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Form 990

Department of the Treasury  
Internal Revenue Service

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2009

Open to Public  
Inspection

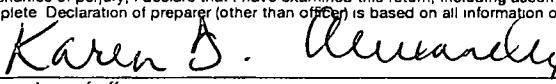
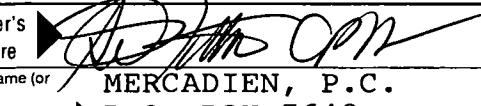
## A For the 2009 calendar year, or tax year beginning and ending

<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization  <b>NEW JERSEY UTILITIES ASSOCIATION, INC.</b>		<b>D</b> Employer identification number  <b>22-1723245</b>	
	Doing Business As			
	Number and street (or P O box if mail is not delivered to street address) <b>50 WEST STATE STREET</b>			Room/suite <b>1117</b>
	City or town, state or country, and ZIP + 4 <b>TRENTON, NJ 08608</b>			
	F Name and address of principal officer <b>KAREN D. ALEXANDER</b> <b>50 WEST STATE STREET SUITE 1117, TRENTON, NJ</b>			
	I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(6) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J Website:</b> ► <a href="http://WWW.NJUA.ORG">WWW.NJUA.ORG</a>		<b>E</b> Telephone number <b>(609) 392-1000</b>		
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		<b>G</b> Gross receipts \$ <b>913,899.</b>		
		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
		<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list. (see instructions)		
		<b>H(c)</b> Group exemption number ►		
		<b>L</b> Year of formation <b>1915</b> <b>M</b> State of legal domicile <b>NJ</b>		

## Part I Summary

<b>Activities &amp; Governance</b> <b>1</b> Briefly describe the organization's mission or most significant activities: <b>SUPPORTS NEW JERSEY UTILITIES ON BROAD BASED INDUSTRY AND BUSINESS ISSUES.</b> <b>2</b> Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. <b>3</b> Number of voting members of the governing body (Part VI, line 1a) <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <b>5</b> Total number of employees (Part V, line 2a) <b>6</b> Total number of volunteers (estimate if necessary) <b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12 <b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>3</b>	<b>16</b>	
	<b>4</b>	<b>16</b>	
	<b>5</b>	<b>4</b>	
	<b>6</b>	<b>0</b>	
	<b>7a</b>	<b>0.</b>	
	<b>7b</b>	<b>0.</b>	
	<b>Revenue</b> <b>8</b> Contributions and grants (Part VIII, line 1b) <b>9</b> Program service revenue (Part VIII, line 2g) <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>Prior Year</b>	<b>Current Year</b>
		<b>755,299.</b>	<b>769,378.</b>
		<b>116,356.</b>	<b>112,170.</b>
		<b>16,736.</b>	<b>2,300.</b>
		<b>15,507.</b>	<b>17,792.</b>
		<b>903,898.</b>	<b>901,640.</b>
<b>12,250.</b>		<b>13,000.</b>	
<b>419,945.</b>		<b>499,414.</b>	
<b>Expenses</b> <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ►	<b>287,053.</b>	<b>303,229.</b>	
	<b>719,248.</b>	<b>815,643.</b>	
	<b>184,650.</b>	<b>85,997.</b>	
<b>Net Assets or Fund Balances</b> <b>20</b> Total assets (Part X, line 16) <b>21</b> Total liabilities (Part X, line 26) <b>22</b> Net assets or fund balances Subtract line 21 from line 20	<b>Beginning of Current Year</b>	<b>End of Year</b>	
	<b>640,944.</b>	<b>806,168.</b>	
	<b>76,707.</b>	<b>157,513.</b>	
	<b>564,237.</b>	<b>648,655.</b>	

## Part II Signature Block

<b>Sign Here</b> ►  Signature of officer ► <b>KAREN D. ALEXANDER, PRESIDENT AND CEO</b> Type or print name and title	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	Date <b>5/17/10</b>		
<b>Paid Preparer's Use Only</b> Preparer's signature  Firm's name (or yours if self-employed), address, and ZIP + 4 <b>MERCADIEN, P.C.</b> <b>P.O. BOX 7648</b> <b>PRINCETON, NJ 08543-7648</b>	Date <b>1/4/16</b>	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
			<b>EIN</b> ►
			Phone no ► <b>609-689-9700</b>

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

 Yes  No

### **Part III Statement of Program Service Accomplishments**

**1 Briefly describe the organization's mission:**

SUPPORTS NEW JERSEY UTILITIES ON BROAD-BASED INDUSTRY AND BUSINESS ISSUES BEFORE THE LEGISLATURE AND REGULATORY AGENCIES. PROVIDES INFORMATION ABOUT PUBLIC POLICY ISSUES OF INTEREST TO NEW JERSEY INVESTOR-OWNED UTILITIES.

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

Yes  X No

3 If "Yes," describe these new services on Schedule O.  Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and

4a (Code- ) (Expenses \$ 815,643. Including grants of \$ ) (Revenue \$ )  
SUPPORTS NEW JERSEY UTILITIES ON BROAD-BASED INDUSTRY AND BUSINESS  
ISSUES BEFORE THE LEGISLATURE AND REGULATORY AGENCIES. PROVIDES  
INFORMATION ABOUT PUBLIC POLICY ISSUES OF INTEREST TO NEW JERSEY  
INVESTOR-OWNED UTILITIES.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c (Code ) (Expenses \$ ) including grants of \$ ) (Revenue \$ )**

**4d Other program services (Describe in Schedule O.)**

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_)

) (Revenue \$

1

4e Total program service expenses ► \$ 815,643.

## Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2	X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable <ul style="list-style-type: none"> <li>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI</li> <li>• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII</li> <li>• 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</li> <li>• 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.</li> <li>• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X</li> <li>• 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? If "Yes," complete Schedule D, Part XI.</li> </ul>	11	X
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	X

## Part IV Checklist of Required Schedules (continued)

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

Form 990 (2009)

## Part V Statements Regarding Other IRS Filings and Tax Compliance

	Yes	No	
1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	12	
1b	1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
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	2a	4	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)</i>			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? <i>b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O</i>			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? <i>b If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts</i>			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? <i>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?</i>			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? <i>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</i>			
<b>7 Organizations that may receive deductible contributions under section 170(c).</b> <i>a 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?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year</i>	7d		
<i>e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?</i>			
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
<b>9 Sponsoring organizations maintaining donor advised funds.</b> <i>a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?</i>			
<b>10 Section 501(c)(7) organizations.</b> Enter: <i>a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</i>	10a		
	10b		
<b>11 Section 501(c)(12) organizations.</b> Enter <i>a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</i>	11a		
	11b		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? <i>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</i>	12b		

**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.

### Section A. Governing Body and Management

	1a	1b	16	Yes	No
1a Enter the number of voting members of the governing body					
b Enter the number of voting members that are independent					
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X	
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 organizational documents since the prior Form 990 was filed?	4			X	
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5			X	
6 Does the organization have members or stockholders?	6			X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X			
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X		
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
a The governing body?	8a	X			
b Each committee with authority to act on behalf of the governing body?	8b	X			
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X		

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	X
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12b	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12c	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	13	X
13 Does the organization have a written whistleblower policy?	14	X
14 Does the organization have a written document retention and destruction policy?	15	X
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?	15a	X
a The organization's CEO, Executive Director, or top management official	15b	X
b Other officers or key employees of the organization	16a	X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)	16b	
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?		
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ►	NONE	
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.		
<input type="checkbox"/> Own website	<input type="checkbox"/> Another's website	<input checked="" type="checkbox"/> Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public		
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►		
MANAGEMENT – 609-392-1000		
50 WEST STATE STREET SUITE 1117, TRENTON, NJ 08608		

Form 990 (2009)

**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. Use Schedule J-2 if additional space is needed.

• 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. 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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
DENNIS W. DOLL CHAIRMAN	1.00	X		X			0.	0.	0.
LOUIS M. WALTERS 2ND VICE CHAIRMAN	1.00	X		X			0.	0.	0.
DAVID ERN SECRETARY AND TREASURER	1.00	X		X			0.	0.	0.
DONALD F. CARTER 1ST VICE CHAIRMAN	1.00	X		X			0.	0.	0.
DENNIS M. BONE AT-LARGE EXECUTIVE COMMI	1.00	X		X			0.	0.	0.
JOHN BIGELOW DIRECTOR	1.00	X					0.	0.	0.
DAVID F. BOSNICK DIRECTOR	1.00	X					0.	0.	0.
RICHARD CHAPKIS DIRECTOR	1.00	X					0.	0.	0.
DENNIS L. CIEMNIECKI DIRECTOR	1.00	X					0.	0.	0.
WILLIAM DAVIS DIRECTOR	1.00	X					0.	0.	0.
EDWARD J. GRAHAM DIRECTOR	1.00	X					0.	0.	0.
MARK Kahrer DIRECTOR	1.00	X					0.	0.	0.
RALPH A. LAROSSA DIRECTOR	1.00	X					0.	0.	0.
WILLIAM LONGHI DIRECTOR	1.00	X					0.	0.	0.
DONALD M. LYNCH DIRECTOR	1.00	X					0.	0.	0.
VINCENT MAIONE DIRECTOR	1.00	X					0.	0.	0.
ERIC OLSEN, PE DIRECTOR	1.00	X					0.	0.	0.

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

## 2 Total

compensation from the organization ►

1

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

## **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

## Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f ►	1a 1b 769,378. 1c 1d 1e 1f 769,378.			
Program Service Revenue	2 a ANNUAL MEETING b BPU REPORT c EMERGENCY INFORMATION d e f All other program service revenue g Total. Add lines 2a-2f ►	Business Code 900099 900099 900099 112,170.	85,810. 23,434. 2,926.	85,810. 23,434. 2,926.	
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a MISCELLANEOUS INCOME b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions	(i) Real 112,170. (ii) Personal 112,170. (i) Securities 112,170. (ii) Other 112,170. a 28,909. b 12,259. 16,650. a b 16,650. a b 16,650. a b 16,650. Business Code 900099 1,142. 1,142. 1,142. 901,640. 113,312. 0. 18,950.	2,300.		2,300.

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	13,000.	13,000.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	247,246.	247,246.		
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	181,102.	181,102.		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,452.	6,452.		
9 Other employee benefits	35,046.	35,046.		
10 Payroll taxes	29,568.	29,568.		
11 Fees for services (non-employees)				
a Management				
b Legal	6,916.	6,916.		
c Accounting	41,029.	41,029.		
d Lobbying	850.	850.		
e Professional fundraising services See Part IV, line 17				
f Investment management fees	2,329.	2,329.		
g Other	7,912.	7,912.		
12 Advertising and promotion	18,754.	18,754.		
13 Office expenses	1,667.	1,667.		
14 Information technology				
15 Royalties	66,647.	66,647.		
16 Occupancy	4,523.	4,523.		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	98,291.	98,291.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,524.	3,524.		
23 Insurance	11,789.	11,789.		
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a BPU REPORT	18,722.	18,722.		
b DUES AND SUBSCRIPTIONS	8,378.	8,378.		
c CHARITABLE CONTRIBUTION	4,550.	4,550.		
d REPAIRS AND MAINTENANCE	4,376.	4,376.		
e EMERGENCY INFORMATION C	2,932.	2,932.		
f All other expenses	40.	40.		
25 Total functional expenses. Add lines 1 through 24f	815,643.	815,643.	0.	0.
26 Joint costs Check here ► <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	11,014.	1	15,043.
	2 Savings and temporary cash investments	587,746.	2	732,174.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	8,305.	4	28,830.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	18,947.	9	18,713.
	10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	61,094.		
	b Less. accumulated depreciation	49,686.	10c	11,408.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	640,944.	16	806,168.
Liabilities	17 Accounts payable and accrued expenses	76,707.	17	83,278.
	18 Grants payable		18	
	19 Deferred revenue		19	74,235.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	76,707.	26	157,513.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	527,833.	27	608,601.
	28 Temporarily restricted net assets	36,404.	28	40,054.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	564,237.	33	648,655.
	34 Total liabilities and net assets/fund balances	640,944.	34	806,168.

Form 990 (2009)

## Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	3a	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
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	3b	

Form 990 (2009)

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

- 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.
- 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.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations. Complete Part III.

Name of organization

**Employer identification number**

NEW JERSEY UTILITIES ASSOCIATION, INC. 22-1723245

**Part I-A** Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1** Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2** Political expenditures
- 3** Volunteer hours

**Part I-B** Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ \_\_\_\_\_  
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ \_\_\_\_\_  
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  
4a Was a correction made?  
b If "Yes," describe in Part IV.

**Part I-C** Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ \_\_\_\_\_

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ \_\_\_\_\_

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ \_\_\_\_\_

4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

**For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ**

Schedule C (Form 890 or 890-EZ) 2009

148

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**A Check ►  if the filing organization belongs to an affiliated group.B Check ►  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If "Yes," describe in Part IV			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	X

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."**

1 Dues, assessments and similar amounts from members	1	769,378.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	32,074.
b Carryover from last year	2b	
c Total	2c	32,074.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	7,511.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	28,090.
5 Taxable amount of lobbying and political expenditures (see instructions)	5	<3,527. >

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1. Also, complete this part for any additional information.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

NEW JERSEY UTILITIES ASSOCIATION, INC.

Employer identification number

22-1723245

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year		
a Total number of conservation easements		<b>Held at the End of the Tax Year</b>
b Total acreage restricted by conservation easements		2a
c Number of conservation easements on a certified historic structure included in (a)		2b
d Number of conservation easements included in (c) acquired after 8/17/06		2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►		2d
4 Number of states where property subject to conservation easement is located ►		
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►		
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$		
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements		

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:	
a Revenues included in Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

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

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

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other _____
c <input type="checkbox"/> Preservation for future generations	

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV

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

1a Beginning of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► \_\_\_\_\_ %  
 b Permanent endowment ► \_\_\_\_\_ %  
 c Term endowment ► \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by

(i) unrelated organizations  
 (ii) related organizations

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

4 Describe in Part XIV the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(ii)		
3b		

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		61,094.	49,686.	11,408.
e Other				0.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))				► 11,408.

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other _____		
<b>Total</b> (Col (b) must equal Form 990, Part X, col (B) line 12 ) ►		

Total (Col (b) must equal Form 990, Part X, col (B) line 12) ►

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

**Total. (Col (b) must equal Form 990, Part X, col (B) line 13 ) ►**

**Part IX Other Assets.** See Form 990, Part X, line 15

**Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )**

**Part X Other Liabilities.** See Form 990, Part X, line 25

1.	(a) Description of liability	(b) Amount
	Federal income taxes	

**Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )**

**2. FIN 48 Footnote** In Part XIV, 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.

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	901,640.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	815,643.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	3	85,997.
4 Net unrealized gains (losses) on investments	4	<1,579. >
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV.)	8	
9 Total adjustments (net). Add lines 4 through 8	9	<1,579. >
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	84,418.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1 Total revenue, gains, and other support per audited financial statements	1	912,320.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	2a	<1,579. >
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV.)	2d	12,259.
e Add lines 2a through 2d	2e	10,680.
3 Subtract line 2e from line 1	3	901,640.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV.)	4b	
c Add lines 4a and 4b	4c	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	901,640.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1 Total expenses and losses per audited financial statements	1	827,902.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV.)	2d	12,259.
e Add lines 2a through 2d	2e	12,259.
3 Subtract line 2e from line 1	3	815,643.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV.)	4b	
c Add lines 4a and 4b	4c	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	815,643.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

**SPECIAL EVENTS:** 12259.

**PART XIII, LINE 2D - OTHER ADJUSTMENTS:**

**SPECIAL EVENTS:** 12259.

2 Enter total number of section 501(c)(3) and government organizations  
3 Enter total number of other organizations

HA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990

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(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation	(f) Description of non-cash assistance
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SCHOLARSHIPS		recipients	cash grant	cash assistance (book, FMV, appraisal, other)
		13	13,000.	0.

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information

**SCHEDULE J**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.  
 ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

**2009****Open to Public Inspection****Name of the organization****NEW JERSEY UTILITIES ASSOCIATION, INC.****Employer identification number****22-1723245****Part I Questions Regarding Compensation**

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual subharmonic communication unit has associated with it a unique identifier, denoted in the subharmonic communication unit as  $\text{unit}_i$  (1)

Do not list any individuals that are not listed on Form 000 Part VII of each individual whose compensation must be reported. **SCHE**

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
► Attach to Form 990.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

NEW JERSEY UTILITIES ASSOCIATION, INC.

Employer identification number  
22-1723245

FORM 990, PART VI, SECTION A, LINE 6: THE ASSOCIATION'S MEMBERS ARE  
COMPRISED PRIMARILY OF NEW JERSEY INVESTOR-OWNED UTILITIES.

FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE ASSOCIATION  
ELECT THE MEMBERS OF THE BOARD OF DIRECTORS ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 11: THE ASSOCIATION'S LOBBYING AND  
POLITICAL EXPENSES WERE LESS THAN ITS MEMBERSHIP DUES FOR THE YEAR.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS ANNUALLY  
COMPLETES A CONFLICT OF INTEREST DISCLOSURE FORM WHICH IS SUBMITTED TO THE  
PRESIDENT FOR REVIEW. ANY CONFLICTS ARE REPORTED BACK TO THE BOARD AND THE  
AFFECTED BOARD MEMBERS WOULD ABSTAIN FROM ANY VOTING ON CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15A: ANNUALLY THE EXECUTIVE COMMITTEE OF  
THE BOARD OF DIRECTORS EVALUATES THE PRESIDENT'S PERFORMANCE AND AWARDS A  
COMPENSATION PACKAGE FOR THE FISCAL YEAR. THE COMMITTEE PERIODICALLY  
OBTAINS COMPARABLE DATA FOR COMPENSATION RANGES FOR THE PRESIDENT FROM  
SIMILAR ORGANIZATIONS.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS  
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS  
AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 2C: A COMMITTEE OF THE BOARD OF DIRECTORS  
ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE ANNUAL AUDIT AND

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.  
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02-03-10

Schedule O (Form 990) 2009



## 2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Year Deduction	Ending Accumulated Depreciation
1 COMPUTER PRINTER		07/01/89 SL		5.00	HY16	1,897.				1,897.		0.	1,897.
2 XEROX COPIER		07/01/89 \$4,54.		\$,44.	X16	4,364.				\$,363.		0.	7,363.
3 PHONE SYSTEM		07/01/91 SL		5.00	HY16	4,561.				4,561.		0.	4,561.
4 PERSONAL COMPUTER		07/01/93 \$4,54.		\$,44.	X16	4,364.				\$,363.		0.	4,363.
5 SHARP FAX MACHINE		07/01/94 SL		5.00	HY16	1,102.				1,102.		0.	1,102.
6 COMPAQ COMPUTER		07/01/94 \$4,54.		\$,44.	X16	4,364.				\$,363.		0.	4,363.
7 COMPUTER PRINTER		07/01/95 SL		5.00	HY16	223.				223.		0.	223.
8 COMPAQ COMPUTER		07/01/95 \$4,54.		\$,44.	X16	4,364.				\$,363.		0.	4,363.
9 COMPUTER MODEM		07/01/96 SL		5.00	HY16	235.				235.		0.	235.
10 COMPUTER PRINTER		07/01/98 \$4,54.		\$,44.	X16	4,364.				\$,363.		0.	4,363.
11 COMPUTER PRINTER		02/09/98 SL		5.00	HY16	417.				417.		0.	417.
12 COMPUTER PRINTER		03/09/98 \$4,54.		\$,44.	X16	4,364.				\$,363.		0.	4,363.
13 COMPAQ COMPUTER		08/14/98 SL		5.00	HY16	1,378.				1,378.		0.	1,378.
14 COMPUTER HARDWARE		12/16/98 \$4,54.		\$,44.	X16	4,364.				\$,363.		0.	4,363.
15 COMPUTER HARDWARE		08/25/99 SL		5.00	HY16	1,738.				1,738.		0.	1,738.
16 COMPUTER HARDWARE		10/06/99 \$4,54.		\$,44.	X16	244.				244.		0.	244.
17 COMPUTER HARDWARE		12/15/99 SL		5.00	HY16	424.				424.		0.	424.
18 TV/ VCR		03/13/00 \$4,54.		\$,44.	X16	4,364.				4,363.		0.	4,363.

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04-24-09

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

## 2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Of Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Year Deduction	Ending Accumulated Depreciation
19	LASER PRINTER	10/22/02	SL	5.00	HY16	1,829.			1,829.	1,829.		0.	1,829.
20	COMPAQ PRO DESKTOP NODE	10/22/03	\$14	\$,00	HY16	334.			\$70.	\$70.	0.	0.	334.
21	17" PHILLIPS MONITOR	03/20/06	SL	5.00	HY16	325.			325.	179.	65.	244.	
22	COMPUTER EQUIPMENT NETWORK	07/27/08	\$14	\$,00	HY16	3,514.			3,514.	1,665.	702.	2,357.	
23	DELL 2400MP DLP PROJECTOR	11/14/07	SL	5.00	HY16	1,147.			1,147.	267.	229.	496.	
24	COMPUTER AND ACCESSORIES	02/01/08	\$14	\$,00	HY16	4,548.			4,548.	283.	309.	592.	
25	AVAYA - PHONE	11/06/08	SL	5.00	HY16	3,626.			3,626.	60.	725.	785.	
26	DELL OPTIPLEX 755	12/17/08	\$14	\$,00	HY16	4,316.			4,316.	1,245.	343.	343.	
27	DELL OPTIFLEX COMPUTERS - 3	12/24/08	SL	5.00	HY16	4,350.			4,350.	4,350.	870.	870.	
* 930 PRK# 19 TOTAL ~													
28	DISPLAY BOARD	07/01/90	SL	5.00	HY16	4,312.			4,312.	4,312.	0.	4,312.	
29	FILE CABINETS	07/01/95	\$14	\$,00	HY16	3,226.			3,226.	2,235.	0.	2,226.	
30	BOOKCASE	07/01/95	SL	5.00	HY16	249.			249.	249.	0.	249.	
31	COMPUTER CART	07/01/95	\$14	\$,00	HY16	34.			34.	32.	0.	32.	
32	COMPUTER CART	07/01/95	SL	5.00	HY16	191.			191.	191.	0.	191.	
33	BOOKCASE	07/01/95	\$14	\$,00	HY16	214.			214.	214.	0.	214.	
34	WALL UNIT	07/01/95	SL	5.00	HY16	142.			142.	142.	0.	142.	
35	PRINTER STAND	02/27/98	\$14	\$,00	HY16	116.			116.	116.	0.	116.	

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04-24-09

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Beginning Accumulated Depreciation	Basis For Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
36	SECRETARIAL UNITS	03/24/98	SL	5.00	HY16	700.				700.	700.		0.	700.
37	METALIC FURNITURE	03/24/98	\$12	5.00	HY16	400.				400.	400.		0.	400.
38	DESK & CREDENZA	05/04/98	SL	5.00	HY16	1,485.				1,485.	1,485.		0.	1,485.
39	CHAIR METAL	05/18/98	\$14	5.00	HY16	440.				440.	440.		0.	440.
40	BOOKCASE	05/18/98	SL	5.00	HY16	258.				258.	258.		0.	258.
41	OFFICE CHAIRS	06/03/98	\$14	5.00	HY16	228.				228.	228.		0.	228.
42	LASER FAX	05/19/99	SL	5.00	HY16	356.				356.	356.		0.	356.
43	BOOKCASE	06/14/99	\$14	5.00	HY16	429.				429.	429.		0.	429.
44	LOW BACK GRANADA CHAIR	08/04/06	SL	5.00	HY16	320.				320.	155.		64.	219.
45	2 DRAWER LATERAL FILE ~ WOOD	09/23/07	\$14	5.00	HY16	367.				367.	67.		53.	320.
46	DESK , LATERAL FILE , TILTER	11/17/08	SL	5.00	HY16	1,311.				1,311.	22.		262.	284.
	* 990 PAGE 10 TOTAL ~										42,775.		373.	14,501.
	* GRAND TOTAL 990 PAGE 10 DEPR										61,092.	46,161.	3,522.	49,683.

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04-24-09

(D) • Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone