990-EZ. dule O (Form 990 or 990-EZ) and its instructions is at				
Internal Revenue Se Name of the ord CFA SOCIETY BOS	TON INC		Employer ide 23-7069432	ntification number			
Return Reference	e O, Sup	plemental Information Explanation					
FORM 990, PART VI, SECTION A, LINE 6	THE ORG	GANIZATION HAS MEMBERS					

Return Explanation
Reference

LINE 7A

FORM 990, PART VI, SECTION A.

Return
Reference

Explanation

THE FORM 900 WAS REVIEWED BY THE ALIDIT COMMITTEE BRICK TO ITS FILING

LINE 11B

FORM 990, THE FORM 990 WAS REVIEWED BY THE AUDIT COMMITTEE PRIOR TO ITS FILING
PART VI,
SECTION B.

Return Explanation

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

Return Explanation
Reference

FORM 990, COMPENSATION FOR THE ORGANIZATION'S EXECUTIVE DIRECTOR IS APPROVED BY THE ORGANIZATION'S B OARD OF DIRECTORS THE ORGANIZATION USES COMPARATIVE 990'S FROM SIMILAR ORGANIZATIONS, EMP SECTION B, LOYMENT CONTRACTS, AND COMPENSATION SURVEYS TO ESTABLISH THE SALARIES OF THE EXECUTIVE DIR LINE 15

Return Explanation

Reference

FORM 990,	ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES, AND FINANCIAL STATEMENTS ARE AVALIABLE TO
PART VI,	THE PUBLIC UPON REQUEST
SECTION C,	
LINE 19	

Return Explanation
Reference

LINE 2C

FORM 990, NO CHANGE IN OVERSIGHT PROCESS OR SELECTION PROCESS FROM THE PRIOR YEAR
PAGE 12 PART XII -