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DLN: 93493112006304

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

Open to Public

A Fo	r the 2012 ca	lendar year, or tax year beginning	g 07-01-2012 <u>, 2012, and ending 06-</u>	30-2013		
	eck if applicable	C Name of organization NEW JERSEY STATE BAR ASSOCIATION	ON		D Employe	r identification number
	Iress change	Doing Business As			21-072	3663
	me change aal return					
_	minated	Number and street (or P O box if m ONE CONSTITUTION SQUARE	iall is not delivered to street address) Room/s	uite	E Telephone	e number
_	ended return	Suite City or town, state or country, and 2	7IP + 4		(732)2	49-5000
_	olication pending	NEW BRUNSWICK, NJ 08901			G Gross rece	eipts \$ 11,446,066
		F Name and address of prin	ncıpal officer	H(a) Is th	ıs a group re	eturn for
		RALPH J LAMPARELLO ONE CONSTITUTION SQU	ARE		ites?	┌ Yes 🗸 No
		NEW BRUNSWICK, NJ 0890		H(b) Are a	all affiliates	ıncluded?
	x-exempt statu	F F01/6//2\ \ \ \ F01/6\ / 6\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Insert no) 4947(a)(1) or 527	If"N	o," attach a	list (see instructions)
	·	WW NJSBA COM	111Sett 110) 4947(a)(1) 01 527	H(c) Grou	ıp exemptio	n number ►
						<u> </u>
		n Corporation Trust Associatio	n Other ►	L Year of fo	rmation 1899	M State of legal domicile NJ
Ра		nmary				
		describe the organization's missic STER AND PROMOTE BOTH THE	E PROFESSIONAL AND PERSONAL I	NTEREST OF	ATTORNEY	S IN THE STATE OF NJ,
an .	<u>PRO V I</u>	DE EDUCATIONAL OPPORTUNI	ITIES, SERVE AS A LIASON TO GOV	ZERNMENT A	GENCIES A	ND THE PUBLIC
≗						
<u> </u>						
Governance	2 Check	this box দ if the organization dis	scontinued its operations or disposed	of more than 2	5% of its n	et assets
Activities &		· · ·	ing body (Part VI, line 1a)			3 49 4 9
Ě			of the governing body (Part VI, line 1b			4 49 5 48
돷			calendar year 2012 (Part V, line 2a) ecessary)			6 0
4			art VIII, column (C), line 12		_	7a 69,584
			rom Form 990-T, line 34			7b
			·			
	l .			Pric	r Year	Current Year
	8 Cont	ributions and grants (Part VIII, lii	ne 1h)		3,563,44	
alle			ne 1h)			6 3,551,558
enueve	9 Prog	ram service revenue (Part VIII, li			3,563,44	6 3,551,558 4 6,540,215
Rayenue	9 Prog10 Inve11 Othe	ram service revenue (Part VIII, li stment income (Part VIII, column r revenue (Part VIII, column (A),	ne 2g)		3,563,44 6,751,91	6 3,551,558 4 6,540,215 5 62,362
Revenue	9 Prog10 Inve11 Othe12 Tota	ram service revenue (Part VIII, li stment income (Part VIII, column r revenue (Part VIII, column (A), l revenue—add lines 8 through 11	ne 2g)		3,563,44 6,751,91 29,37 924,26	6 3,551,558 4 6,540,215 5 62,362 0 653,135
Revenue	9 Prog10 Inve11 Othe12 Tota12)	ram service revenue (Part VIII, li stment income (Part VIII, column r revenue (Part VIII, column (A), l revenue—add lines 8 through 11	ne 2g)	ne	3,563,44 6,751,91 29,37	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270
Revenue	 9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 	ram service revenue (Part VIII, li stment income (Part VIII, column r revenue (Part VIII, column (A), l revenue—add lines 8 through 11 	ne 2g)	ne	3,563,44 6,751,91 29,37 924,26	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270 0 0
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	 9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salai 5-10 16a Profe 	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column (A), revenue—add lines 8 through 11	ne 2g)	ne .	3,563,44 6,751,91 29,37 924,26 11,268,99	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270 0 0 0 0
Expenses Revenue	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salai 5-10 16a Profe b Total	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column (A), revenue—add lines 8 through 11	ne 2g)		3,563,44 6,751,91 29,37 924,26 11,268,99	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270 0 0 0 0
	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salar 5-10 16a Profe b Total 17 Othe	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through 11	ne 2g)		3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270 0 0 0 0 4,499,533 0 0
	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salar 5-10 16a Profe b Total 17 Othe 18 Tota	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column (A), revenue—add lines 8 through 11	Ine 2g)		3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75 5,622,92 9,644,67	6 3,551,558 4 6,540,215 5 62,362 0 653,135 25 10,807,270 0 0 0 0 6 4,499,533 0 0
Expenses	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salar 5-10 16a Profe b Total 17 Othe 18 Tota	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column (A), revenue—add lines 8 through 11	ne 2g)		3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270 0 0 0 0 6 4,499,533 0 0 2 5,868,762 8 10,368,295 7 438,975
Expenses	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salar 5-10 16a Profe b Total 17 Othe 18 Tota	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column (A), revenue—add lines 8 through 11	Ine 2g)	Beginning	3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75 5,622,92 9,644,67 1,624,31	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270 0 0 0 0 6 4,499,533 0 0 2 5,868,762 8 10,368,295 7 438,975
Expenses	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salai 5-10 16a Profe b Total 17 Othe 18 Tota 19 Reve 20 Total	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column (A), revenue—add lines 8 through 11	ne 2g)	Beginning	3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75 5,622,92 9,644,67 1,624,31 g of Current 'ear 6,916,72	6 3,551,558 4 6,540,215 5 62,362 0 653,135 0 10,807,270 0 0 0 0 0 0 6 4,499,533 0 0 2 5,868,762 8 10,368,295 7 438,975 End of Year 3 7,383,201
Expenses	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salar 5-10 16a Profe b Total 17 Othe 18 Tota 19 Reve 20 Tota 21 Tota	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through 11	ne 2g)	Beginning	3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75 5,622,92 9,644,67 1,624,31 g of Current 'ear 6,916,72 3,509,49	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270 0 0 0 0 6 4,499,533 0 0 2 5,868,762 8 10,368,295 7 438,975 End of Year 3 7,383,201 1 3,506,299
Net Assets or Expenses Fund Balances	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salar 5-10 16a Profe b Total 17 Othe 18 Tota 19 Reve 20 Tota 21 Tota 22 Net a	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through 11	ne 2g)	Beginning	3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75 5,622,92 9,644,67 1,624,31 g of Current 'ear 6,916,72	6 3,551,558 4 6,540,215 5 62,362 0 653,135 5 10,807,270 0 0 0 0 6 4,499,533 0 0 2 5,868,762 8 10,368,295 7 438,975 End of Year 3 7,383,201 1 3,506,299
A Fund Balances Expenses	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salai 5-10 16a Profe b Total 17 Othe 18 Tota 19 Reve 20 Tota 21 Tota 22 Net a 111 Sig r penalties o	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through 11	ne 2g)	Beginning Y	3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75 5,622,92 9,644,67 1,624,31 g of Current fear 6,916,72 3,509,49 3,407,23	6 3,551,558 4 6,540,215 5 62,362 0 653,135 0 0 0 0 0 0 0 6 4,499,533 0 0 2 5,868,762 8 10,368,295 7 438,975 End of Year 3 7,383,201 1 3,506,299 2 3,876,902
A Fund Balances Expenses	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salar 5-10 16a Profe b Total 17 Othe 18 Tota 19 Reve 20 Tota 21 Tota 22 Net a 11 Sig r penalties on only ledge and other has any	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through 11	Ine 2g)	Beginning Y nying schedule than officer) is	3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75 5,622,92 9,644,67 1,624,31 g of Current /ear 6,916,72 3,509,49 3,407,23 es and state based on al	6 3,551,558 4 6,540,215 5 62,362 0 653,135 0 0 0 0 0 0 0 6 4,499,533 0 0 2 5,868,762 8 10,368,295 7 438,975 End of Year 3 7,383,201 1 3,506,299 2 3,876,902
A Fund Balances Expenses	9 Prog 10 Inve 11 Othe 12 Tota 12) 13 Gran 14 Bene 15 Salai 5-10 16a Profe b Total 17 Othe 18 Tota 19 Reve 20 Tota 21 Tota 22 Net a 111 Sig r penalties on only edge and other has any	ram service revenue (Part VIII, listment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through 11	Ine 2g)	Beginning Y nying schedule than officer) is	3,563,44 6,751,91 29,37 924,26 11,268,99 4,021,75 5,622,92 9,644,67 1,624,31 g of Current fear 6,916,72 3,509,49 3,407,23	6 3,551,558 4 6,540,215 5 62,362 0 653,135 0 0 0 0 0 0 0 6 4,499,533 0 0 2 5,868,762 8 10,368,295 7 438,975 End of Year 3 7,383,201 1 3,506,299 2 3,876,902
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Firm's address > 465 South St Ste 200

Mornstown, NJ 079606497

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

Paid

Preparer

Use Only

self-employed

Phone no (973) 898-9494

Firm's EIN 🕨

✓ Yes ☐ No

Par		nt of Program Serv			ı	
1	Briefly describe t	he organization's missio	n			
THE GOV ACC BON EDU PRAG	STATE OF NEW JE ERNMENTAL ENT ESS TO THE JUST O ACTIVITIES TO CATIONAL OPPO	RSEY TO SERVE AS T ITIES AND THE PUBLI ICE SYSTEM, FAIRNES O FOSTER PROFESSIO RTUNITIES TO NEW JE O PROVIDE EDUCATIO	HE VOICE OF I C WITH REGAR S IN ITS ADMI NALISM AND P RSEY ATTORN	NEW JERSEY ATTOR D TO THE LAW, LEG INISTRATION AND RIDE IN THE PROFI	ONAL INTERESTS OF ITS M NEYS TO OTHER ORGANIZ. AL PROFESSION AND LEGA ENCOURAGE PARTICIPATI ESSION AND THE NJSBA TO THE QUALITY OF LEGAL SER DENHANCE AWARENESS OF	ATIONS, L SYSTEM TO PROMOT ON IN VOLUNTARY PRO O PROVIDE RVICES AND THE
2	Did the organizati the prior Form 99		cant program se	ervices during the yea	ar which were not listed on	
	If "Yes," describe	these new services on S	Schedule O			
3	Did the organizati	on cease conducting, or	make sıgnıfıcar	-	onducts, any program	
	If "Yes," describe	these changes on Sche	dule O			
4	expenses Section		4) organizations	s are required to repo	hree largest program services rt the amount of grants and al	
4a	(Code) (Expenses \$	2,158,929	ıncludıng grants of \$	0) (Revenue \$	4,861,104)
					'S, WHO ARE REQUIRED TO SATISFY SON, AS ON-DEMAND DOWNLOADABL	
4b	(Code) (Expenses \$	1,358,723	ıncludıng grants of \$	0) (Revenue \$	1,601,589)
	CONFERENCES, CON DISCUSS VARIOUS T		EMINARS, MID-YEA	R MEETING, GENERAL CO	UNCIL MEETING, VARIOUS SEMINAR	S, DINNER AND LUNCHEONS TO
4c	(Code) (Expenses \$	257,488	ıncludıng grants of \$	0) (Revenue \$	0)
		ING OF NEW JERSEY LAWYER E LEGAL PROFESSION	MAGAZINE AND OT	HER PUBLICATIONS OF TI	HE ASSOCIATION COVERING VARIOU	S AREAS OF THE LAW AND THE
4d	Other program s	ervices (Describe in Sch	nedule O)			
	(Expenses \$	51,626 in	cluding grants o	of\$	0)(Revenue\$	147,106)
<u>4e</u>	Total program se	rvice expenses 🕨	3 8 2 6 7 6 6			

art IV	Checklist of	Required	Schedules
	CHECKIISLOI	requireu	Scriedule

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
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	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1^7 If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "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, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
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	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, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	Check if Schedule O contains a response to any question in this Part V	•	Yes	
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 19		165	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
•	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
	by this return	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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			
	account)?	4a		١
b	If "Yes," enter the name of the foreign country 🕒	_		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
_	Weekle and make a make to a make held to a held the standard of the standard o	-		<u> </u>
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		'
)		5b		1
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		H
-	organization solicit any contributions that were not tax deductible as charitable contributions?			Ľ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
_	services provided to the payor?	<u></u>		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
		1		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
7	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		
	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?			
)	Sponsoring organizations maintaining donor advised funds.	8		
		9a		
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		-
D	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b	1		
_	facilities	1		
L	Section 501(c)(12) organizations. Enter			
а	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)			
]		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		\vdash
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	1.0		
	Note. See the instructions for additional information the organization must report on Schedule O	13a		<u>L</u>
b	Enter the amount of reserves the organization is required to maintain by the states			
_	This which the organization is incensed to issue qualified fleath plans	1		
	Enter the amount of reserves on hand 13c		!	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		l١

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal F	Reveni	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10a 10b 11a 12a 12b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►ANGELA SCHECK ONE CONSTITUTION SQUARE NEW BRUNSWICK, NJ (732) 249-5000

Form 990	(2012	•
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

	1	1								
(A) Name and Title	(B) A verage hours per week (list any hours	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)		organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

for related organizations below dotted line) Trustee Trustee	
1b Sub-Total	
c Total from continuation sheets to Part VII, Section A	- 074
d Total (add lines 1b and 1c)	5,074
\$100,000 of reportable compensation from the organization \(\blue{6}\)	
Yes N	<u> </u>
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	0
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 or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	0
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 Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (B) (C) Description of services Compensation	—

(A) Name and business address	(B) Description of services	(C) Compensation
BORGATA HOTEL CASINO AND SPA , ONE BORGATA WAY ATLANTIC CITY NJ 08401	MEETING SPACE	454,213
DAVID ALAN CATERERS LLC , 5C LITTELL ROAD EAST HANOVER NJ 07936	CATERING	131,168
QUADGRAPHICS INC , PO BOX 842858 BOSTON MA 022842858	PRINTING	107,180
Total number of independent contractors (including but not limited to those lighted	. h \ h	1

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►3

		Check if Schedule O contains a respo		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
u 20	1a	Federated campaigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership dues 1b	3,551,558				
tributions, Gifts, Grants Other Similar Amounts	c	Fundraising events 10					
its,	d	Related organizations 1d					
ı. Eği	e	Government grants (contributions) 1e					
ons Sir	.	All other contributions, gifts, grants, and 1f		-			
uti her	١.	sımılar amounts not ıncluded above					
ğ	g	Noncash contributions included in lines 1a-1f \$					
Contand	h	Total. Add lines 1a-1f	🗼	3,551,558			
			Business Code				
Program Serwoe Revenue	2a	CONTINUING LEGAL EDUCATION	900099	4,861,104	4,861,104		
Rev	ь	MEETINGS & SEMINARS	900099	1,601,589	1,601,589		
166	С	YOUNG LAWYERS' DIVISION	900099	54,318	54,318		
Xer.	d	ETHICS DIVERSIONARY PROGRAM	900099	23,204	23,204		
E .	e						
ogra	f	All other program service revenue					
Δ̈́	g	Total. Add lines 2a-2f		6,540,215			
	3	Investment income (including dividen		29,138			29,138
	4	and other similar amounts) Income from investment of tax-exempt bond	l l	0			,
	5	Royalties	·	0			
		(ı) Real	(II) Personal				
	6a	Gross rents 126,339					
	b	Less rental expenses					
	c	Rental income 126,339 or (loss)	0				
	d	Net rental income or (loss)		126,339			126,339
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory					
	ь	Less cost or other basis and					
		sales expenses					
	C	Gain or (loss) 33,224		33,224			33,224
e e	d 8a	Net gain or (loss)		33,221			33,221
Other Revenue		\$ of contributions reported on line 1c) See Part IV, line 18					
ther r	ь	a Less direct expenses b					
•	c	Net income or (loss) from fundraising	events 🛌	0			
	9a	Gross income from gaming activities See Part IV, line 19 a					
	ь	Less direct expenses b					
	c	Net income or (loss) from gaming act	vities	0			
	10a	Gross sales of inventory, less returns and allowances .	662,097				
	ь	Less cost of goods sold b	638,796				
		Net income or (loss) from sales of inv		23,301			23,301
		Miscellaneous Revenue	Business Code				
	11a	AFFINITY PROGRAMS	900099	90,000			90,000
	ь	ADVERTISING	541800	69,584		69,584	
	С	MISCELLANEOUS INCOME	900099	343,911			343,911
	d	All other revenue					
	e	Total. Add lines 11a-11d	▶	503,495			
	12	Total revenue. See Instructions .	📦	10,807,270	6,540,215	69,584	645,913

Part IX Statement of Functional Expenses

	in 501(c)(3) and 501(c)(4) organizations must complete all columns. All	other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa				г
	t include amounts reported on lines 6b, , 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 United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
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	0			
5	Compensation of current officers, directors, trustees, and key employees	272,973			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	3,208,969			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	180,434			
9	Other employee benefits	551,668			
10	Payroll taxes	285,489			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	3,809			
C	Accounting	21,500			
d	Lobbying	36,216			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
L2	Advertising and promotion	634,640			
.3	Office expenses	1,133,573			
.4	Information technology	213,784			
.5	Royalties	0			
.6	Occupancy	567,538			
.7	Travel	35,398			
.8	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
.9	Conferences, conventions, and meetings	2,415,760			
20	Interest	554			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	216,693			
23	Insurance	83,163			
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)				
а	PROFESSIONAL FEES	128,866			
b	COMM ON PROFESSIONALISM	112,986			
C	LEGAL RESEARCH	48,023			
d	CONTINGENCY	45,672			
е	All other expenses	170,587			
25	Total functional expenses. Add lines 1 through 24e	10,368,295			
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	rt X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			· · · ·
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,500	1	1,500
	2	Savings and temporary cash investments	4,858,847	2	5,094,459
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	318,708	4	654,070
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
	6	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 organizations (see instructions) Complete Part II of Schedule L	0	5	0
ë			0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
⋖	8	Inventories for sale or use	118,898	8	115,260
	9	Prepaid expenses and deferred charges	134,717	9	157,933
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 2,784,568			
	ь	Less accumulated depreciation 10b 2,489,371	422,172	10c	295, 197
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities See Part IV, line 11	779,552	12	863,984
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	5,596	14	5,596
	15	Other assets See Part IV, line 11	276,733	15	195,202
	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,916,723	16	7,383,201
	17	Accounts payable and accrued expenses	1,155,729	17	1,025,863
	18	Grants payable	0	18	0
	19	Deferred revenue	2,335,326	19	2,480,436
	20	Tax-exempt bond liabilities	0	20	0
φ.	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ge		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	18,436	25	0
	26	D	3,509,491	25 26	3,506,299
	26	Total liabilities. Add lines 17 through 25	3,309,491	26	3,300,299
Ĭ		lines 27 through 29, and lines 33 and 34.	2 407 000		2.070.000
<u>8</u>	27	Unrestricted net assets	3,407,232	27	3,876,902
ă	28	Temporarily restricted net assets	0	28	0
Fund Balance	29	Permanently restricted net assets	0	29	0
Ť		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
ŞŞ	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	3,407,232	33	3,876,902
Ş	34	Total liabilities and net assets/fund balances	6,916,723	34	7,383,201
		rotal nabilities and net assets/fulla palalices	1 0,910,723	34	1,505,201

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,8	307,270
2	Total expenses (must equal Part IX, column (A), line 25)	2			368,295
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			107,232
5	Net unrealized gains (losses) on investments	5		-,	30,695
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3,8	376,902
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. 🔽
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ı			
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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

WILLIAM A KRAIS

JONATHAN H LOMURRO

TRUSTEE (EFFECTIVE 5/2013)

Software ID: Software Version:

EIN: 21-0723663

Name: NEW JERSEY STATE BAR ASSOCIATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (E) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours more than one box, compensation compensation of other per unless person is both from the from related compensation week an officer and a organızatıon (Worganizations (Wfrom the (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and any related Former Individual to or director Office Highest compensated employee hours organizations Institutional for employee related organızatıons trustiee below Trustee dotted line) 10 RALPH J LAMPARELLO PRESIDENT - TRUSTEE 0 1 0 PARIS P ELIADES Х 0 0 0 PRESIDENT ELECT - TRUSTEE 1 0 MILES S WINDER III Χ 0 0 0 Х FIRST VP - TRUSTEE 1 0 THOMAS HOFF PROL Х 0 0 0 Х SECOND VP - TRUSTEE 1 0 JOHN E KEEFE JR Х Χ 0 0 0 SECRETARY - TRUSTEE 1 0 ROBERT B HILLE TREASURER - TRUSTEE Χ 0 0 0 10 CHRISTINE A AMALFE TRUSTEE (EFFECTIVE 5/2013) 0 0 0 Χ 1 0 CRAIG M ARONOW 0 Χ 0 0 **TRUSTEE** 1 0 SANDRA T AYRES 0 0 0 Х TRUSTEE STEPHEN W BARRY 0 0 Х 0 **TRUSTEE** 1 0 SUPTI BHATTACHARYA Х 0 0 0 10 ROBERT J BRASS Χ 0 0 0 10 MARC R BROWN Χ 0 0 0 TRUSTEE (EFFECTIVE 5/2013) 10 JOAN M BURKE Х 0 0 **TRUSTEE** 1 0 ANTHONY M CARLINO 0 0 Χ 0 TRUSTEE 1 0 DOMENICK CARMAGNOLA 0 0 0 Х **TRUSTEE** 1 0 DOMINIC V CARUSO 0 0 Х 0 1 0 LINDA W EYNON Х 0 0 0 TRUSTEE (EFFECTIVE 5/2013) 10 WILLIAM FERREIRA Х 0 0 0 TRUSTEE 10 ERIC G FIKRY TRUSTEE (EFFECTIVE 5/2013) 0 0 0 Х 1 0 PAUL J GALLAGHER 0 0 0 Χ TRUSTEE EDWARD W HOFFMAN Х 0 0 0 TRUSTEE 1 0 FRANCIS A KOCH 0 0 0 Χ TRUSTEE

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee hours Institutional organizations idiwduol 1 r diisetor for employee related organızatıons trustae below Trustee dotted line) 1 0 KEVIN P MCCANN Χ 0 0 0 TRUSTEE 1 0 SHANNA MCCANN 0 Х 0 **TRUSTEE** 10 TIMOTHY F MCGOUGHRAN 0 0 0 Х TRUSTEE (EFFECTIVE 5/2013) 1 0 MICHAEL MCLAUGHLIN Х 0 0 0 TRUSTEE 10 WILLIAM H MERGNER 1R 0 0 0 Х TRUSTEE (EFFECTIVE 5/2013) 10 BRANDON D MINDE 0 0 0 Х TRUSTEE 1 0 LOUIS H MIRON 0 0 0 Х TRUSTEE (EFFECTIVE 5/2013) 1 0 FRUQAN MOUZON 0 0 0 TRUSTEE 1 0 ANTHONY J MURGATROYD Χ 0 0 TRUSTEE 10 JOHN R NACHLINGER ٥ 0 0 X TRUSTEE (EFFECTIVE 5/2013) 1 0 **EVELYN PADIN** Χ 0 0 0 TRUSTEE 1 0 JEFFREY S POSTA 0 0 **TRUSTEE** 10 GARY POTTERS 0 0 0 Х TRUSTEE 10 BENNETT A ROBBINS Х 0 0 0 TRUSTEE 1 0 THOMAS P SCRIVO Х 0 0 0 TRUSTEE (EFFECTIVE 5/2013) 1.0 MICHAEL S SELVAGGI 0 0 0 Х TRUSTEE 10 RICHARD M SEVRIN 0 0 0 Х 1 0 KENNETH E SHARPERSON Χ 0 0 0 **TRUSTEE** 1 0 NANCY ERIKA SMITH Х 0 0 0 TRUSTEE (EFFECTIVE 5/2013) 10 HEATHER G SUAREZ 0 0 0 Х TRUSTEE (EFFECTIVE 5/2013) 1 0 STEVEN W SUFLAS Х O 0 0 **TRUSTEE** 1 0 MICHAEL L TESTA JR 0 0 0 TRUSTEE 1.0 RONALD J UZDAVINIS 0 0 0 Х TRUSTEE 10 KIMBERLY YONTA ARONOW 0 0 Х 0 1 0 ANGELA W DALTON 0 0 TREAS-TRUSTEE (TERMED 5/2013)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check Reportable Reportable Estimated more than one box, hours compensation compensation amount of other per unless person is both from the from related compensation an officer and a organization (Worganizations (Wweek from the director/trustee) 2/1099-MISC) 2/1099-MISC) (list organization and any related Highest employs Former <u>9</u> Individual trustae or director Institutional hours organizations for employee related t compensated ,ee organizations below Trustee dotted line) 10 BONNIE BLUME GOLDSAMT Χ 0 0 TRUSTEE (TERMED 5/2013) 10 JOHN F DEBARTOLO Х 0 0 TRUSTEE (TERMED 5/2013) 10 RICHARD A DEMICHELE JR Х 0 0 0 TRUSTEE (TERMED 5/2013) 10 SUSAN A FEENEY 0 0 Х 0 TRUSTEE (TERMED 5/2013) 1 0 ARNOLD N FISHMAN Χ 0 0 TRUSTEE (TERMED 5/2013) 10 MITZY GALIS MENENDEZ Х 0 0 0 TRUSTEE (TERMED 5/2013) 10 AMIRALI Y HAIDRI 0 0 Х 0 TRUSTEE (TERMED 5/2013) 10 STUART M LEDERMAN Х 0 0 0 TRUSTEE (TERMED 5/2013) 10 MICHAEL J STANTON Χ 0 0 0 TRUSTEE (TERMED 5/2013) 10 CHRISTINA VASSILIOU HARVEY Х 0 0 0 TRUSTEE (TERMED 5/2013) 10 DANIEL L WEISS Х 0 TRUSTEE (TERMED 5/2013) 55 0 ANGELA C SCHECK 226,313 0 Χ 46,660 EXECUTIVE DIRECTOR 55 0 WILLIAM JOHN KANE Х 124,790 0 20,869 NJLAP EXECUTIVE DIRECTOR 55 0 CHARLES HOLLENBECK Х 0 117,665 32,988 COP EXECUTIVE DIRECTOR 55 0 CATHERINE COSCARELLI Х 0 113,187 12,642 DIRECTOR OF COMM & MEDIA 55 0 SHARON A BALSAMO Χ 105,541 0 35,257 GENERAL COUSNSEL 55 0 JOSEPH J HOGYA 6,658 105,384 SENIOR DIRECTOR, ADMINISTRATION

DLN: 93493112006304

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

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 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) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** NEW JERSEY STATE BAR ASSOCIATION 21-0723663 Complete if the organization is exempt under section 501(c) or is a section 527 organization. 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). 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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 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 Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments 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 **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	.000				
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ОТ			, 0	ige e
		(a	1)		(b)	
ror e activ	rach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying rity.	Yes	No	A	moun	t
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					
а	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	O ther activities?					
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?					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)	(5), o	rse	ection	1
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		\vdash	2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."				t III-	Α,
1	Dues, assessments and similar amounts from members	1			3,551	L ,5 5
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).					
а	Current year	2a				48,
b	Carryover from last year	2b				66,
C	Total	2c				15,0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			323	47,
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			e	5,67
5	Tayable amount of lobbying and political expenditures (see instructions)	5				

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, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

I art II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Reference Explanation

DLN: 93493112006304

OMB No 1545-0047

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

Open to Public

emai R	evenue Service F Attach to For	m 990. F See separate instructions.			Tilsheci	LIUII
	e of the organization JERSEY STATE BAR ASSOCIATION		Emp	oloyer identificat	tion numbe	er
4 L VV	SEIGET STATE BUIL USSOCIATION		21-	0723663		
Par	Organizations Maintaining Donor Adv		_		Complet	te ıf the
	organization answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds		(h) Fda and a	<u> </u>	
-	Total number at end of year	(a) Donor advised lunds		(b) Funds and o	ther accou	ints
	Aggregate contributions to (during year)					
	Aggregate contributions to (during year)					
	Aggregate value at end of year					
			<u> </u>			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	ganization's exclusive legal control?			☐ Yes	┌ No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef				☐ Yes	⊏ No
	conferring impermissible private benefit? Conservation Easements. Complete if	the organization answered "Vec" t	0 F0 m	~ 000 Dawt IV	,	1 110
 	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	or education) Preservation of an Preservation of a	certifie	d historic struct	cure	
	,			Held at the	End of the	Year
a ·	Total number of conservation easements		2a			
Ь	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified histo	oric structure included in (a)	2c			
	Number of conservation easements included in (c) acc historic structure listed in the National Register	quired after 8/17/06, and not on a	2d			
,	Number of conservation easements modified, transferr	red, released, extinguished, or terminate	ed by th	ne organization d	during	
	the tax year 🛌					
ļ	Number of states where property subject to conservat	ion easement is located ►				
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?		—— dling of	f violations, and	┌ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments o	during the year		
	r A mount of expenses incurred in monitoring, inspecting	a and enforcing concernation eacoment	c durin	a the year		
	• \$	g, and emorcing conservation easement	s uuiiii	g the year		
;	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 17	70(h)(4)(B)(ı)	☐ Yes	□ No
	In Part XIII, describe how the organization reports coil balance sheet, and include, if applicable, the text of the theory of the conservation easements are conservation.	e footnote to the organization's financia				
art	III Organizations Maintaining Collection		or Ot	her Similar A	\ssets.	
	Complete if the organization answered "Y					
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	earch in furthera		
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education,				lıc
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			- \$		
<u>.</u>	If the organization received or held works of art, histor following amounts required to be reported under SFAS					
а	Davis			L .		

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u>llections of Ar</u>	t, HIS	tori	<u>cai ii</u>	<u>'easu</u>	res, or O	tne	r Similar As	sets (c	<u>ontinued)</u>
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other reco	rds, cl	heck	any of t	he follo	owing that a	re a	sıgnıfıcant use	of its	_
а	Public exhibition		d	Γ	Loan	or excl	nange progr	ams			
b	Scholarly research		e	Γ	Other	-					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expl	aın ho	w the	y furthe	er the o	rganızatıon	's ex	empt purpose ı	n	
5	During the year, did the organization solicit o	or receive donation	s of a	rt, his	torıcal	treasu	res or othe	sım			
	assets to be sold to raise funds rather than t									Yes	□ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an am						i answered	d "Y	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	ford	ontribu	itions d	r other ass	ets r	ot	┌ Yes	□ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follo	wing	able		_				
							_		An	nount	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	,						│ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatı	on has	been pi	ovided in P	art X			Γ
Pa	rt V Endowment Funds. Complete										
	Parameter for a section to a se	(a)Current year	(b)Prior	year	b (c) Tv	vo years back	(d)	Three years back	(e)Four y	ears back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balan	nce (lır	ne 1g	, colum	n (a)) ł	neld as				
а	Board designated or quasi-endowment ►										
b	Permanent endowment 🕨										
С	Temporarily restricted endowment ▶										
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%									
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	zatıon	that	are held	d and a	dmınıstered	for	the 	Yes	No
	(i) unrelated organizations		-						3a(_	<u> </u>
	(ii) related organizations								3a(_	
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the							•	3t	<u> </u>	<u> </u>
	t VI Land, Buildings, and Equipme					10					
I GI	Description of property	THE SECTION S.	50, 10	(a) Cost o	rother	(b)Cost or o		(c) Accumulate	d (d) E	Book value
				bas	sis (inves	tment)	basıs (othe	≘r)	depreciation		
1a	Land										
b	Buildings										
c	Leasehold improvements					0	170),502	159,7	'38	10,764
d I	Equipment					0	1,967	7,591	1,719,0	58	248,533
						0		5,475	610,5	75	35,900
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colι	ımn (B), line	10(c).)		•	🕨		295,197

Part VIII Investments—Other Securities.	See Form 990, Part X, line 12.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other	426.225	_
(A) EQUITY SECURITIES	426,325	F
(B) ASSOCIATION	0	F
(C) U S TREASURY NOTES	108,784	F
		F
(D) MONEY MARKET MUTUAL FUNDS	40,372	<u> </u>
(E) MUTUAL FUNDS	217,642	F
(F) GOVERNMENT SECURITIES	70,861	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12		
Part VIII Investments—Program Related		() Mathada Garlantan
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		·
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part (2) Do	X, line 15. escription	(b) Book value
(a) De	escription	(b) Book value
		<u> </u>
Total. (Column (b) must equal Form 990, Part X, col.(B) li		
Part X Other Liabilities. See Form 990, Part X (a) Description of liability	art X, line 25. (b) Book value	
-		
Federal income taxes	0	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	· • 0	
		ion's financial statements that reports the

			r age I
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	11,476,761
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	669,491
3	Subtract line 2e from line 1	3	10,807,270
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)		
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	10,807,270
Par	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	11,007,091
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII) 2d 638,796		
e	Add lines 2a through 2d	2e	638,796
3	Subtract line 2e from line 1	3	10,368,295
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)............. 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	10,368,295

Part XIII 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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
TEXT OF FIN 48 AUDITED FINANCIAL STATEMENT FOOTNOTE	SCHEDULE D, PART X	AN INDEPENDENT CPA FIRM AUDITED THE FINANCIAL STATEMENTS OF THE ORGANIZATION FOR THE YEARS ENDED JUNE 30, 2013 AND JUNE 30, 2012, RESPECTIVELY THE FIN 48 FOOTNOTE BELOW IS FROM THE ORGANIZATION'S JUNE 30, 2013 AUDITED FINANCIAL STATEMENTS THE ASSOCIATION FOLLOWED THE PROVISIONS OF AUTHORITATIVE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES FOR THE YEARS ENDED JUNE 30, 2013 AND 2012 UNDER THE GUIDANCE, TAX POSITIONS ARE EVALUATED FOR RECOGNITION USING A MORE-LIKELY-THAN-NOT THRESHOLD, AND THOSE TAX POSITIONS REQUIRING RECOGNITION ARE MEASURED AT THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN 50 PERCENT LIKELY OF BEING REALIZED UPON ULTIMATE SETTLEMENT WITH A TAXING AUTHORITY THAT HAS FULL KNOWLEDGE OF ALL RELEVANT INFORMATION
RECONCILIATION OF REV PER AUDITED FINANCIAL STATEMENTS WITH REV PER RETURN	SCHEDULE D, PART XI, LINE 2D	OTHER RECONCILING ITEMS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART VIII, LINE 12 INCLUDE - COST OF GOODS SOLD - \$638,796
RECONCILIATION OF EXP PER AUDITED FINANCIAL STATEMENTS WITH EXP PER RETURN	SCHEDULE D, PART XII, LINE 2D	OTHER RECONCILING ITEMS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART IX, LINE 25 INCLUDE - COST OF GOODS SOLD - \$638,796

DLN: 93493112006304

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization NEW JERSEY STATE BAR ASSOCIATION **Employer identification number**

21-0723663

Pai	rt I Questions Regarding Compensation			
			Yes	No
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			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	The solution of the services (e.g., maid, chauled, cher)			
ь	If any of the boxes in 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	1b	Yes	
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?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations 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	tion		
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only 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?	5a		
b	Any related organization?	5b		
	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			
а	The organization?	6a		
b	Any related organization?	6b		
	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	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		
	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	٩		

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	FW-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)ANGELA C SCHECK EXECUTIVE DIRECTOR	(i) (ii)	223,960 0	0	2,353 0	14,384 0	32,276 0	272,973 0	0	
(2)CHARLES HOLLENBECK COP EXECUTIVE DIRECTOR	(i) (ii)	115,626 0	0	2,039 0	7,383 0	25,605 0	150,653 0	0	

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier	Return Reference	Explanation
COMPENSATION INFORMATION	PART VII AND SCHEDULE J	TAXABLE COMPENSATION REPORTED HEREIN IS DERIVED FROM 2012 FORMS W-2
COMPENSATION INFORMATION	1A	THE ORGANIZATION PROVIDED, FOR ORGANIZATION BUSINESS PURPOSES ONLY, COACH AND/OR FIRST CLASS AIRFARE FOR THE PRESIDENT, PRESIDENT-ELECT AND IMMEDIATE PAST PRESIDENT AND THEIR SPOUSES SO THEY CAN ATTEND ANNUAL AND MID-YEAR MEETINGS IN OTHER STATES PLEASE NOTE THAT THE ORGANIZATION PAID THESE EXPENSES DIRECTLY EITHER THROUGH DIRECT PAYMENT OR THROUGH THE UTILIZATION OF ORGANIZATION CREDIT CARD REWARDS POINTS PLEASE NOTE THAT THE PROVISION OF THESE BENEFITS WAS NOT TREATED AS TAXABLE COMPENSATION

Schedule J (Form 990) 2012

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As Filed Data -

DLN: 93493112006304

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization NEW JERSEY STATE BAR ASSOCIATION	Employer identifi	cation number
	21-0723663	

ldentifier	Return Reference	Explanation
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	CORE FORM, PART III, QUESTION 4D	YOUNG LAWYERS' DIVISION - CONDUCTS SEMINARS AND MEETINGS COVERING LEGAL TOPICS OF PARTICULAR INTEREST TO YOUNGER MEMBERS OF THE BAR ASSOCIATION (SERVES 100% OF MEMBERS UNDER AGE 35) ETHICS DIVERSIONARY PROGRAM - AN EDUCATIONAL PROGRAM ADMINISTERED BY THE NEW JERSEY STATE BAR ASSOCIATION, WITH COOPERATION FROM THE OFFICE OF ATTORNEY ETHICS, THAT PROVIDES AN ALTERNATIVE TO POTENTIAL DISCIPLINE FOR ATTORNEYS FACING MINOR ETHICS VIOLATIONS

ldentifier	Return Reference	Explanation
DISCLOSURE INFORMATION	CORE FORM, PART VI, SECTION A, QUESTION 2	KIMBERLY YONTA ARONOW AND CRAIG M ARONOW - FAMILY RELATIONSHIP

ldentifier	Return Reference	Explanation
DISCLOSURE INFORMATION	CORE FORM, PART VI, SECTION A, QUESTION 4	THE ORGANIZATION AMENDED ITS BY LAWS TO REQUIRE AN OFFICER AND TRUSTEE TO PRACTICE LAW PRIMARILY IN THE STATE OF NEW JERSEY IN ORDER TO BE ELIGIBLE TO SERVE

ldentifier	Return Reference	Explanation
DISCLOSURE INFORMATION	CORE FORM, PART VI, SECTION A, QUESTIONS 6 & 7	A NJSBA MEMBER IS SOMEONE WHO HAS PAID THEIR REQUISITE NJSBA MEMBERSHIP DUES AND IS EITHER A LICENSED ATTORNEY IN THE STATE OF NEW JERSEY, A LICENSED ATTORNEY IN ANOTHER STATE, A LAW STUDENT, A PARALEGAL, A LEGAL ASSISTANT, A LAW SCHOOL DEAN, TEACHER OR PROFESSOR, A LAW LIBRARIAN OR OTHER PERSON EMPLOYED BY A LAW FIRM IN A MANAGERIAL OR ADMINISTRATIVE POSITION THE ORGANIZATION HAS A NOMINATING COMMITTEE OF MEMBERS WHO ELECT MEMBERS OF THE GOVERNING BOARD

ldentifier	Return Reference	Explanation
DISCLOSURE INFORMATION	CORE FORM, PART VI, SECTION B, QUESTION 11B	THE ORGANIZATION'S FEDERAL FORM 990 WAS PROVIDED TO EACH VOTING MEMBER OF ITS GOVERNING BODY (ITS BOARD OF TRUSTEES) PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE ("IRS") IN ADDITION THE ORGANIZATION'S FINANCE AND OPERATION'S COMMITTEE PERFORMED A DETAILED REVIEW OF THE FEDERAL FORM 990 PRIOR TO PROVIDING IT TO EACH VOTING MEMBER OF ITS BOARD OF TRUSTEES THE ORGANIZATION'S BOARD OF TRUSTEES HAS DELEGATED TO THE FINANCE AND OPERATIONS COMMITTEE THE RESPONSIBILITY TO OVERSEE AND COORDINATE THE FEDERAL FORM 990 PREPARATION, REVIEW AND FILING PROCESS AS PART OF THE ORGANIZATION'S FEDERAL FORM 990 TAX RETURN PREPARATION PROCESS, THE ORGANIZATION HIRED A PROFESSIONAL CPA FIRM WITH EXPERIENCE AND EXPERTISE IN NOT-FOR-PROFIT TAX RETURN PREPARATION TO PREPARE THE FEDERAL FORM 990 THE CPA FIRM'S TAX PROFESSIONALS WORKED CLOSELY WITH VARIOUS INDIVIDUALS OF THE ORGANIZATION TO OBTAIN THE INFORMATION NEEDED IN ORDER TO PREPARE A COMPLETE AND ACCURATE TAX RETURN THE CPA FIRM PREPARED A DRAFT FEDERAL FORM 990 AND FURNISHED IT TO THE ORGANIZATION'S INTERNAL WORKING GROUP FOR THEIR REVIEW THE ORGANIZATION'S INTERNAL WORKING GROUP AND OTHER INDIVIDUALS REVIEWED THE DRAFT FEDERAL FORM 990 AND DISCUSSED QUESTIONS AND COMMENTS WITH THE CPA FIRM REVISIONS WERE MADE TO THE DRAFT FEDERAL FORM 990 WHERE NECESSARY AND A FINAL DRAFT WAS FURNISHED BY THE CPA FIRM TO THE ORGANIZATION'S INTERNAL WORKING GROUP AND VARIOUS OTHER INDIVIDUALS FOR FINAL REVIEW AND APPROVAL THE FINAL FORM 990 WAS THEN PRESENTED TO THE MEMBERS OF THE ORGANIZATION'S FINANCE AND OPERATIONS COMMITTEE FOLLOWING THE FINANCE AND OPERATIONS COMMITTEES REVIEW THE FINAL FEDERAL FORM 990 WAS PROVIDED TO EACH VOTING MEMBER OF THE ORGANIZATION'S GOVERNING BODY PRIOR TO FILING WITH THE IRS

ldentifier	Return Reference	Explanation
DISCLOSURE INFORMATION	CORE FORM, PART VI, SECTION B, QUESTION 12	THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY WHICH IT REGULARLY MONITORS AND ENFORCES COMPLIANCE. THE POLICY REQUIRES THAT A CONFLICT OF INTEREST DISCLOSURE FORM CONSISTENT WITH BEST GOVERNANCE PRACTICES AND INTERNAL REVENUE SERVICE GUIDELINES BE CIRCULATED TO OFFICERS, TRUSTEES, AND KEY EMPLOYEES ANNUALLY. THE ORGANIZATION'S LEGAL COUNSEL ASSUMES RESPONSIBILITY FOR THE COMPLETION OF THE CONFLICT OF INTEREST QUESTIONNAIRES AND ENFORCEMENT WITH THE POLICY. IF AN INDIVIDUAL DISCLOSES AN INTEREST THAT COULD GIVE RISE TO A CONFLICT, THE INDIVIDUAL'S POTENTIAL CONFLICT IS DISCLOSED TO THE BOARD OF TRUSTEES, WHICH EVALUATES THE CONFLICT AND ITS POTENTIAL IMPACT ON THE INDIVIDUAL'S PARTICIPATION ON THE BOARD AFTER CONSULTATION AND DISCUSSION, THE BOARD OF TRUSTEES MAY TAKE ACTION, IF APPROPRIATE AND NECESSARY, TO ADDRESS ANY SUCH CONFLICT IN A MANNER CONSISTENT WITH THE ORGANIZATION'S CONFLICT OF INTEREST POLICY.

ldentifier	Return Reference	Explanation
DISCLOSURE INFORMATION	CORE FORM, PART VI, SECTION B, QUESTION 15	THE ORGANIZATIONS BOARD OF TRUSTEES HAS AN EXECUTIVE COMMITTEE ("COMMITTEE") THE COMMITTEE HAS ADOPTED A WRITTEN EXECUTIVE COMPENSATION POLICY WHICH IT FOLLOWS WHEN IT REVIEWS AND APPROVES OF THE COMPENSATION AND BENEFITS OF THE ORGANIZATION'S EXECUTIVE DIRECTOR THE COMMITTEE REVIEWS THE "TOTAL COMPENSATION" OF THE INDIVIDUAL WHICH IS INTENDED TO INCLUDE BOTH CURRENT AND DEFERRED COMPENSATION AND ALL EMPLOYEE BENEFITS THE COMMITTEE'S REVIEW IS DONE ON AT LEAST AN ANNUAL BASIS AND ENSURES THAT THE "TOTAL COMPENSATION" OF THE EXECUTIVE DIRECTOR IS REASONABLE. THE ACTIONS TAKEN BY THE COMMITTEE ENABLE THE ORGANIZATION TO RECEIVE THE REBUTTABLE PRESUMPTION OF REASONABLENESS FOR PURPOSES OF INTERNAL REVENUE CODE SECTION 4958 WITH RESPECT TO THE TOTAL COMPENSATION OF ITS EXECUTIVE DIRECTOR THE THREE FACTORS WHICH MUST BE SATISFIED IN ORDER TO RECEIVE THE REBUTTABLE PRESUMPTION OF REASONABLENESS ARE THE FOLLOWING 1 THE COMPENSATION ARRANGEMENT IS APPROVED IN ADVANCE BY AN "AUTHORIZED BODY" OF THE APPLICABLE TAX-EXEMPT ORGANIZATION WHICH IS COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A "CONFLICT OF INTEREST" WITH RESPECT TO THE COMPENSATION ARRANGEMENT, 2 THE AUTHORIZED BODY OBTAINED AND RELIED UPON "APPROPRIATE DATA AS TO COMPARABILITY" PRIOR TO MAKING ITS DETERMINATION, AND 3 THE AUTHORIZED BODY "ADEQUATELY DOCUMENTED THE BASIS FOR ITS DETERMINATION" CONCURRENTLY WITH MAKING THAT DETERMINATION THE COMMITTEE IS COMPRISED OF MEMBERS OF THE BOARD OF TRUSTEES EACH OF WHOM ARE INDEPENDENT AND ARE FREE FROM ANY CONFLICTS OF INTEREST THE COMMITTEE RELIED UPON APPROPRIATE COMPARABLE DATA, SPECIFICALLY THE COMMITTEE THE COMMITTEE RELIED UPON APPROPRIATE COMPARABLE DATA, SPECIFICALLY THE COMMITTEE OTHER APELORS IN DUSTRY COMPARABLES AND PERFORMS IN HOUSE STUDIES OF EXECUTIVE COMMITTEE WEITINGS DURING WHICH THE EXECUTIVE COMMITTEE ADEQUATELY DOCUMENTED ITS BASIS FOR ITS DETERMINATION THROUGH THE TIMELY PREPARATION OF WRITTEN MINUTES OF THE EXECUTIVE COMMITTEE MEETINGS DURING WHICH THE EXECUTIVE COMPENSATION AND BENEFITS WA

Identifier	Return Reference	Explanation
DISCLOSURE INFORMATION	VI, SECTION C,	THE ORGANIZATION'S FILED CERTIFICATE OF INCORPORATION AND ANY AMENDMENTS CAN BE OBTAINED AND REVIEWED THROUGH THE STATE OF NEW JERSEY DEPARTMENT OF TREASURY IN ADDITION, THE ORGANIZATION'S BY LAWS ARE POSTED ON ITS WEBSITE, WWW NJSBA COM

ldentifier	Return Reference	Explanation
RELATED HOURS DISCLOSURE	CORE FORM, PART VII, SECTION A, COLUMN B	CERTAIN BOARD OF TRUSTEE MEMBERS, OFFICERS AND/OR DIRECTORS LISTED ON CORE FORM, PART VII AND SCHEDULE J OF THIS FORM 990 MAY HOLD SIMILAR POSITIONS WITH BOTH THIS ORGANIZATION AND NEW JERSEY STATE BAR FOUNDATION, A RELATED ORGANIZATION THE HOURS SHOWN ON THIS FORM 990 FOR BOARD MEMBERS WHO RECEIVE NO COMPENSATION FOR SERVICES RENDERED IN A NON-BOARD CAPACITY, REPRESENT THE ESTIMATED HOURS DEVOTED PER WEEK FOR THIS ORGANIZATION TO THE EXTENT THESE INDIVIDUALS SERVE AS A MEMBER OF THE BOARD OF TRUSTEES OF THE FOUNDATION, THEIR RESPECTIVE HOURS PER WEEK PER ORGANIZATION ARE APPROXIMATELY ONE HOUR THE HOURS REFLECTED ON PART VII OF THIS FORM 990, FOR ANY PAID OFFICERS, REFLECT TOTAL HOURS WORKED PER WEEK ON BEHALF OF THIS ORGANIZATION AND THE FOUNDATION, NOT SOLELY THIS ORGANIZATION

ldentifier	Return Reference	Explanation
AUDITED FINANICAL STATEMENTS	CORE FORM, PART XII, QUESTION 2	AN INDEPENDENT CPA FIRM AUDITED THE FINANCIAL STATEMENTS OF THE TAXPAYER FOR THE YEARS ENDED JUNE 30, 2013 AND JUNE 30, 2012, RESPECTIVELY AND ISSUED A FINANCIAL STATEMENT THE ORGANIZATION'S FINANCE AND OPERATIONS COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT AUDITOR

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DLN: 93493112006304

OMB No 1545-0047 2012

Employer identification number

Open to Public

SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Inspection

V JERSET STATE DAK ASSOCIATION					21-072366	3			
Part I Identification of Disregarded Entities (C									
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	End-of-y	(e) year assets	(f) Direct conti entity			
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations du	rganizations (Complete i Iring the tax year.)	f the organization ar	nswered "Yes"	to For	rm 990, Par	t IV, line 34	because it	: had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	ection (e) Public charit (if section 50			Direct controlling Section entity (13)		512(l ontrolle aty?
(1) NEW JERSEY STATE BAR FOUNDATION	PHILANTHROPY	NJ	501(C)(3)	50	09(A)(2)	NJSBA		Yes Yes	No
DNE CONSTITUTION SQUARE									
NEW BRUNSWICK, NJ 08901 22-6074475									
or Danamyork Doduction Act Notice coathe Instructions for For		Cat No F013					odulo D / Form	000) 3	

(a) Name, address, and EIN o related organization	f	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	he organı the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domıcıle (state or foreign country)		(d) Direct controlli entity	(e) Type of enti (C corp, S corp, or trust)	(f) Share of to income	total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No				
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more re	elated organizations lis	sted in Parts II-IV?								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No				
b	b Gift, grant, or capital contribution to related organization(s)										
c	c Gift, grant, or capital contribution from related organization(s)										
d	d Loans or loan guarantees to or for related organization(s)										
e	Loans or loan guarantees by related organization(s)				1e		No				
f	Dividends from related organization(s)				1f		No				
g	Sale of assets to related organization(s)				1 g		No				
h	Purchase of assets from related organization(s)				1h		No				
i	Exchange of assets with related organization(s)				1i		No				
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes					
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No				
I	I Performance of services or membership or fundraising solicitations for related organization(s)										
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No				
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
o	Sharing of paid employees with related organization(s)				10	Yes					
р	Reimbursement paid to related organization(s) for expenses				1 p		No				
q	Reimbursement paid by related organization(s) for expenses				1q		No				
r	Other transfer of cash or property to related organization(s)				1r	Yes					
s	Other transfer of cash or property from related organization(s)				1 s		No				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete										
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount ir	nvolved					
1) N	EW JERSEY STATE BAR FOUNDATION	J	567,538	COST							
2) N	EW JERSEY STATE BAR FOUNDATION	0	63,453	COST							
3) N	EW JERSEY STATE BAR FOUNDATION	R	86,272	COST							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID:

Software Version:

EIN: 21-0723663

Name: NEW JERSEY STATE BAR ASSOCIATION

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)								
Identifier	Return Reference	Explanation						