# **Return of Organization Exempt From Income Tax**

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

▶ 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.
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A F	or th	ne 201	3 cale	ndar year, or ta	ax year begi	nning		, 2013	, and er	nding			, 2	0	
_			C Nam	ne of organization							D Employer	identifica	tion nur	nber	
Вс	heck if a	pplicable:	NE	W YORK-NEW	JERSEY T	RAIL CON	FERENCE	E, INC.			22-60	42838			
	Addre		Doin	g Business As											
	Name	e change	Nun	nber and street (or F	P.O. box if mail is	not delivered to	street addres	ss)	Room/su	ite	E Telephone	e number			
	Initia	I return	15	6 RAMAPO VA	ALLEY ROA	.D					(201) 5	512-93	348		
	Term	inated	City	or town, state or pr	ovince, country,	and ZIP or foreig	ın postal cod	е							
	Amer retur		MA	HWAH, NJ 07	7430						<b>G</b> Gross rec	eipts \$	3	,856	,801.
	Appli pend	cation ing	F Nam	ne and address of pr	rincipal officer:	RICHAR	D LEVII	NE			H(a) Is this a subordina		for	Yes	X No
			15	6 RAMAPO VA	ALLEY ROA	D MAHWAH	, NJ 07	7430			H(b) Are all sub		uded?	Yes	No.
ı	Tax-ex	cempt st	atus:	X 501(c)(3)	501(c) (	) <b>《</b> (inse	ert no.)	4947(a)(1)	or	527	If "No," a	attach a list. (	(see instru	uctions)	
J	Webs	ite: 🕨	WWW.	NYNJTC.ORG							H(c) Group ex	emption nun	mber <b>&gt;</b>		
K	Form	of organ	ization:	X Corporation	Trust	Association	Other	<u> </u>	L Ye	ear of forma	tion: 1920 I	M State of	f legal d	omicile:	NJ
P	art I	Sui	mmar	у											
	1	Briefly	/ descr	ibe the organizati	on's mission o	or most signific	ant activitie	s: PLAN,	CREAT	E AND	MAINTAIN	1 RECR	EATI	ONAL	
ce		HIK	ING '	TRAILS. PRO	DUCE MAP	S AND OTH	HER PUB	LICATIO	NS ON	HIKING	TRAILS	<u>.</u>			
nar				<del></del>											
Governance	2			ox ▶ if the	-		•					1 1			
	3			oting members of											16.
ళ	4			ndependent voting											16.
Activities	5	Total	numbe	r of individuals en	nployed in cal	endar year 201	13 (Part V, I	line 2a)							22.
į	6			r of volunteers (es								6			,258.
∢				ted business rever											0
	b	Net ur	nrelate	d business taxabl	e income from	Form 990-T, li	ine 34			<u> </u>					0
											Prior Year			rrent Y	
ne	8	·											2		<u>,985.</u>
Revenue	9		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)												<u>,608.</u>
Re	10						069.			,012.					
	11			ue (Part VIII, colui								132.			<u>,865.</u>
	12			e - add lines 8 thr							2,656,		3	,249	<u>,470.</u>
	13			similar amounts pa								0			
	14										006	0	1	071	<u>-</u>
ses	15										896,				<u>,569.</u>
Expenses	16a			fundraising fees (							55,	925.		42	,875.
Ä	47	Total	runara	ising expenses (Pa	art IX, column (	(D), line 25) ▶		329,031	<u>-</u>		580,	242		761	,370.
				ses (Part IX, colur							1,532,		1		,370. ,814.
	19			ses. Add lines 13-							1,123,				,656.
-Se		Revei	iue ies	s expenses. Subtr	act line to ito	II IIIIe 12					nning of Curre			d of Yea	
Net Assets or Fund Balances	20	Total	accatc	(Part X, line 16)						-	5,336,				,601.
Ass Bal	21			es (Part X, line 26)							213,				,470.
E e	22			or fund balances.						• •	5,123,		6		,131.
	rt II			e Block	Cabil dot iii o L	1 110111 11110 20					- / /			,	
Un	der pe	nalties o	of perjur	ry, I declare that I ha	ave examined th	nis return, includ	ding accomp	panying sched	ules and s	tatements,	and to the best	t of my kn	owledge	e and be	elief, it is
true	e, corre	ect, and	comple	te. Declaration of pre	eparer (other tha	in officer) is base	ed on all info	rmation of wh	ich prepare	er has any k	nowledge.				
Sig			Signatu	ure of officer							Date				
He	re														
			Type or	r print name and title											
		Print/	Type pr	eparer's name		Preparer's sig	nature		Date		Check	if PT	ΓIN		
Paid		JOY	CE I	MAYERESKY							self-emp	loyed	P000	2451	.8
	parer Only	Firm's	name	►WITHUMSM:	ITH+BROWN	N, PC					Firm's EIN	22-20	2709	2	
_se	- Only	Firm's	addres	s ▶1 SPRING	STREET N	NEW BRUNS	WICK, I	NJ 08901	L		Phone no.	732-8			
May	the I	RS dis	cuss th	nis return with the	preparer show	vn above? (see	instruction	s)					X	<b>Yes</b>	No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. 22-6042838

FOI	m 990 (2013)
P	Statement of Program Service Accomplishments  Check if Schedule O contains a represent to any line in this Part. III
_	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	PLAN, CREATE AND MAINTAIN RECREATIONAL TRAILS. PROVIDE USEFUL
	INFORMATION TO THE PUBLIC ABOUT HIKING TRAILS BY MAINTAINING AN
	INFORMATIVE WEBSITE AND BY PRODUCING MAPS AND OTHER PUBLICATIONS.
	PURCHASE AND PROTECT PROPERTY IMPORTANT FOR RECREATIONAL TRAILS.
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes X No If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
4	If "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1,114,419 including grants of \$) (Revenue \$)
	TRAIL BUILDING AND PROGRAMS - OUR TRAILS PROGRAM MANAGES AND
	RECRUITS OVER ONE THOUSAND VOLUNTEERS WHO MAINTAIN HIKING TRAILS
	WITHIN OUR REGION. THE TRAILS PROGRAM ALSO OFFERS WORKSHOPS AND
	TRAINING OPPORTUNITIES FOR THE TRAIL VOLUNTEERS.
4b	(Code:) (Expenses \$
	PUBLICATIONS - OUR PUBLICATIONS PROGRAM PRODUCES MAPS OF HIKING
	TRAILS AS WELL AS GUIDEBOOKS THAT DESCRIBE TRAILS AND HIKES. OUR
	MAPS AND BOOKS ARE SOLD BOTH TO RETAIL AND TO WHOLESALE CUSTOMERS.
	MOST OF THE DATA CONTAINED ON THE MAPS IS PROVIDED BY VOLUNTEERS
	WHO HIKE TRAILS WITH GPS UNITS AND REPORT CHANGES IN THE TRAILS.
	VOLUNTEERS ALSO WRITE AND EDIT OUR GUIDEBOOKS, AS WELL AS
	DESIGNING AND LAYING OUT SOME OF THEM.
40	(Code: ) (Expenses \$ 96,312. including grants of \$ ) (Revenue \$ 253,896. )
	MEMBERSHIPS - OUR COMMUNICATIONS PROGRAM INCLUDES THE MAINTENANCE
	OF A WEBSITE THAT PROVIDES INFORMATION ON HIKES AND PARKS IN THE
	AREA AND THE PRODUCTION OF A QUARTERLY NEWSLETTER, THE TRAIL
	WALKER, WHICH PROVIDES INFORMATION ON NEW DEVELOPMENTS IN THE AREA
	OF TRAILS AND OTHER NEWS AND FEATURES.
4d	Other program services (Describe in Schedule O.) ATTACHMENT 1
	(Expenses \$ 22,904. including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 1,413,846.

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Part IV **Checklist of Required Schedules** No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х 1 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . . . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Χ Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Χ Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 Χ Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Χ Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Χ 8 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 Χ Did the organization, directly or through a related organization, hold assets in temporarily restricted Χ endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . . . 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Χ 11a complete Schedule D, Part VI b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more Χ of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Х d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Χ 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," Х 12a complete Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if Χ the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . . . . . . . . . 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 Χ foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV....... Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Χ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other Χ 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Х 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Χ Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Χ Χ 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . . . b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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Part	V Checklist of Required Schedules (continued)			
•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23	·			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23		Х
04 -	employees? If "Yes," complete Schedule J	23		
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			37
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part L	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L. Part IV.	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N</i> ,			
٠.	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
<b>-</b>	complete Schedule N. Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
34	or IV, and Part V, line 1	34		Х
25.0	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	33a		
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
20		330		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26		Х
0.7	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	2-		v
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	20	Х	
	19? Note. All Form 990 filers are required to complete Schedule O	38	Δ	

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Par	- · · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V			
	E		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 13  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Effect the number of Forms W-20 included in line 1a. Effect-0- in not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4.	Х	
•	reportable gaming (gambling) winnings to prize winners?	1c		
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  22			
	ctatemente, med for the earthaut year ending with or warm the year covered by the retain.	26	Х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
•	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2-		v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	40		Х
L	account)?	4a		Λ
D	If "Yes," enter the name of the foreign country: ►  See instructions for filling requirements for Form TD F 00.33.1 Penet of Foreign Bank and Financial Accounts.			
E 0	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Ju		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
-	and services provided to the payor?	7a		Х
b	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		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	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 and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40-	against amounts due or received from them.)  11b	120		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	ısa		
<b>L</b>	Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which			
Ŋ	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			
^	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sect	tion 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 1a 16			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			37
`t	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 Cod	- 1	X
becu	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coue	<i>7.)</i> Yes	No
		10a	163	X
	Did the organization have local chapters, branches, or affiliates?	Tua		21
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	Х	
11a		Па		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х	
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	124		
D	rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
C	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
. •	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_NJ_,NY_,			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	X    Own website    X    Upon request    Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, and
	financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who p	ne		

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the 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) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trusted	ee.
---	-----

				(C)	•		,		
(A) Name and Title	(B) Average hours per week (list any	box,	not che unless	Position eck mar perso		h an	(D) Reportable compensation from	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Highest compensated employee Key employee Officer Institutional trustee		Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)CHRIS CONNOLLY	8.00								
CHAIR		Х	:	Х				0	0
(2)GAYLORD HOLMES	8.00								
VICE CHAIR		Х	:	х				0	0
(3)RICHARD LEVINE	8.00								
TREASURER		Х	:	Х			C	0	0
(4)DANIEL CHAZIN	8.00								
SECRETARY		Х	:	Х			C	0	0
(5)DANIEL HOBERMAN	5.00								
BOARD COUNSEL		Х					C	0	0
(6)WALT DANIELS	5.00								
BOARD MEMBER		Х					C	0	0
(7)CHARLOTTE FAHN	5.00								
BOARD MEMBER		Х					C	0	0
(8)SUZAN GORDON	5.00								
BOARD MEMBER		X					C	0	0
(9)RICHARD KATZIVE	5.00								
BOARD MEMBER		Х					C	0	0
(10)JIM GREGOIRE	5.00								
BOARD MEMBER		Х					C	0	0
(11)EDWARD SAIFF	5.00								
BOARD MEMBER		X					C	0	0
(12)DAVE STUHR	5.00								
BOARD MEMBER		Х					C	0	0
(13)DANIEL VAN ENGEL BOARD MEMBER	5.00	x						0	0
(14)NED WHITNEY	5.00	Λ.		+				0	
BOARD MEMBER		x						0	0
DOWN LIEUDEK		Λ					1	,	

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NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. Form 990 (2013)

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	yee	es, a	and H	ligl	hest Compensat	ed Employ	ees (co	ontinued)	)
(A) Name and title	(B)  Average hours per week (list any hours for	box,	unles	ss pe d a d	ition more rson irecte	than or is both a	an ee)	(D) Reportable compensation from the	(E) Reportab compensation related organization	n from	Estim amou oth compe	nated int of ner
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-N		from organi and re organi	zation elated
15) PATRICIA WOOTERS	5.00											
BOARD MEMBER  16) CHRISTINE DEBOER	5.00	X						C		0		
BOARD MEMBER	3.00	Х						C		0		C
17) EDWARD GOODELL EXECUTIVE DIRECTOR	40.00			Х				111,400.		0	1	0,588.
18) JOSHUA HOWARD DEPUTY EXECUTIVE DIRECTOR	40.00			Х				90,720.		0		7,200.
1b Sub-total							<b>&gt;</b>	000 100		0		C
c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c)	_						<b>&gt;</b>	202,120.		0		7,788. 7,788.
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste		oove	e) who	re		\$100,000 o	f		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Teportable compensation from the organization		_	_								Y	es No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3	Х
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual.	sum of repeater than	ortab \$15	le c	om 00?	pen <i>If</i>	sation <i>"Ye</i> s,	ar	nd other compens	sation from	the <i>uch</i>	4	Х
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue co	mpen	satio	on f	rom	any	unı	related organization	on or individ	ual	5	X
Section B. Independent Contractors	zs, comple	1 <del>0</del> 301	i <del>c</del> uu	iie J	101	sucii į	UCI S	SUII	<u> </u>		ן ט	
Complete this table for your five highest com compensation from the organization. Report c year.												

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

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Part VIII Statement of Revenue

		Check if Schedule O contains a response	onse or note to ar	ny line in this Part V	/III		X
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions) . 1e  All other contributions, gifts, grants, and similar amounts not included above . 1f	340,682.				
Sol	g	· · · · · · · · · · · · · · · · · · ·					
	h	Total. Add lines 1a-1f		2,642,985.			
nue			Business Code				
Program Service Revenue	2a b c d	MEMBERSHIP DUES  SALES OF MAPS, BOOKS AND OTHER ITEMS	900099	253,896. 243,712.	253,896. 243,712.		
гaг	е						
og	f	All other program service revenue					
	<u>g</u> 3	Total. Add lines 2a-2f  Investment income (including dividends, inter other similar amounts). ATTACHMENT 2	rest, and	497,608. 79,655.			79,655.
	4	Income from investment of tax-exempt bond		0			
	5	Royalties		1,716.			1,716.
	6a b c	Gross rents	(ii) Personal	0			
		(i) Securities	(ii) Other				
		Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses					
	C d	Gain or (loss)		9,357.			9,357.
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c).  See Part IV, line 18 a		9,337.			3,331.
the	l	Less: direct expenses b					
Ö	9a	Net income or (loss) from fundraising events  Gross income from gaming activities.  See Part IV, line 19		0			
	b	Less: direct expenses					
	C	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances		3			
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inventory		0			
		Miscellaneous Revenue	Business Code				
	11a	ADS/SPONSORSHIP INCOME	900099	18,149.			18,149.
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d	▶	18,149.			
	12	Total revenue. See instructions		3,249,470.	497,608.		108,877.

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX (C) Management and (B) Program service (A) Total expenses Do not include amounts reported on lines 6b, 7b, Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to governments and 0 organizations in the United States. See Part IV, line 21 2 Grants and other assistance to individuals in 0 the United States. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 0 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 219,908 129,554 45,218 45,136. 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 692,096. 508,222 51,722 132,152. 8 Pension plan accruals and contributions (include section 8,347 6,672 652 1,023. 401(k) and 403(b) employer contributions) 47,616 5,350 12,891. 65,857 85,361. 59,898. 8,910 16,553. 11 Fees for services (non-employees): a Management **b** Legal 5,219 50,000. 35,087. 9,694. c Accounting d Lobbying 42,875. 42,875. e Professional fundraising services. See Part IV, line 17, f Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column 45,245 41,505 3,740. (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 1,625 813 812. 243,287. 205,868. 3,317 34,102. 13 Office expenses 17,835. 13,178 1,630. 3,027. 14 Information technology 15 Royalties 53,081. 38,774 5,007 9,300. Occupancy 16 30,512. 26,467 619 3,426. Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 35,484. 1,269 8,541. 25,674 Conferences, conventions, and meetings 19 Payments to affiliates 13,696. 9,611 1,430 2,655. Depreciation, depletion, and amortization 22 19,105 13,407. 1,994 3,704. 23 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.) aTRAIL DEVELOPMENT COSTS 251,253. 251,253. bBAD DEBT EXPENSE 247 247 d \_ \_ \_ \_ \_ \_ \_ \_ e All other expenses \_\_\_\_\_ 1,875,814 132,337 329,631. 1,413,846 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

3E1052 1.000

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NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. Form 990 (2013) Page **11** 

#### **Balance Sheet** Part X

		Check if Schedule O contains a response or note to any line in this Pa	rt X		х
		ones in constant of contains a response of free to any line in all of a	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	284.	1	704.
	2	Savings and temporary cash investments	215,039.	2	868,513.
	3	Pledges and grants receivable, net	665,084.	3	1,087,348.
	4	Accounts receivable, net	53,714.	4	35,174.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
	6	Complete Part 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) voluntary employees' beneficiary	0	5	0
ts	_	organizations (see instructions). Complete Part II of Schedule L	0	6 7	0
Assets	7	Notes and loans receivable, net	0	8	0
Ä	8	Inventories for sale or use Prepaid expenses and deferred charges ATCH 3	29,863.	_	9,917.
	9		29,003.	9	9,917.
	IUa	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 119, 262.			
	h	other basis. Complete Part VI of Schedule D Less: accumulated depreciation	23,287.	100	77,528.
	11	Investments - publicly traded securities  ATCH 4	1,447,759.		1,769,863.
	12	Investments - other securities. See Part IV, line 11	1,117,735.		1,703,003.
	13	Investments - program-related. See Part IV, line 11	494,676.		521,329.
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	2,407,052.		2,561,225.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,336,758.	_	6,931,601.
	17	Accounts payable and accrued expenses	59,096.		92,647.
	18	Grants payable		18	0
	19	Deferred revenue ATCH 5	132,052.	19	119,888.
	20	Tax-exempt bond liabilities	0	20	0
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
≝	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
		disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	22,104.		15,935.
_	26	Total liabilities. Add lines 17 through 25	213,252.	26	228,470.
es		Organizations that follow SFAS 117 (ASC 958), check here   X  and complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	2,737,934.	27	3,001,430.
Bal	28	Temporarily restricted net assets	2,385,572.	28	3,701,701.
pu	29	Permanently restricted net assets	0	29	0
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
ts (	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	5,123,506.	33	6,703,131.
	34	Total liabilities and net assets/fund balances	5,336,758.	34	6,931,601.

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NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Form 990 (2013) Page **12 Reconciliation of Net Assets** Part XI Check if Schedule O contains a response or note to any line in this Part XI 3,249,470. 1,875,814. 2 3 1,373,656. 5,123,506. 4 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . . 5 133,593. 5 72,414. 6 6 0 7 7 Investment expenses 0 8 8 -38. 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 10 6,703,131. 10 Part XII Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? Χ 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 2b Χ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight Χ 2c of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 3a Χ b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

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

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22-6042838

JSA 3E1054 1.000

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

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Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
►Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Name of t	he organization							Emplo	yer iden	tificatio	on numl	er	
NEW YO	RK-NEW JERSEY	TRAIL CONFER	ENCE, INC.						22-	-604	2838		
Part I	Reason for Pub	lic Charity Status	s (All organizations mu	st con	nplete	this pa	art.) Se	e instri	uctions				
The <u>org</u> a	nization is not a priv	ate foundation bed	cause it is: (For lines 1 th	rough	11, che	eck only	one bo	x.)					
1 💹	A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)(	1)(A)(i)					
2	A school described	l in section 170(b)	(1)(A)(ii). (Attach Schedul	e E.)									
3	A hospital or a coo	perative hospital s	ervice organization descri	ibed in	sectio	n 170(b	)(1)(A)	(iii).					
4	A medical research	h organization op	erated in conjunction wi	th a h	ospita	I descr	ibed in	sectio	n 170(k	)(1)(	A)(iii).	∃nter	the
	hospital's name, cit												
5	An organization opsection 170(b)(1)(A		nefit of a college or univ	ersity	owned	or ope	erated b	y a go	vernme	ntal u	ınit des	cribe	d in
6			or governmental unit des	cribed	in sect	ion 170	(b)(1)(	4)(v).					
7		-	es a substantial part of it						it or fro	om the	e dene	ral ni	ıblic
. Ш	described in section	=	· · · · · · · · · · · · · · · · · · ·	o oupp		90					J 900	. с р	
8			on 170(b)(1)(A)(vi). (Com	nlete F	Part II)								
9 X	-		es: (1) more than 331/3 %	•			contrib	utions	membe	ershin	fees a	and a	ross
- 11	-	=	exempt functions - subj									_	
			ome and unrelated busing			-							
			ne 30, 1975. See <b>section</b>				•		. •				
10			ted exclusively to test for			-		-	١.				
11		•	rated exclusively for the	•	•				•	or t	o carry	out	the
Ш	_	-	ipported organizations de			-					-		
			es the type of supporting					-					
	a Type I	<b>b</b> Type II	c Type III-Function	•			· —		l-Non-fu	•		egrat	ed
е			e organization is not con	-	_						-	_	
	-	-	other than one or more			-	-	-			-	-	
	or section 509(a)(2	<del>-</del>	•		, , ,		Ü					`	, ,
f	. , ,	•	n determination from the	e IRS	that it	is a T	vpe I, T	vpe II.	or Type	e III s	upport	ing	
	organization, check					•	,, ,	,	,,			Ŭ	
g	=		nization accepted any gift	t or cor	ntributi	on from	any of	the					
_	following persons?						•			•			
	(i) A person who	directly or indirec	tly controls, either alone	or toge	ether v	vith per	sons de	escribe	d in (ii)	and		Yes	No
	(iii) below, the	governing body of	the supported organization	on?		-					11g(i)		
			scribed in (i) above?								11g(ii)		
			on described in (i) or (ii) a	bove?							11g(iii)		
h	Provide the following	ng information abo	ut the supported organiza	ation(s)	).								
(i) Na	ame of supported	(ii) EIN	(iii) Type of organization	(iv)	ls the	(v) Did y	ou notify	(vi)	s the	(vii) A	Amount o	f mone	etary
	organization		(described on lines 1-9 above or IRC section		zation in listed in		anization	organiz col. (i) o	zation in		suppo	rt	
			(see instructions))		overning ment?		ort?		U.S.?				
				Yes	No	Yes	No	Yes	No				
(A)													
(A)													
(B)													
(C)													
(D)													
(E)													
Total													

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

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Schedule A (Form 990 or 990-EZ) 2013

Par	Support Schedule for Orga (Complete only if you checked Part III. If the organization fail	d the box on I	ine 5, 7, or 8	of Part I or if t	he organizatio	n failed to qua	
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4.						
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4	(u) 2000	(3) 2010	(0) 2011	(a) 2012	(0) 2010	(i) rotar
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	,				12	
13	First five years. If the Form 990 is f						
	organization, check this box and stop here						<u></u>
	tion C. Computation of Public Sup						
14	Public support percentage for 2013 (li						<u>%</u>
15	Public support percentage from 2012						<u>%</u>
16a	331/3% support test - 2013. If the o						re, cneck
L	this box and <b>stop here</b> . The organization 331/3% support test - 2012. If the continuous						or more
D							
170	check this box and stop here. The organization and six amount and						
17a	<b>10%-facts-and-circumstances test - 2</b> 10% or more, and if the organization						
	Part IV how the organization meets t					•	•
	organization			-	-		apported
h	10%-facts-and-circumstances test - 2						and line
b	15 is 10% or more, and if the organic						
	Explain in Part IV how the organizati						
	supported organization						•
18	Private foundation. If the organization	did not check a	a box on line 13	. 16a. 16b. 17a	. or 17b. check	this box and see	· · · · · · · · · · · · · · · · · · ·
_	instructions						

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. Schedule A (Form 990 or 990-EZ) 2013 Page 3

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

800	tion A Public Support	amy arraor trio	Toolo notou be	now, picaco co	Imploto Falt II	•/	
	tion A. Public Support	(2) 2000	<b>(b)</b> 2010	(a) 2011	(4) 2012	(a) 2013	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")	956,445.	1,113,920.	514,570.	2,329,455.	2,896,881.	7,811,271.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	435,197.	833,422.	60,024.	243,556.	243,712.	1,815,911.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	1,391,642.	1,947,342.	574,594.	2,573,011.	3,140,593.	9,627,182.
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						0
c	Add lines 7a and 7b						0
8							
	line 6.)						9,627,182.
Sec	tion B. Total Support						5,021,102.
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	1,391,642.	1,947,342.	574,594.	2,573,011.	3,140,593.	9,627,182.
	Gross income from interest, dividends,	1,391,042.	1,947,342.	574,594.	2,573,011.	3,140,593.	9,027,102.
	payments received on securities loans,						
	rents, royalties and income from similar	11 061	20 577	14 500	70 021	70 655	205 622
h	Unrelated business taxable income (less	11,861.	29,577.	14,508.	70,031.	79,655.	205,632.
ь	section 511 taxes) from businesses						
	, , , , , , , , , , , , , , , , , , ,						
_	acquired after June 30, 1975						0
	Add lines 10a and 10b	11,861.	29,577.	14,508.	70,031.	79,655.	205,632.
11	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is regularly						
	carried on						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	1,403,503.	1,976,919.	589,102.	2,643,042.	3,220,248.	9,832,814.
14	First five years. If the Form 990 is for	_					
	organization, check this box and stop here						<u> ▶                             </u>
	tion C. Computation of Public Sup	•		(5)			0.5.01.01
15	Public support percentage for 2013 (line 8					15	97.91%
16	Public support percentage from 2012 Sche					16	98.27 %
	tion D. Computation of Investmen						0 00 = :
17	Investment income percentage for 2013 (li					17	2.09%
18	Investment income percentage from 2012					18	1.73%
19 a	331/3% support tests - 2013. If the or	-					
	17 is not more than 331/3 %, check th	is box and <b>stop</b>	here. The orga	anization qualifies	as a publicly	supported organiz	zation   X
b	331/3% support tests - 2012. If the orga	anization did not	check a box on I	ine 14 or line 19a	a, and line 16 is	more than 331/3	%, and
	line 18 is not more than 331/3 %, check	this box and st	op here. The org	ganization qualifie	s as a publicly	supported organiz	zation 🕨 💹
20	Private foundation If the organization	did not check :	a hoy on line 1	14 10a or 10h	check this ho	v and see instru	ictions -

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NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Schedule A (Form 990 or 990-EZ) 2013

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

Schedule A (Form 990 or 990-EZ) 2013

22-6042838

#### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below.

Attach to Form 990 or Form 990-E2

s described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

	e organization answered "Yes," Section 501(c)(4), (5), or (6) org	" to Form 990, Part IV, line 5 (Proxy Ta	ax) or Form 990-EZ, Pa	rt V, line 35c (Proxy Tax), th	nen
	of organization	ganizations. Complete Fart III.		Employer identi	fication number
NEW	YORK-NEW JERSEY TR	AIL CONFERENCE, INC.		22-604	42838
		organization is exempt under	section 501(c) or		
1	-	e organization's direct and indirect p			
2	·				
3					
Par	-	organization is exempt under s			
1		cise tax incurred by the organizatio			
2		cise tax incurred by organization m			
3		a section 4955 tax, did it file Form			
					Yes No
	If "Yes," describe in Part IV.		(1 = = 1/)		
Par		organization is exempt under			i).
1		expended by the filing organization			
2	Enter the amount of the fili	ng organization's funds contributed	I to other organizati	ons for section	
		ies			
3	line 17b	enditures. Add lines 1 and 2. En		▶\$	
5	Enter the names, addresses organization made payment the amount of political con	le Form 1120-POL for this year? s and employer identification numb ts. For each organization listed, en tributions received that were prom nd or a political action committee (I	er (EIN) of all section ter the amount paid optly and directly de	on 527 political organiza I from the filing organiz livered to a separate po	ations to which the filing cation's funds. Also ente plitical organization, suc
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Sch	edule C (Form 990 or 990-EZ) 2013	NEW YC	RK-NEW J	FERSEY TRAIL C	ONFERENCE,	INC. $22-6$	042838 Page <b>2</b>
Pa	rt II-A Complete if the org	janizati	on is exen	npt under sectior	1 501(c)(3) and	filed Form 5768 (ele	ction under
A				an affiliated grou I share of excess l		rt IV each affiliated g litures).	roup member's
В	Check ▶ if the filing orga	nization	checked I	oox A and "limited	control" provision	ons apply.	
			ying Expend		'	(a) Filing	(b) Affiliated
	(The term "expendit				)	organization's totals	group totals
1 a	Total lobbying expenditures to	influenc	e public on	inion (grass roots lo	hhvina)		
b							
C							
d							
e							
f	Lobbying nontaxable amount	. Enter	ine amount	mom the ronowing	i table ili botti		
	columns.		I				
	If the amount on line 1e, column (a	) or (b) is:			is:		
	Not over \$500,000			amount on line 1e.			
	Over \$500,000 but not over \$1,000			us 15% of the excess			
	Over \$1,000,000 but not over \$1,5			us 10% of the excess			
	Over \$1,500,000 but not over \$17,	000,000	· · · ·	us 5% of the excess of	ver \$1,500,000.		
	Over \$17,000,000		\$1,000,000				
g							
h	3						
i	Subtract line 1f from line 1c. I	f zero or	less, enter -	0			
j	If there is an amount other	than zer	o on either	line 1h or line 1i,	did the organiz	ation file Form 4720	
	reporting section 4911 tax for	this yea	r?				Yes No
			4-Year Aver	aging Period Unde	r Section 501(h)		
	(Some organizat				` '	complete all of the fi	ve
				instructions for lin			
				nditures During 4-Ye			
	Only day on the final and						
	Calendar year (or fiscal year beginning in)	(a)	2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
	beginning in)						
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Schedule C (Form 990 or 990-EZ) 2013

(a	1)		(b)	
Yes	No			
y				
	Х			
Х				205
Х			:	2,587
	Х			
	X			
Х	v		Τ.(	745
	A		1 '	3,537
	x			3,331
	- 11			
c)(5)	, or s	ection		
				No.
		· • • • <b> </b>		
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			line 3. is	s
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its o	of	1 2a		
nts (	of	1 2a 2b		
nts d	of	1 2a 2b 2c		
nts o	of	1 2a 2b		
of th	of e	1 2a 2b 2c		
of th	of e g	2a 2b 2c 3		
of th	of ee	1 2a 2b 2c		
of th	of ee	1 2a 2b 2c 3		
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	id
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
of the	of ee	2a 2b 2c 3 4 5 5	line 2; an	nd
	x x x x	x x x x x x x x x x x x x x x x x x x	x	X X X X X X X X X X X X X X X X X X X

Schedule C (Form 990 or 990-EZ) 2013 Page **4** 

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

#### Part IV Supplemental Information (continued)

LOBBYING ACTIVITIES

SCHEDULE C, PART II-B QUESTION 1

- 1A VOLUNTEERS ATTENDED EVENTS IN SUPPORT OF OPEN SPACE PRESERVATION AND PARKS FUNDING.
- 1B PAID STAFF ATTENDED EVENTS AND WROTE E-MAILS AND NEWSLETTERS IN SUPPORT OF OPEN SPACE AND PARKS FUNDING.
- 1D E-MAILS WERE SENT ASKING TO SUPPPORT FUNDING FOR PARKS AND OPEN SPACE.
- 1E NEWSLETTER ARTICLES SUPPORTING OPEN SPACE ACQUISITION AND PROTECTION WERE WRITTEN.
- 1F DONATION TO THE CONSERVATION CAMPAIGN FUNDING OPEN SPACE ACQUISITION.
- 1H ATTENDED EVENTS IN SUPPORT OF OPEN SPACE PRESERVATION AND PARKS FUNDING.

### SCHEDULE D (Form 990)

Department of the Treasury

### Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Employer identification number Name of the organization NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. 22-6042838 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate contributions to (during year) 3 Aggregate 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 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). X 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 Tax Year 2a 1,503.00 Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_\_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, 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" to 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: 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: Revenues included in Form 990, Part VIII, line 1 **\$**\_\_\_\_

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

Schedule D (Form 990) 2013

▶ \$

Page 2

Schedule D (Form 990) 2013

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Par	t III Organizations Maintaining Coll	ections of	Art, Hist	orical T	reasur	es, e	or Oth	er Simila	r Asse	ts (conti	inued)
3	Using the organization's acquisition, acce collection items (check all that apply):	ssion, and o	ther record	ds, check	any o	f the	follow	ing that ar	e a sigr	nificant us	se of its
а	Public exhibition		d	Loan c	r excha	ange	progran	ns			
b	Scholarly research		e								
С	Preservation for future generations			٠.							
4	Provide a description of the organization's	s collections	and expla	in how t	hev fur	ther	the ord	anization's	exemp	t purpose	in Part
	XIII.				- ,		•	,			
5	During the year, did the organization solicit	or receive d	onations of	fart histo	orical tr	easu	res or o	other simila	ır		
•	assets to be sold to raise funds rather than								_	Yes	No
Par	t IV Escrow and Custodial Arrangen										
	or reported an amount on Form										
1a	Is the organization an agent, trustee, custo			-					_		<b></b>
	included on Form 990, Part X?								L	Yes	No
b	If "Yes," explain the arrangement in Part XII	i and comple	ete the folio	owing tab	ie:			Δ			
	5							An	nount		
	Beginning balance										
	Additions during the year										
	Distributions during the year										
f O-	Ending balance			040		1f				1,4	
2a	Did the organization include an amount on	Form 990, F	art X, line .	21 <i>!</i>				in Dord VIII	L	Yes	⊢ No
	If "Yes," explain the arrangement in Part XII										
Par										(a) Fauru	anna hank
12		urrent year 506,566.	(b) Prior	4,117.	(C) IW	o year	s back	(d) Three ye	ars back	(e) Four y	ears back
		33,500.		0,623.		22	,500.				
	Net investment earnings, gains,	33,300.	400	J,043.		33,	, 500.				
C	and losses	49,235.	1 -	1,826.			617.				
ч	Grants or scholarships	49,233.	1.	1,020.			017.				
	Other expenditures for facilities										
-	and programs										
	Administrative expenses										
		589,301.	504	5,566.		2/	,117.				
_	Provide the estimated percentage of the cu				aalumn						
2 a	Board designated or quasi-endowment			(lifte rg,	ColuiTii	i (a))	neiu as	•			
h	•	100.000	-								
C	Temporarily restricted endowment	, %									
·	The percentages in lines 2a, 2b, and 2c sho		00%								
3a	Are there endowment funds not in the pos	•		tion that	are hel	d and	d admir	istered for t	he		
-	organization by:		J							V	es No
	(i) unrelated organizations									3a(i)	X
	(ii) related organizations									3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizatio	ns listed as r	equired on	Schedule	R?					3b	- 21
4	Describe in Part XIII the intended uses of the										
Par	Land, Buildings, and Equipment. Complete if the organization and	swered "Ve	s" to Form	1 990 Pa	art IV/I	line 1	112 50	e Form 9	——— 0∩ Par	t X line 1	
	Description of property	(a) Cost or		(b) Cost o				umulated		d) Book valu	
		(invest			ther)			eciation			
_	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment			1	14,47	_		36,944.		7	7,528.
	Other				4,79			4,790.			
Tota	<ol> <li>Add lines 1a through 1e. (Column (d) mus</li> </ol>	st equal Form	990, Part 2	X, column	i (B), lin	ne 10(	(c).).	<b>▶</b>		7	7,528.

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. Schedule D (Form 990) 2013

Generalie B (1 offil 330) 2010			i age t
Part VII Investments - Other Securities.  Complete if the organization answered	d "Ves" to Form 990 F	Part IV line 11h See Form 000 P	art X line 12
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)	, ,	Cost or end-of-year market	value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related. Complete if the organization answered	d "Yes" to Form 990, F	Part IV, line 11c. See Form 990, P	art X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuatior Cost or end-of-year market	
(1) MUTUAL FUNDS	359,249.	FMV	
(2) EQUITY FUND	162,080.	FMV	
(3)		•	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	F01 200		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	521,329.		
Part IX Other Assets. Complete if the organization answered	d "Yes" to Form 990 F	Part IV line 11d See Form 990 P	art X line 15
	Description	urt iv, inic i id. dec i dilli dad, i	(b) Book value
(1)BEQUEST RECEIVABLE	, =		100,000
(2) TRAIL LANDS			916,747
(3) SECURITY DEPOSITS			93,375
(4) CONSTRUCTION IN PROGRESS			1,451,103
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B)	lino 15 )		2 561 225
Part X Other Liabilities. Complete if the organization answered			2,561,225 990, Part X,
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes	(b) Book value		
(2) ANNUITY OBLIGATIONS	15,93	35.	
(3)	,		
(4)			
(5)			
(6)			
(7)			
_ (8)			
(9)		25	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	15,93	35.	
2 Liability for uncertain toy positions. In Dort VIII, provide the	toxt of the feetnets to the	arganization's financial atataments that same	rta tha

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

JSA 3E1270 1.000

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. Page 4 Schedule D (Form 990) 2013

Ochicadi	C D (1 01111 000) 2010		1 age 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	١.	
1	Total revenue, gains, and other support per audited financial statements	1	3,593,613.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	•	3,333,013.
a	Net unrealized gains on investments 2a 133,593.		
b	Donated services and use of facilities 2b 210,588.		
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)  2d -38.		
е	Add lines 2a through 2d	2e	344,143.
3	Subtract line 2e from line 1	3	3,249,470.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,249,470.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	rn.	
1	Total expenses and losses per audited financial statements	1	2,013,988.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 138,174.		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	138,174.
3	Subtract line 2e from line 1	3	1,875,814.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
с 5	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4c	1,875,814.
	XIII Supplemental Information.	5	1,0/5,014.
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa	rt V li	ine 4 <sup>.</sup> Part X line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	PAGE 5		

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Page 5

Part XIII Supplemental Information (continued)

INCOME TAXES

PART X, NUMBER 2

NEW YORK - NEW JERSEY TRAIL CONFERENCE, INC. IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

ACCORDINGLY, THE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR FEDERAL INCOME TAXES. THE TRAIL CONFERENCE FOLLOWS THE PRONOUNCEMENT RELATED TO INCOME TAXES. THERE WERE NO UNCERTAIN TAX POSITIONS AT DECEMBER 31, 2013 AND 2012. THERE ARE NO OPEN TAX YEARS PRIOR TO 2010. THE TRAIL CONFERENCE DID NOT HAVE ANY INCOME TAX RELATED PENALTIES OR INTEREST FOR THE YEAR ENDED AND PERIOD IN QUESTION.

#### CONSERVATION EASEMENTS

PART II, NUMBER 9

CONSERVATION LAND AND EASEMENTS ARE REPORTED AS NON-CURRENT ASSETS ON THE BALANCE SHEET. THERE IS NO INCOME ASSOCIATED WITH THEM UNTIL THEY ARE SOLD AT WHICH TIME A GAIN OR LOSS IS RECOGNIZED.

POLICY REGARDING CONSERVATION EASEMENTS

PART II, NUMBER 5

THE ORGANIZATION HAS A CONSERVATION AGREEMENT WITH THE GRANTOR OF THE EASEMENT PROPERTY WHICH OUTLINES THEIR RESPONSIBILITIES AND RIGHTS AS GRANTEE PERTAINING TO THE PROPERTY. THEY HAVE THE RIGHT TO INSPECT THE PROPERTY. AS FOR ENFORCEMENT, ANY VIOLATIONS SHALL BE REPORTED TO THE FEE OWNER OF THE PROPERTY WHO WILL CURE THE VIOLATION. THE ORGANIZATION CANNOT GIVE OUT VIOLATIONS TO ANY INDIVIDUALS WHO MAY VIOLATE THE PROVISIONS OF THE EASEMENT.

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Part XIII Supplemental Information (continued)

RECONCILIATION OF REVENUE

PART XII, NUMBER 2D

CHANGE IN VALUE OF SPLIT INTEREST ANNUITY AGREEMENTS OF \$(38).

ENDOWMENT FUNDS

PART V, NUMBER 4

THE LEGACY FUND, A BOARD CREATED QUASI-ENDOWMENT FUND, WAS ESTABLISHED TO

ENABLE THE ORGANIZATION TO HAVE SEPARATE FUNDS AVAILABLE TO FUND BOARD

DESIGNATED PURPOSES. THE LAND ACQUISITION AND STEWARDSHIP FUND IS

MAINTAINED FOR FUTURE PURCHASE AND MAINTENANCE OF LAND.

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Form 990-EZ filers are not required to complete this part.

**SCHEDULE G** 

Part I

1

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

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

Inspection

**Employer identification number** 

22-6042838

a X Mail solicitations	е		citation of i	non-government g	rants	
<b>b</b> X Internet and email solicitations	f		citation of	government grants	3	
c X Phone solicitations	g	X Spe	cial fundra	ising events		
<b>d</b> X In-person solicitations						
2a Did the organization have a written of						X Yes No
or key employees listed in Form 990  b If "Yes," list the ten highest paid inc						
compensated at least \$5,000 by the		(Turiuraise	ers) pursua	ant to agreements	under which the	iundraiser is to be
compensated at least \$5,000 by the	organization.					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	ndraiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1	CAPITAL					
INNOVATIVE RESOURCES GROUP	CAMPAIGN		X	818,689.	42,875.	775,814.
2				,	,	-,
3						
4						
5						
6						
7						
8						
9						
10						
Total			▶	818,689.	42,875.	775,814.
3 List all states in which the organiza				contributions or	has been notified	it is exempt from
registration or licensing.						
NJ,NY,						

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Schedule G (Form 990 or 990-EZ) 2013 Page **2** 

Pa	rt l	Fundraising Events. Complete than \$15,000 of fundraising even gross receipts greater than \$5,000.	nt contributions and gros			
		3	(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col. (a) through
a)			(event type)	(event type)	(total number)	col. (c)
Revenue	1	Gross receipts				
Rev	•	Cross receipts				
		Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Dire	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4	through 9 in column (d)		•	
	11	Net income summary. Subtract line 1	0 from line 3, column (d)	)		
Pa	rt I	Gaming. Complete if the orgathan \$15,000 on Form 990-E	anization answered "Y Z, line 6a.	es" to Form 990, Par	t IV, line 19, or repo	rted more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
_						
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes% No	Yes% No	Yes% No	
	7	Direct expense summary. Add lines 2	through 5 in column (d)		▶	
	8	Net gaming income summary. Subtra	act line 7 from line 1, col	umn (d)	<b>&gt;</b>	
	ı İs	nter the state(s) in which the organizate the organization licensed to operate g		of these states?		. Yes No
		Vere any of the organization's gaming I "Yes," explain:	icenses revoked, suspe			. Yes No

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. 22-6042838

11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other en formed to administer charitable gaming?  13 Indicate the percentage of gaming activity operated in:  a The organization's facility  b An outside facility  14 Enter the name and address of the person who prepares the organization's gaming/special events boorecords:  Name ▶  Address ▶  15 a Does the organization have a contract with a third party from whom the organization receives revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$  amount of gaming revenue retained by the third party ▶  c If "Yes," enter name and address of the third party:  Name ▶  Address ▶  Gaming manager information:	<u>-</u>	T T
formed to administer charitable gaming?  Indicate the percentage of gaming activity operated in:  The organization's facility  An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events body records:  Name ▶  Address ▶  15 a Does the organization have a contract with a third party from whom the organization receives revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$  amount of gaming revenue retained by the third party ▶ \$  c If "Yes," enter name and address of the third party:  Name ▶  Address ▶  Address ▶		Yes No
Indicate the percentage of gaming activity operated in:  The organization's facility  An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events boorecords:  Name ▶		_
a The organization's facility b An outside facility  14 Enter the name and address of the person who prepares the organization's gaming/special events body records:  Name ▶	, , . L	Yes No
b An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events body records:  Name ▶  Address ▶  15 a Does the organization have a contract with a third party from whom the organization receives revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$  amount of gaming revenue retained by the third party ▶ \$  c If "Yes," enter name and address of the third party:  Name ▶  Address ▶		
Enter the name and address of the person who prepares the organization's gaming/special events bod records:  Name ▶		<u>%</u>
Name ►  Address ►  Does the organization have a contract with a third party from whom the organization receives revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ► \$ amount of gaming revenue retained by the third party ► \$ c If "Yes," enter name and address of the third party:  Name ►  Address ►		%
Name ►  Address ►  15 a Does the organization have a contract with a third party from whom the organization receives revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ► \$	ks and	
Address ▶		
Address ▶		
<ul> <li>Does the organization have a contract with a third party from whom the organization receives revenue?</li> <li>b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$</li></ul>		
<ul> <li>Does the organization have a contract with a third party from whom the organization receives revenue?</li> <li>b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$</li></ul>		
revenue?  b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$		
<ul> <li>b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$</li></ul>		Yes No
amount of gaming revenue retained by the third party ▶ \$  c If "Yes," enter name and address of the third party:  Name ▶  Address ▶		Yes No
c If "Yes," enter name and address of the third party:  Name ▶	and the	
Name ►		
Address ►		
16 Gaming manager information:		
5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -		
Name ►		
Gaming manager compensation ▶ \$		
Description of acruings provided >		
Description of services provided ►		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming p	roceeds to	
retain the state gaming license?		Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organized		
or spent in the organization's own exempt activities during the tax year ▶ \$		
Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, column Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this par additional information (see instructions).		

#### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

2013
Open to Public

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Inspection
Employer identification number

22-6042838

Name of the organization

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

RECONCILIATION OF NET ASSETS

PART X NUMBER 9

OTHER CHANGES IN NET ASSETS OF \$(38) RELATE TO THE CHANGE IN VALUE OF SPLIT INTEREST ANNUITY AGREEMENTS.

**MEMBERS** 

PART VI, NUMBER 6

THE ORGANIZATION CHARGES A FEE TO INDIVIDUALS OR GROUPS TO BE MEMBERS.

ELECTION OF MEMBERS OF GOVERNING BODY

PART VI, NUMBER 7A

EACH YEAR, THE NOMINATING COMMITTEE PRESENTS A LIST OF CANDIDATES FOR ELECTION TO THE OPEN POSITIONS ON THE BOARD AND ALL OF THE DELEGATES AT LARGE. ONE DELEGATE AT LARGE IS ELECTED ANNUALLY FOR EACH 400 MEMBERS OF THE TRAIL CONFERENCE. NOMINATIONS BY PETITION ARE ALSO ACCEPTED, AS WELL AS NOMINATIONS FROM THE FLOOR IN CERTAIN CIRCUMSTANCES. ELECTIONS ARE MADE BY PROCLAMATION OR BY ELECTION BALLOT, WHICHEVER APPLIES, IN ACCORDANCE WITH THE BY-LAWS.

DECISIONS BY PERSONS OTHER THAN GOVERNING BODY

PART VI, NUMBER 7B

DECISIONS OF THE GOVERNING BODY (BOARD OF DIRECTORS), SUBJECT TO MEMBER

APPROVAL RELATE TO CHANGES IN BASIC MEMBERSHIP DUES, ADMISSION OF NEW

ORGANIZATIONS AND HONORARY MEMBERS, INITIATION OF NON-ROUTINE COURT

Schedule O (Form 990 or 990-EZ) 2013

Name of the organization

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Employer identification number

22-6042838

PROCEEDINGS, AND APPROVAL OF AMENDMENTS TO BY-LAWS.

REVIEW OF FORM 990

PART VI, NUMBER 11A

THE FIRST DRAFT OF FORM 990 IS SENT TO THE EXECUTIVE DIRECTOR AND TREASURER. THEY REVIEW AND SUGGEST CHANGES. A SECOND DRAFT IS PROVIDED TO THE AUDIT COMMITTEE FOR THEIR REVIEW AND SUGGESTED CHANGES. THE FINAL DRAFT IS SENT TO MEMBERS OF THE BOARD OF DIRECTORS FOR THEIR REVIEW AND COMMENTS PRIOR TO ITS BEING FILED.

CONFLICT OF INTEREST MONITORING

PART VI, NUMBER 12C

THE ENTIRE BOARD OF DIRECTORS COMPLETES A CONFLICT OF INTEREST FORM ANNUALLY AND RETURNS THEM TO THE CHAIR OF THE FINANCE COMMITTEE (TREASURER).

COMPENSATION OF TOP MANAGEMENT OFFICIALS

PART VI, NUMBER 15

LED BY THE BOARD CHAIR AND VICE CHAIR, THE BOARD OF DIRECTORS AND VOLUNTEER LEADERS ARE ALL SOLICITED FOR FEEDBACK ON THE PERFORMANCE OF THE ORGANIZATION'S EXECUTIVE DIRECTOR. BASED ON PERFORMANCE, THE BOARD OF DIRECTORS, USING SALARY DATA OF SIMILAR ORGANIZATIONS AND INTERNET RESEARCH ON SALARY TRENDS, THEN DECIDES ON THE SALARY FOR THE EXECUTIVE DIRECTOR. USING THIS SAME METHODOLOGY, THE EXECUTIVE DIRECTOR EVALUATES THE PERFORMANCE AND DETERMINES THE SALARY OF THE DEPUTY EXECUTIVE DIRECTOR.

Schedule O (Form 990 or 990-EZ) 2013

Name of the organization

NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC.

Employer identification number

22-6042838

AVAILABILITY OF GOVERNING DOCUMENTS TO PUBLIC

PART VI, NUMBER 19

THE BY-LAWS ARE ON THE ORGANIZATION'S WEBSITE. THE CONFLICT OF INTEREST

POLICY IS AVAILABLE UPON REQUEST. A CONDENSED VERSION OF THE ANNUAL

AUDITED FINANCIAL STATEMENTS IS PUBLISHED IN THE ORGANIZATION'S "TRAIL

WALKER" NEWSLETTER, AS WELL AS IN "CHARITY NAVIGATOR".

ATTACHMENT 1

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION GRANTS EXPENSES REVENUE

DARLINGTON HEADQUARTERS 22,904.

TOTALS \_\_\_\_\_22,904.

ATTACHMENT 2

FORM 990, PART VIII - INVESTMENT INCOME

(A)(B)(C)(D)TOTALRELATED ORUNRELATEDEXCLUDEDDESCRIPTIONREVENUEEXEMPT REVENUEBUSINESS REV.REVENUE

INTEREST AND DIVIDENDS 79,655. 79,655.

TOTALS 79,655. 79,655.

ATTACHMENT 3

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

DESCRIPTION BOOK VALUE BOOK VALUE

BOOK VALUE

PREPAID EXPENSES 29,863. 9,917.

TOTALS 29,863. 9,917.

Schedule O (Form 990 or 990-EZ) 2013 Page 2 Name of the organization Employer identification number NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. 22-6042838 ATTACHMENT 4 FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES BEGINNING ENDING COST DESCRIPTION BOOK VALUE BOOK VALUE OR FMV MONEY MARKET FUNDS 11,935. 170,318. FMV EQUITY FUNDS 801,055. 982,075. FMV BOND FUNDS 321,608. 212,075. FMV MUTUAL FUNDS 313,161. 405,395. FMV TOTALS 1,447,759. 1,769,863. ATTACHMENT 5 FORM 990, PART X - DEFERRED REVENUE BEGINNING ENDING DESCRIPTION BOOK VALUE BOOK VALUE DEFERRED REVENUE 132,052. 119,888.

132,052.

119,888.

TOTALS

IRS e-file Signature Authorization Form 8879-EO OMB No. 1545-1878 for an Exempt Organization For calendar year 2013, or fiscal year beginning  $01201_{-2}$ , 2013, and ending  $12231_{-2}$ , 20 13▶ Do not send to the IRS. Keep for your records. Department of the Treasury ▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo. Internal Revenue Service Employer Identification number Name of exempt organization NEW YORK-NEW JERSEY TRAIL CONFERENCE, INC. 22-6042838 RICHARD LEVINE, TREASURER Part I Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0on the applicable line below. Do not complete more than 1 line in Part I. 1a Form 990 check here ► X b Total revenue, If any (Form 990, Part VIII, column (A), line 12) . . . 1b 3,249,470. b Total revenue, if any (Form 990-EZ, line 9) . . . . . . . . . . 2b 2a Form 990-EZ check here ▶ L b Total tax (Form 1120-POL, line 22) 3b
b Tax based on Investment Income (Form 990-PF, Part VI, line 5), 4b 3a Form 1120-POL check here Form 990-PF check here > b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c) . . . . 5b Form 8868 check here > Part II Declaration and Signature Authorization of Officer Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions Involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only 2 X | authorize WITHUMSMITH+BROWN, PC as my signature Enter five numbers, but ERO firm name do not enter all zeros on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(les) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Dale > 05/06/2014 Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filling identification 2 0 0 6 number (EFIN) followed by your five-digit self-selected PIN. do not enter all zeros certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. **ERO Must Retain This Form - See Instructions** Do Not Submit This Form To the IRS Unless Requested To Do So Form 8879-EO (2013) For Paperwork Reduction Act Notice, see back of form.

JSA 3⊊1878 1.000