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OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCANNED JUL 2 1 2019

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

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public

Α	For the 2	2013 calen	dar year, or tax year beginning , 2013, and ending				•
В	Check if app	olicable	C		D Employ	er Iden	tification Number
	Addres	s change	THE STONY BROOK-MILLSTONE WATERSHED		21-	0649	717
	H	change	ASSOCIATION	-	E Telepho		
	\vdash	•	31 TITUS MILL ROAD	i			
	Initial r		PENNINGTON, NJ 08534-4303	ļ.	(60	<u>9) /</u>	37-3735
	Termin	ated	1				
	Amend	ed return			G Gross r	eceipts	\$ 2,727,689.
•	Applica	ition pending	F Name and address of principal officer:	H(a) Is this a	group retur	n for su	bordinates? Yes X No
_	_		SAME AS C ABOVE	H(b) Are all s If 'No,' a	ubordinates	include	d? Yes No
1	Tax-exen	pt status	X 501(c)(3) 501(c) () (Insert no.) 4947(a)(1) or 527	ii ivo, a	illach a iist.	(see in:	structions)
<u>, </u>	Websit	<u> </u>		H(c) Group e	ramation a	ımber 1	•
ĸ				_`` _			
		rganization.	X Corporation Trust Association Other ► L Year of formation	on: 1949	IVI S	tate of	egal domicile. NJ
<u>IRa</u>	ntille of	Summar	у				
			be the organization's mission or most significant activities: THE WATER				
ě	<u>C</u> 1	<u>.ean_wa</u>	TER AND THE ENVIRONMENT, ADDRESSES KEY ISSUES	<u>AFFECT</u>	<u>ING W</u>	<u>YTER</u>	_OUALITY_AND
ä			, EDUCATES AREA RESIDENTS ABOUT ECOLOGY AND PR		<u>S_OPEN</u>	<u> </u>	ACE_BY
Ë	<u>M</u> ?	INTAIN	<u>ING AN 930 ACRE NATURE RESERVE AND ORGANIC FAR</u>				
ŏ		eck this bo				net as	sets.
Activities & Governance			ting members of the governing body (Part VI, line 1a)			3	22
S			dependent voting members of the governing body (Part VI, line 1b) \dots			4	22
iţie			of individuals employed in calendar year 2013 (Part V, line 2a)			5	40
÷			of volunteers (estimate if necessary)			6	500
¥			ed business revenue from Part VIII, column (C), line 12			7 a	<u> </u>
	b Ne	unrelated	business taxable income from Form 990-T, line 34			7 b	0.
	_			Pri	ior Year		Current Year
•	8 Coi	ntributions	and grants (Part VIII, line 1h)	2,	561,2	82.	2,270,424.
Revenue	9 Pro	gram serv	core revenue (Part VIII, line 2g) icome (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		159,1		154,348.
ve	10 Inv	estment ir	come (Part VIII, column (A), lines 3,4, and 7d)		43,7		70,665.
~ i	11 Oth	er revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		140,0		166,470.
	12 Tot	al revenue	e – add lines 8 through 11 (must equalifiart Juli, column 20)14ine 23	2.	904,2		2,661,907.
			milar amounts paid (Part IX, column (A), lines 1-3)		76,0		46,854.
			to or for members (Part IX, column (A), line 4)				10,001.
	15 Sal	orios othe	er compensation, employee benefits (Part X, column (A), lines 5-10)	·	0.00	0.0	1 000 772
တ္				·	965,5	00.	1,008,773.
use	16a Pro	ofessional	fundraising fees (Part IX, column (A), line 11e)		***************************************		
Expenses	b Tot	al fundrais	sing expenses (Part IX, column (D), line 25) ► 127, 974.	1,50	47		
ũ	17 Oth	ner expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)		571,4	70	569,534.
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)	1	613,1		1,625,161.
			expenses. Subtract line 18 from line 12		291,1		
- 8 8	13 116	veriue iess	expenses. Subtract line 18 from line 12			$\overline{}$	1,036,746.
ances	00 Tal		(D-+ V III- 16)		of Curren		End of Year
Not Asset Fund Balar	20 Tot		(Part X, line 16)	13,	204,6		14,518,968.
lot,	21 Tot	ai liabilitie	s (Part X, line 26)	·	56,4	60.	147,125.
		t assets or	fund balances. Subtract line 21 from line 20	13,	148,1	89.	14,371,843.
Pa	itilli:	Signatur	e Block				
				he best of my	knowledge	and bel	ef, it is true, correct, and
comp	olete. Declar	ation of prepa	cclare that I have examined this return, including accompanying schedules and statements, and to the rer (other than officer) is based on all information of which preparer has any knowledge	•	•		
			/\ .0 ///				
Sic	ın	Signatu	re of officer	Date	- 6	.17	2/2014
Siç He	re	там.	ES WALTMAN	EXECU'	_	•	(4) 2014 CTOR
	. •		print name and title.	EVECO	1140 1	711/17	CZOR
			reparer's name Preparetts signature Date	• 7		Т. Т	PTIN
					Check] " [
Pa		MICHAE	LL D. LACATENA MEGLAPLO CALATENA 6/3/	17 5	elf-employe	ed	P00294921
Pre	eparer	Firm's name					
Us	e Only	Firm's addre	ss ► 76 EUCLID AVENUE, SUITE 200	F	irm's EIN	<u> 22</u>	-2569347
			HADDONFIELD, NJ 08033	F	Phone no	(85	
May	the IRS	discuss th	is return with the preparer shown above? (see instructions)				X Yes No
				A0113L 11/0	8/13		Form 990 (2013)

Form 990 (2013) THE STONY BROOK-MILLSTONE WATERSHED	21-0649717	Page 2
Rartilla Statement of Program Service Accomplishments		
Check if Schedule O contains a response or note to any line in this Part III	<u></u>	<u> </u> X
Briefly describe the organization's mission:		
THE WATERSHED ASSOCIATION PROTECTS CLEAN WATER AND THE ENV	IRONMENT, ADDRESSES K	ΈY
ISSUES AFFECTING WATER QUALITY AND LAND USE, EDUCATES AREA	RESIDENTS ABOUT ECOL	JOGY
AND PRESERVES OPEN SPACE BY MAINTAINING AN 930 ACRE NATURE		
2 Did the organization undertake any significant program services during the year which were not listed	d on the prior	
Form 990 or 990-EZ?		X No
If 'Yes,' describe these new services on Schedule O.		<u></u>
3 Did the organization cease conducting, or make significant changes in how it conducts, any p	rogram services? Yes	X No
If 'Yes,' describe these changes on Schedule O.	rogium services	V V
4 Describe the organization's program service accomplishments for each of its three largest pro	varam convene as measured by o	vnoncoc
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the others, the total expenses, and revenue, if any, for each program service reported.	e amount of grants and allocations to	хрен зез.)
4a (Code:) (Expenses \$ 592,223. including grants of \$) (Revenue \$	
SEE SCHEDULE O	. , , , , , , , , , , , , , , , , , , ,	 '
PET SCHEDOTE O		
	·	
		
		
		
		
4b (Code:) (Expenses \$ 403,517. including grants of \$) (Revenue \$	
CONSERVATION - FROM OUR 930-ACRE WATERSHED RESERVE IN HOPE	WELL TO LOCATIONS ACR	OSS
THE REGION, VOLUNTEERS AND STAFF ARE ENGAGED IN PROJECTS T		
NATURAL HABITATS. WE HAVE ALSO HELPED "GROW" OTHER IMPORT		
OVER THE YEARS. IN THE 1980'S, WE HELPED LAUNCH THE D&R G		
NORTHEAST ORGANIC FARMING ASSOCIATION OF NEW JERSEY. OUR		
		
HONEY BROOK ORGANIC FARM, NOW THE LARGEST COMMUNITY-SUPPOR		
NATION. THROUGH OUR WATERSHED INSTITUTE, WE HELP BUILD OT	HER WATERSHED GROUPS	ACKOS:
THE STATE.		
	. 	
	. 	
4c (Code:) (Expenses \$ 318,470. including grants of \$) (Revenue \$	
EDUCATION - THE WATERSHED ASSOCIATION SERVES MORE THAN 10,	000 CHILDREN AND ADUL	TS
THROUGH NEARLY 400 EDUCATION PROGRAMS AND EVENTS EACH YEAR		
APPRECIATION OF THE WONDERS OF NATURE AND EXPLAIN WHAT WE		
ENVIRONMENT. OUR TEACHER WORKSHOPS TRAIN EDUCATORS TO INC	ODDODATE THE ENTITIONM	
INTO THEIR CURRICULUMS, WHILE ADULT EDUCATION PROGRAMS TEA		
ENVIRONMENTAL IMPACTS OF YOUR HOME AND BUSINESS. AT OUR N		
DISCOVER AN ASSORTMENT OF EXHIBITS AND A COLLECTION OF SMA		
YOURSELF WITH BUTTERFLIES (IN SEASON) AT THE KATE GORRIE M	EMORIAL BUTTERFLY HOU	SE
		_
4d Other program services. (Describe in Schedule O.)		
	evenue \$	`
	TOTAL Y	<u>, </u>
4e Total program service expenses ► 1, 314, 210.		000 (001
BAA TEEA0102L 07/02/13	rorm	990 (201

-1. ·	9.2012.1.4		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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
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? If 'Yes,' complete Schedule C, Part II	4	х	
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		х
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		х
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	х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		х
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.	9		х
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 V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
	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	11 b		х
	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	11 c		х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d	Х	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	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	11 f		х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	12a	х	
	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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
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	х	
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		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

<u>Irai</u>	mives Checkist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		_x
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and			
	complete Schedule K. If 'No,'go to line 25a	24a 24b		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240	-	
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I.	25a		Х
ŀ	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		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		х
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		Х
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):			
ě	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
1	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32_		х
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		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ı	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		
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		х
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		х
38	Note. All Form 990 filers are required to complete Schedule O	38	X	
BAA		Form	990	(2013)

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Form 990 (2013) THE STONY BROOK-MILLSTONE WATERSHED 21-0649717 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V... Yes No 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?.... 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return... 40 2 b X 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) X 3 a 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?.... b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O... 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)?. 4a **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. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?..... $\overline{\mathbf{X}}$ 5 b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5с 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible as charitable contributions?. b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a services provided to the payor? X b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file X 70 X 7 e e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?...... g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g as required?.... h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7 h ٤. 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 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9 2 9 b **b** Did the organization make a distribution to a donor, donor advisor, or related person?.... 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . . 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13 a a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in 13b

14 a

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?......

Form 990 (2013) THE STONY BROOK-MILLSTONE WATERSHED 21-0649717 Page 6 Rait Will Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI.... Section A. Governing Body and Management Yes No 1 a 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 ... 1 b 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?. 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 Х Did the organization make any significant changes to its governing documents Х 5 X X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a a The governing body?...... X **b** Each committee with authority to act on behalf of the governing body?....

9	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.	9		X
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re	venu	ie Co	de.)
			Yes	No
10 a	a Did the organization have local chapters, branches, or affiliates?	10 a		X
ı	b 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?	10 b		
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
ı	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
12 a	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
ı	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
(c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done SEE .SCHEDULE Q	12c	Х	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	- A		100 A
	a The organization's CEO, Executive Director, or top management official	15 a	X	
1	b Other officers of key employees of the organization	15 b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X
I	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NJ	- -		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) as inspection. Indicate how you make these available. Check all that apply.	/aɪlabl	e for p	oublic
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available public during the tax year. SEE SCHEDULE O	ble to		
20				
	CONTROLLER 31 TITUS MILL ROAD PENNINGTON NJ 08534 (609) 737-3735			
BAA		Form	990 (2013)

Form 990 (2013) THE STONY BROOK Part VIII Compensation of Officers	s, Direct	TONE	Tru	ATE iste	es,	HED Key	En	nployees, Highes	21-0649 It Compensated E	717 Page 7 mployees, and
Independent Contractors Check if Schedule O contains a		or no	to to	n an	v lir	e in tl	hic F	Part VII		Π
Section A. Officers, Directors, Tru										
1 a Complete this table for all persons required organization's tax year. • List all of the organization's current or compensation. Enter -0- in columns (D), (E)	to be liste	d. Rep	ort c	omp	ens es (ation f	or the	ne calendar year ending ndividuals or organiza	g with or within the	amount of
 List all of the organization's current k 	ey employ	ees, i	f an	y. S	ee i	nstruc	tion	s for definition of 'key	y employee.	
 List the organization's five current highwho received reportable compensation (Boorganization and any related organizations. 	5 of Forr	n W-2	and	l/or l	Box	7 of F	orm	1099-MISC) of more	than \$100,000 from	the
 List all of the organization's former of of reportable compensation from the organization. List all of the organization's former direction organization, more than \$10,000 of reportation. 	on and any	relate tees th	ed or at re	gani ceiv	izati ed, ı	ons. n the c	capac	city as a former director	or trustee of the	e than \$100,000
List persons in the following order: individual employees; and former such persons.	-					-				ompensated
Check this box if neither the organization n	or any rela	ted org	ganı			mpen	sate	d any current officer, d	rector, or trustee.	
(A) Name and Title	(B) Average hours per week (list	one bo	er an	iless id a d	chec perso recto	k more t in is bot or/truste	h an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) SEE ATTACHED LIST	0							0.	0.	0.
(2) JAMES WALTMAN EXECUTIVE DIREC	<u>40</u>			х				125,445.	0.	0.
_(3)										
_(4)								1		
(5)										
(6)										
	<u> </u> -									
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Page 7

(A) Name and title	Average hours per week (list any hours for related organiza tions below dotted line)	(do box, offic	not ch unles	Pos heck ss pe	ition more erson directe	than o	one an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15)										
(16)										
(17)										
(18)					-					
(19)										
(20)										
(21)										<u> </u>
(22)										
(23)										
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	1 A						→	125, 445. 0. 125, 445.	0. 0. 0.	0. 0. 0.
from the organization 1	i iiose ii	isieu			VIIO I	recen	/eu	more than \$100,00	o or reportable comp	
 3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater such individual 5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,' 	<i>individu</i> eportabl than \$1	<i>ial</i> . le coi 50,00	mper	nsa If 'Y	····· tion ∕es′	and	oth	er compensation e Schedule J for	from	Yes No X X X X X X X X X X X
Section B. Independent Contractors 1 Complete this table for your five highest compensations.	ited inde	epen	dent	cor	ntrac	ctors	tha	t received more t	nan \$100,000 of	
compensation from the organization. Report compensation (A) Name and business addre	tion for	the c	alend	dar y	year	endı	ng v	vith or within the or	ganization's tax year	(C)
FAREWELL ARCHITECTS, LLC 200 FORESTAL ROAD		TON,	ŊJ	08	<u>540</u>			Description of RENOVATION &		Compensation 138,573.
WS CUMBY 938 LINCOLN AVE. SPRINGFIELD, PA 19								GENERAL CONTR	ACTOR	119,442.
2 Total number of independent contractors (including but \$100,000 of compensation from the organization ▶		ted to	tho	se I	isted	abo	/e)	who received more	than	
PAA		TEEAC					_			Form 990 (2013)

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . . . (D) (A) Total revenue Related or Unrelated Revenue exempt business excluded from tax function revenue under sections revenue 512-514 1 a 1 a Federated campaigns GRANTS CONTRIBUTIONS, GIFTS, GRANTS
AND OTHER SIMILAR AMOUNTS b Membership dues 1 b c Fundraising events 1 c 5,450 d Related organizations 1 d e Government grants (contributions) 1 e 796 f All other contributions, gifts, grants, and similar amounts not included above . . . 264,178 a Noncash contributions included in lines 1a-1f: h Total. Add lines 1a-1f. 270,424 PROGRAM SERVICE REVENUE **Business Code** 154,348 2a PROGRAM 154,348 f All other program service revenue. . . g Total. Add lines 2a-2f 154,348. Investment income (including dividends, interest and other similar amounts) 70,665 70,665 Income from investment of tax-exempt bond proceeds... Royalties (ı) Real (II) Personal 6a Gross rents...... 54,470 b Less: rental expenses c Rental income or (loss) ... 54,470 d Net rental income or (loss) (II) Other (i) Securities 7 a Gross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses c Gain or (loss)..... d Net gain or (loss). 8 a Gross income from fundraising events **STHER REVENUE** (not including . \$_ <u>5,450.</u> of contributions reported on line 1c). See Part IV, line 18 174,124 b Less: direct expenses...... 64.581 <u>1</u>09 109,543 9 a Gross income from gaming activities. See Part IV, line 19...... a **b** Less: direct expenses **b** c Net income or (loss) from gaming activities..... 10a Gross sales of inventory, less returns 658 b b Less: cost of goods sold..... 201 c Net income or (loss) from sales of inventory 457 **Business Code** 11 a d All other revenue

e Total, Add lines 11a-11d Total revenue. See instructions

2,661,907

154,348

0

PartilX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX..... (D) Fundraising (A) (R) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Management and Program service general expenses expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 46,854 46,854 Grants and other assistance to individuals in the United States. See Part IV, line 22.... Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 125,445 62,723 41.397 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)..... 0 n Other salaries and wages 85,192 756. 734.089 607.141 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).... Other employee benefits 78.166. 65,520 11,166 1,480. 10 Payroll taxes 71,073 54,003 11,393 5,677. 11 Fees for services (non-employees): a Management c Accounting e Professional fundraising services. See Part IV, line 17... f Investment management fees g Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) 11,404 11,404 1,841 1,754 Information technology..... Royalties Occupancy...... 17 Travel..... Payments of travel or entertainment expenses for any federal, state, or local Conferences, conventions, and meetings Payments to affiliates..... 21 Depreciation, depletion, and amortization... 57,593 57,593 44,058 38,650 5,408 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.) 50,201 a CONSULTING FEES 168,485 118,284 116,270 21,012 PROFESSIONAL FEES 137,282 SUPPLIES 38,322 35,025 2.755 542 14,194 529 778. d PRINTING AND PUBLICATIONS 19,501 2,215. 84,795 4,038. 91,048 182,977. 127,974. 625,161 314,210 25 Total functional expenses. Add lines 1 through 24e. . . . 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).....

33

13,148,189

13,204,649

14,371,843.

14,518,968

Form 990 (2013)

33

34

BAA

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X...... (A) Beginning of year (B) End of year 212,112. Cash - non-interest-bearing..... 61,022 2 700,682 5,761,933. 207,986 3 905,461. 3 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L..... 5 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.... 6 ASSETS Notes and loans receivable, net 8 10.227. 9,583 9 366 32,364 Prepaid expenses and deferred charges. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10a 6,390,624 **b** Less: accumulated depreciation 10Ь 864,806 5,313,296 5,525,818. Investments – publicly traded securities.... Investments - other securities. See Part IV, line 11...... 12 12 13 13 14 14 1,906,714 15 15 2,071,053. 16 13,204,649 14,518,968. 16 17 Accounts payable and accrued expenses... 17 56,460 147,125 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Loans and other payables to current and former officers, directors, trustees, 22 22 23 23 24 24 Unsecured notes and loans payable to unrelated third parties.... Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25..... 26 147,125 56,460 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. 27 3,410,320 27 3,768,654. 944,337 28 6,830,035 28 5. 29 29 3. 793,532 3,773,154 P Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. FUND Capital stock or trust principal, or current funds.... 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund..... 31 BAL 32 32 Retained earnings, endowment, accumulated income, or other funds......

TEEA0111L 07/08/13

Total liabilities and net assets/fund balances

Forn	990 (2013) THE STONY BROOK-MILLSTONE WATERSHED	21-0649	717	Pa	ge 12
Pai	秋溪屬 Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,	661,9	<u> 307.</u>
2	Total expenses (must equal Part IX, column (A), line 25)		1,	625,1	<u> 161.</u>
3	Revenue less expenses. Subtract line 2 from line 1.		1,	036,7	<u> 146.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,	148,1	<u> 189.</u>
5	Net unrealized gains (losses) on investments	5		186,9	3 08.
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	14,	371,8	343.
Pa	被测量 Financial Statements and Reporting	•	•		
	Check if Schedule O contains a response or note to any line in this Part XII				
	- · · · · · · · · · · · · · · · · · · ·		·	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2	а	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev separate basis, consolidated basis, or both:	riewed on	a		# % # %
	Separate basis Consolidated basis Both consolidated and separate basis				
ı	Were the organization's financial statements audited by an independent accountant?		2	ь Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sebasis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	parate			
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	iudit, 	2	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?		з	а	Х
I	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits		з	b	
BAA			Fo	rm 990	(2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

THE STONY BROOK-MILLSTONE WATERSHED

Employer identification number

		ASSOC	IATION						21-0	54971	7		
Par	tils	Reason for Pub	lic Charity Status	(All organizations	must d	comple	te this	part.)	See i	nstruct	ions.		
The	orga	nization is not a priva	ate foundation becaus	e it is: (For lines 1 thro	ugh 11,	check o	nly one	box.)					
1		A church, convention	n of churches or assoc	ciation of churches desc	cribed in	section	170(b)	(1)(A)(i)) .				
2		A school described i	n section 170(b)(1)(A)	(ii). (Attach Schedule E)								
3	П	A hospital or a coop	erative hospital servic	e organization describe	d in sec	ction 17	0(b)(1)(A	\)(iii).					
4	П	A medical research	organization operated	in conjunction with a h	ospital o	describe	d in sec	tion 17	0(Ь)(1)(А	A)(iii) . Er	nter the hos	spital's	;
	_	name, city, and state	e:										
5		An organization opera 170(b)(1)(A)(iv). (Co	ited for the benefit of a implete Part II.)	college or university own	ed or op	erated by	a gove	rnmenta	I unit des	scribed in	section		
6				overnmental unit descri									
7		An organization that r in section 170(b)(1)(iormally receives a subs A)(vi). (Complete Par	stantial part of its support t II.)	from a	governm	ental un	it or fron	n the ger	neral pub	lic described	1	
8	\sqcup	_		'0(b)(1)(A)(vi). (Complet									
9		from activities related investment income a	to its exempt functions.	ore than 33-1/3% of its s – subject to certain excestainexcestaxable income (lessemble modern)	otions. a	and (2) r	o more	lhan 33-	1/3% of	its suppo	ort from aros:	S	fter
10	Ш			xclusively to test for pu									
11		An organization organ more publicly suppo- describes the type o	ized and operated excli rted organizations des f supporting organizat	usively for the benefit of, cribed in section 509(a ion and complete lines	to perfor)(1) or s 11e thre	m the fu section 5 ough 11	nctions (509(a)(2) h.	of, or ca). See s	rry out th section !	e purpos 5 09(a)(3)	ses of one or . Check the	box t	hat
		a ∏Type I t	n ∏Type II c	Type III - Function	ally inte	egrated		∄ ∏	Type III	– Non-fi	unctionally	integra	ated
е		By checking this box other than foundation section 509(a)(2).	t, I certify that the organization of the construction of the cons	anization is not controll an one or more publicly s	ed direc upportec	tly or in I organiz	directly ations de	by one escribed	or more in section	dısqualı n 509(a)	ified persor (1) or	ns	
f		If the organization rec	eived a written determin	nation from the IRS that is	s a Type 			e III sup	porting c	rganızatı	on,		
g		Since August 17, 20	06, has the organizate	on accepted any gift of	contrib	ution fro	om any	of the fo	ollowing	persons	i? _		
		an										Yes	No
				ontrols, either alone or opported organization?							11 g (i)		
		(ii) A family memb	er of a person describ	oed in (ı) above?		• • • • • • • •		• • • • •			11 g (ii)		
		(iii) A 35% controll	ed entity of a person	described in (ı) or (iı) al	oove? .						11 g (iii)		
h		Provide the following	information about the	e supported organization	n(s).								
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (i your go	s the ation in listed in overning ment?	(v) Did yo the organ column (supp	zation in	organiz colur organize	s the ation in nn (i) ed in the S ?	(vii) Amount sup	of mone	etary
		_			Yes	No	Yes	No	Yes	No			
(A)													
(B)								_		-			
				-					-				
(C)													
(D)		<u> </u>			_								
(E)	_		Market Charles and Theorem	TORRESTA CONTIA SOL TATINGO APRILIA A	acar ana	o masa	- The state of the	in the same	ic.F.g.a	क्रम्म ११			
Tota	1												

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

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 THE STONY BROOK-MILLSTONE WATERSHED 21-0649717

[Parkill Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the
organization fa	uls to qualify under the tests listed below, please complete Part III.)

<u>Sec</u>	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.').						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge.						
4	Total. Add lines 1 through 3		_				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		S Towns of the second		特别 (A)		
Sec	tion B. Total Support	, 					
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see ins	tructions)			12	
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	ırd, fourth, or fıfth t	ax year as a sectio	n 501(c)(3)	▶□
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20						<u></u> %
15	Public support percentage from	2012 Schedule A,	Part II, line 14			15	%
16 a	33-1/3% support test — 2013. If and stop here. The organization	the organization qualifies as a pul	did not check the olicly supported o	box on line 13, a rganization	nd the line 14 is 3	3-1/3% or more, o	theck this box
b	33-1/3% support test – 2012. If and stop here. The organization	the organization d qualifies as a pu	id not check a bo blicly supported o	ox on line 13 or 16 or 16 or 16 or 16 or 16 or 17 or 18 or 1	a, and line 15 is	33-1/3% or more,	check this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop her	e. Explain in Part	IV how
	10%-facts-and-circumstances to or more, and if the organization organization meets the facts-an	meets the 'facts-a d-circumstances'	and-circumstance: test. The organiza	s' test, check this ation qualifies as	box and stop her a publicly support	e. Explain in Part ed organization	IV how the ►
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check the	s box and see ins	tructions
BAA					Sch	nedule A (Form 99	0 or 990-EZ) 2013

21-0649717

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

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

Sec	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions						
	and membership fees received. (Do not include						
	received. (Do not include any 'unusual grants.')	3,153,827.	1,791,252.	3,177,304.	2,561,282.	2,270,424.	12,954,089.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	175,831.	293,277.	356,416.	321,348.	332,130.	1,479,002.
3	Gross receipts from activities that are not an unrelated trade	175,051.	293,211.	330,410.	321,340.	332,130.	
4	or business under section 513. Tax revenues levied for the			<u> </u>			0.
	organization's benefit and either paid to or expended on its behalf						0.
	facilities furnished by a governmental unit to the organization without charge				E		0.
	Total. Add lines 1 through 5	3,329,658.	2,084,529.	3,533,720.	2,882,630.	2,602,554.	14,433,091.
7 a	Amounts included on lines 1,						
	2, and 3 received from disqualified persons	417,892.	258,763.	458,389.	1,088,989.	547,796.	2,771,829.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	417,892.	258,763.		1,088,989.	547,796.	2,771,829.
	Public support (Subtract line	417,092.			1,000,000.		2,111,025.
	7c from line 6.)tion B. Total Support						11,661,262.
JEL	tion D. Total Support						· · · · · · · · · · · · · · · · · · ·
Calan	dor year (or fiscal us beginning in)	(2) 2000	(b) 2010	l (c) 2011	(4) 2012	(a) 2013	l (f) Total
	dar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	(a) 2009 3, 329, 658.		(c) 2011 3,533,720.		(e) 2013 2, 602, 554.	
9 10 a	Amounts from line 6						492,907.
9 10 a	Amounts from line 6	3,329,658. 86,440.	2,084,529. 91,941.	93,687.	2,882,630. 95,704.	2,602,554. 125,135.	14,433,091. 492,907. 0.
9 10 a	Amounts from line 6	3,329,658.	2,084,529.	3,533,720.	2,882,630.	2,602,554.	14,433,091. 492,907. 0. 492,907.
9 10 a E	Amounts from line 6	3,329,658. 86,440.	2,084,529. 91,941.	93,687.	2,882,630. 95,704.	2,602,554. 125,135.	14,433,091. 492,907. 0.
9 10a 11 12	Amounts from line 6	3,329,658. 86,440. 86,440.	91,941. 91,941. 2,176,470.	93,687. 93,687.	95,704. 95,704.	2,602,554. 125,135. 125,135.	14,433,091. 492,907. 0. 492,907. 0. 14,925,998.
9 10a 11 12	Amounts from line 6	3,329,658. 86,440. 86,440.	91,941. 91,941. 2,176,470.	93,687. 93,687.	95,704. 95,704.	2,602,554. 125,135. 125,135.	14,433,091. 492,907. 0. 492,907. 0. 14,925,998.
9 10 a 11 12 13 14	Amounts from line 6	3, 329, 658. 86, 440. 86, 440. 3, 416, 098. is for the organizastop here.	91,941. 91,941. 2,176,470. ation's first, secon	93,687. 93,687.	95,704. 95,704.	2,602,554. 125,135. 125,135.	14,433,091. 492,907. 0. 492,907. 0. 14,925,998.
9 10 a 11 12 13 14 Sec	Amounts from line 6	3, 329, 658. 86, 440. 86, 440. 3, 416, 098. is for the organizatop here	91,941. 91,941. 2,176,470. ation's first, second	93, 687. 93, 687. 93, 687.	95,704. 95,704. 2,978,334. r fifth tax year as	2, 602, 554. 125, 135. 125, 135. 2, 727, 689. a section 501(c)	14,433,091. 492,907. 0. 492,907. 0. 14,925,998. (3)
9 10 a 11 12 13 14 Sec 15	Amounts from line 6	3, 329, 658. 86, 440. 86, 440. 3, 416, 098. is for the organizatop here blic Support P	2,084,529. 91,941. 91,941. 2,176,470. ation's first, secondercentage n (f) divided by lir	93, 687. 93, 687. 93, 687. 3, 627, 407. nd, third, fourth, control of the 13, column (f)	2,882,630. 95,704. 95,704. 2,978,334. r fifth tax year as	2, 602, 554. 125, 135. 125, 135. 2, 727, 689. a section 501(c)	14,433,091. 492,907. 0. 492,907. 0. 14,925,998. (3) 78.13 %
9 10 a k 11 12 13 14 Sec 15 16	Amounts from line 6	3, 329, 658. 86, 440. 86, 440. 86, 440. stop here. blic Support P 13 (line 8, column 2012 Schedule A,	2,084,529. 91,941. 91,941. 2,176,470. ation's first, secon Percentage n (f) divided by lir Part III, line 15.	93, 687. 93, 687. 93, 687. 3, 627, 407. nd, third, fourth, one 13, column (f))	2,882,630. 95,704. 95,704. 2,978,334. r fifth tax year as	2, 602, 554. 125, 135. 125, 135. 2, 727, 689. a section 501(c)	14,433,091. 492,907. 0. 492,907. 0. 14,925,998. (3)
9 10 a k 11 12 13 14 Sec 15 16	Amounts from line 6	3, 329, 658. 86, 440. 86, 440. 86, 440. stop here blic Support P 13 (line 8, column 2012 Schedule A, restment Incor	2,084,529. 91,941. 91,941. 2,176,470. ation's first, secondary first, secondary first first, secondary first	93, 687. 93, 687. 93, 687. 3, 627, 407. nd, third, fourth, one 13, column (f)	2,882,630. 95,704. 95,704.	2, 602, 554. 125, 135. 125, 135. 2, 727, 689. a section 501(c)	14,433,091. 492,907. 0. 492,907. 0. 14,925,998. (3) 78.13 % 81.01 %
9 10 a 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6	3, 329, 658. 86, 440. 86, 440. 86, 440. 3, 416, 098. is for the organizatop here blic Support P 13 (line 8, column 2012 Schedule A, restment Incor or 2013 (line 10c,	91,941. 91,941. 91,941. 2,176,470. ation's first, secondercentage n (f) divided by line Percentage column (f) divided	93, 687. 93, 687. 93, 687. 3, 627, 407. nd, third, fourth, control of the second o	2,882,630. 95,704. 95,704. 2,978,334. r fifth tax year as	2, 602, 554. 125, 135. 125, 135. 2, 727, 689. a section 501(c)	14,433,091. 492,907. 0. 492,907. 0. 14,925,998. (3) 78.13 % 81.01 %
9 10 a 11 12 13 14 Sec 17 18	Amounts from line 6	3, 329, 658. 86, 440. 86, 440. 86, 440. 86, 440. 13 (line organization or 2013 (line 10c, organization or 2012 Schedule 4, organization or 2012 Schedule (the organization of 2012 Schedule (the organization or 2013 (line 10c, organization or 2013 Schedule (the organization	2,084,529. 91,941. 91,941. 2,176,470. ation's first, second first, s	3, 533, 720. 93, 687. 93, 687. 3, 627, 407. ad, third, fourth, content of the second fine 13, column (f)) et d by line 13, column (f) by the second fine 14, column (f)	2,882,630. 95,704. 95,704. 2,978,334. r fifth tax year as	2, 602, 554. 125, 135. 125, 135. 125, 135. 2, 727, 689. a section 501(c)	14,433,091. 492,907. 0. 492,907. 0. 14,925,998. (3) 78.13 % 81.01 % 3.30 % 3.23 % and line 17
9 10 a 11 12 13 14 Sec 17 18 19 a	Amounts from line 6	3, 329, 658. 86, 440. 86, 440. 86, 440. 86, 440. Stop here blic Support Polia (line 8, columnation and second an	91,941. 91,941. 91,941. 91,941. 2,176,470. ation's first, second for the second form of the second form	3, 533, 720. 93, 687. 93, 687. 93, 687. 3, 627, 407. nd, third, fourth, control of third, fourth, control of the second by line 13, column (f)) e box on line 14, anization qualifies a	2,882,630. 95,704. 95,704. 2,978,334. r fifth tax year as mn (f))	2, 602, 554. 125, 135. 125, 135. 125, 135. 2, 727, 689. a section 501(c)	14,433,091. 492,907. 0. 492,907. 0. 14,925,998. (3) 78.13 % 81.01 % 3.30 % 3.23 % and line 17

Schedule A	(Form 990 or 990-E2	Ž) 2013TH	E STONY	BROOK-MI	LLSTONE	WATERSHED	21-0649717	Page 4
Part IV	Supplemental or 17b; and Pa (See instructio	Information. art III, line 12 ns).	Provide Also con	the explana	ations requi part for any	ired by Part I y additional i	II, line 10; Part II, line 17a nformation.	-
	. 							·
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				-	- -			
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Schedule C (Form 990 or 990-EZ) 2013

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Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

• 5	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III.			
Name	of organization			Employer identifica	ation number
THE	STONY BROOK-MILLS	TONE WATERSHED		21-064971	
Par	til:A. Complete if the o	rganization is exempt under section	on 501(c) or is a s	ection 527 organia	zation.
1	•	organization's direct and indirect political o	. •		
2	•				
Par	tijiBii Complete if the o	rganization is exempt under sections is exempt under sections is exempt under section under the organization under	on 501(c)(3).		
1					
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955	▶\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
b	If 'Yes,' describe in Part IV.				
		rganization is exempt under section			
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities ►\$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	izations for section 527	exempt	
3	Total exempt function expen line 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	▶\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5		and employer identification number (EIN) s. For each organization listed, enter the all is received that were promptly and directly del all action committee (PAC). If additional spa			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					•
(5)			,		
(6)					

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

chedule C (Form 990 or 990-EZ) 201	13 THE STONY B	ROOK-MILLSTONE W	ATERSHED	21-064	19717 Page	2
Complete if section 501	the organization	n is exempt under se	ction 501(c)(3) and			
A Check ► ☐ If the filin address,	ng organization belong , EIN, expenses, and	gs to an affiliated group (and d share of excess lobbying cked box A and 'limited co	expenditures).	ated group member's nam	ne,	_
	Limits on Lobby	ving Expenditures		(a) Filing organization's totals	(b) Affiliated group totals	_
1 a Total lobbying expendit			<u> </u>			_
• • •	•	legislative body (direct lobb				_
* = :		and 1b)	= =:			-
• = :	-					-
, , ,	•	nes 1c and 1d)				_
f Lobbying nontaxable an	nount. Enter the am	nount from the following tal	ole in		-	
If the amount on line 1e, col	· · · · · · · · · · · · · · · · · · ·	The lobbying nontaxable		Significant Programmers		Į.)
Not over \$500,000	iulilii (a) or (b) is.	20% of the amount on line 1e.	amount is.			ð
Over \$500,000 but not over \$1	.000.000	\$100,000 plus 15% of the excess	over \$500,000.			į.
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess				Ä
Over \$1,500,000 but not over \$	````	\$225,000 plus 5% of the excess of				ij
Over \$17,000,000		\$1,000,000.				ž
	amount (enter 25%	of line 1f)				
h Subtract line 1g from lin	ne 1a. If zero or less	s, enter -0				
_		, enter -0				
j If there is an amount othe section 4911 tax for this	er than zero on either s vear?	line 1h or line 1i, did the org	ganization file Form 4720	reporting	∏Yes ∏No	- ,
-		4-Year Averaging Period U				-
(Som	ne organizations tha	at made a section 501(h) el ns below. See the instructi	ection do not have to d	complete all of the five h 2f.)		
	Lobb	ying Expenditures During	4-Year Averaging Peri	od		_
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total	
2 a Lobbying non-taxable amount						_
b Lobbying ceiling amount (150% of line 2a, column (e))						_
c Total lobbying expenditures						
d Grassroots nontaxable amount						_
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2013

BAA

Schedule C (Form 990 or 990-EZ) 2013 THE STONY BROOK-MILLSTONE WATERSHED 21-0649717

Rattliba Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)	(b)
For each 'Yes' response to lines 1a through 1ı below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
SEE PART IV 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	-		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?.	$\overline{}$	Х	
e Publications, or published or broadcast statements?	-		730.
f Grants to other organizations for lobbying purposes?		Х	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	-		<u>9,925.</u>
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х	
i Other activities?		Х	
j Total. Add lines 1c through 1i			10,655.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	-	X	and the state of t
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	$g:\mathcal{E}_{\mathcal{L}}$		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			金数 1000000000000000000000000000000000000
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	(c)(5), 	, or 	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3
<u>RattillEM</u> Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) F answered 'Yes.'	c)(5), art II	, or s I-A, li	ection 501(c) ine 3, is
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			· · · · · ·
a Current year	[2 a	
b Carryover from last year.		2 b	
c Total		2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
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	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
RartilVa Supplemental Information			
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou Part II-B, line 1. Also, complete this part for any additional information.	p list);	Part I	I-A, line 2; and
PART II-B - DESCRIPTION OF LOBBYING ACTIVITY	- .		
THE ORGANIZATION CONDUCTED ADVOCACY AT THE STATE AND LOCAL LEVEL	<u>INT</u> E	NDEL	<u>TO</u>
<u>INFLUENCE LEGISLATION PERTAINING TO ENVIRONMENTAL PROTECTION. ST</u>	<u>AFF</u> .	<u>ENG</u>	GED STATE
LEGISLATORS AND THEIR STAFFS AND LOCAL ELECTED OFFICIALS TO PROMO	<u>TE</u> _E	<u>NVI</u> F	ONMENTAL
PROTECTION AND ADVISED MEMBERS OF THE ORGANIZATION AND THE PUBLIC	<u>OF</u> .	PENI	OING ISSUES
THROUGH INTERNAL COMMUNICATION MECHANISMS, PRESS CONFERENCES AND	RALL	IES.	

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization THE STONY BROOK-MILLSTONE WATERSHED ASSOCIATION 21-0649717 Partill Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year).... Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes ☐ No are the organization's property, subject to the organization's exclusive legal control?.... Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV. line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements...... 2a 3 2Ы 145 b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ►\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Partill Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

b Assets included in Form 990, Part X

Schedule D (Form 990) 2013 THE	STONY BRO	OK-MILLSTONE W	ATERSHED	21-064	9717 Page 2
Rankill Organizations Mainta	ining Collec	ctions of Art, Histo	orical Treasures, o	r Other Similar Ass	ets (continued)
3 Using the organization's acquisition items (check all that apply):	n, accession, an	d other records, check a	ny of the following that a	re a significant use of its	collection
a Public exhibition		d 🗌 Loan	or exchange programs		
b Scholarly research		e 🗌 Other			
c Preservation for future gener	rations				
4 Provide a description of the organize Part XIII.	zation's collection	ons and explain how they	further the organization	's exempt purpose in	
5 During the year, did the organiza to be sold to raise funds rather t	ition solicit or i han to be mair	receive donations of ar ntained as part of the o	t, historical treasures, organization's collection	or other similar assets	Yes No
Escrow and Custodia line 9, or reported an	I Arrangem amount on	ents. Complete if t Form 990, Part X,	he organization ar line 21.	swered 'Yes' to For	m 990, Part IV,
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodiar	, or other intermediary	for contributions or ot	her assets not included	Yes No
b If 'Yes,' explain the arrangement					
		•			Amount
c Beginning balance				1c	
d Additions during the year					
e Distributions during the year					
2a Did the organization include an a					Yes No
b If 'Yes,' explain the arrangement					H
bit res, explain the arrangement	in at Am. o	neck here it the explai	Mon has been provided	u III ait 7011	
Pantwa Endowment Funds. C	omplete if t	he organization ar	swered 'Yes' to Fo	orm 990 Part IV lin	e 10.
Hankerton Endowment and C	(a) Current y				(e) Four years back
1 a Beginning of year balance		(5) 11101 300	(6) 1 110) (110) 110	(4) 11/100) 52/10 24/51/	(0) 1000 7000 0000
b Contributions					
D Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					ļ
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					
Provide the estimated percentag	e of the currer	it year end balance (lir	ne 1g, column (a)) held	as:	
a Board designated or quasi-endown	nent ►	8			
b Permanent endowment ►	%				
c Temporarily restricted endowme	nt ►	8			
The percentages in lines 2a, 2b,	and 2c should	equal 100%.			
3 a Are there endowment funds not in organization by:			are held and administere	d for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' to 3a(ii), are the related					3b
4 Describe in Part XIII the intende	•	•			·
Rand, Buildings, and			J. 141143.		
Complete if the organ			n 000 Part IV line	11a Soo Form 000) Part Y line 10
				· · · · · · · · · · · · · · · · · · ·	
Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	-		3,761,100.	HE STATE OF THE ST	3,761,100.
b Buildings c Leasehold improvements	<u> </u>		2,332,067.	664,490.	1,667,577.
d Equipment	-		244,987.	154,550.	90,437.
e Other	⊢		52,470.		6,704.
Total. Add lines 1a through 1e. (Colum		ual Form 990. Part X			5,525,818.
BAA	(-,50, 54				ule D (Form 990) 2013

Complete if the organization answered 'Yes' to Form	990, Part IV, line 11e	or 11f. See Form 990, Part X, line 25
(a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)	 	
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)		
2 Lobelle for an adversary to see the see the Dort VIII arrange the total of the fortant	. An Abn avenueshaule fran	and statements that reports the accompanion's lightlift for uncertain

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

Schedule D (Form 990) 2013 THE STONY BROOK-MILLSTONE WATERSHED	21-06497	17 Page 4
RankXI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1 1	2,661,907.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2422	2/302/03/3
a 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		
3 Subtract line 2e from line 1	3	<u>2,661,907.</u>
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)	2	
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	2,661,907.
Rant XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p		
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
		1 605 161
1 Total expenses and losses per audited financial statements		1,625,161.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	1,625,161.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
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	1,625,161.
Part XIII Supplemental Information.		
	Part V	
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; 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 additiona	l information.
PART_II_LINE_5 - SUMMARIZED_POLICY		
THE ORGANIZATION'S BOARD OF TRUSTEES ADOPTED A POLICY ON MONITORIN	<u>G_AND_ENI</u>	<u> </u>
OF CONSERVATION EASEMENTS PREPARED BY THE LAND TRUST ALLIANCE. TH	E_POLICY	<u>ADDRESSES</u>
FUNDING_STRATEGIES, MONITORING, PROTECTION AS NECESSARY, RELATIONS	HIPS_WITE	1
<u>LANDOWNERS, AND BACK-UP PLANS FOR UNFORESEEN CIRCUMSTANCES OR CHAN</u>	GES THAT	MAY AFFECT
_		
THE EASEMENT OR ITS OWNERSHIP IN THE FUTURE.		

BAA

Schedule **D** (Form 990) 2013

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Information about Schedule G (Form 990 or 990-EZ) and its instructions is

at www.irs.gov/form990.

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Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization THE STONY BROOK-MILLSTONE WATERSHED 21-0649717 **ASSOCIATION** Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Partille Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants X Mail solicitations а X Solicitation of government grants Internet and email solicitations g X Special fundraising events Phone solicitations |X| In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?...... **b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (or retained by) fundraiser listed in or entity (fundraiser) from activity (or retained by) have custody or control of contributions? organization column (i) Yes No 1 2 3 4 5 6 7 8 9 10 0. Total... List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration 3 or licensing.

Par		Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts great the second	event contributions	nswered 'Yes' to Fo s and gross income	rm 990, Part IV, li on Form 990-EZ,	ne 18, or reported lines 1 and 6b.
R			(a) Event #1 SPECIAL EVENTS (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
REVEXUE	1	Gross receipts	179,574.			179,574.
Ē	2	Less: Charitable contributions	5,450.			5,450.
	3	Gross income (line 1 minus line 2)	174,124.			174,124.
	4	Cash prizes		· <u> </u>		
	5	Noncash prizes		1000		
DIRECT	6	Rent/facility costs				
	7	Food and beverages				
X P E	8	Entertainment				
EXPENSES	9	Other direct expenses	64,581.			64,581.
S	10	Direct expense summary. Add lines 4 thr				
	11	Net income summary. Subtract line 10 fro	om line 3, column (d).	olto Form 000 Day	+ IV/ line 10 or rer	109,543.
<u>Rar</u>	<u> </u>	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	itton answered Tes	s to Form 990, Par	tiv, line 19, or rep	Jorteu more than
REVENUE	 		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ē.	1	Gross revenue				
E	2	Cash prizes				
D P E N S E C T	3	Noncash prizes				
Č Š T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	Yes%	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d).			
	8	Net gaming income summary. Subtract li	ine 7 from line 1, colum	nn (d)		
	als ti	ter the state(s) in which the organization of the organization licensed to operate gaming No,' explain:	g activities in each of th	nese states?		Yes No
		re any of the organization's gaming license 'es,' explain:	·	_		
BAA	<u></u>		TEEA3702L (06/26/13	Schedule G (For	m 990 or 990-EZ) 2013

Schedule G (Form 990 or 990-EZ) 2013 THE STONY BROOK-MILLSTONE WATERSHED

sche	edule G (Form 990 or 990-EZ) 2013 THE STONY BROOK-MILLSTONE WATERSHED	21-06497	1/	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed administer charitable gaming?	to [Yes	No
13	Indicate the percentage of gaming activity operated in:			
a	The organization's facility	13a		8
	An outside facility.	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and reco	irds:		
	Name ►	_	. – – –	
	Address ►		_ _	
t	a Does the organization have a contact with a third party from whom the organization receives gaming reversed if 'Yes,' enter the amount of gaming revenue received by the organization \$ and of gaming revenue retained by the third party \$ If 'Yes,' enter name and address of the third party:	enue?d the amount	Yes	No
	Name •			
	Address •			
16	Gaming manager information:			
	Name •		-	.
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17				
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
ŀ	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the		
B#	organization's own exempt activities during the tax year > \$	columns (iii) and (۸
Irai	Supplemental Information. Provide the explanations required by Part I, line 2b, and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide information (see instructions).	any addition	nal	v) ,
				-
				-
				
				· ·

SCHEDULE | (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

OMB No 1545-0047



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Department of the Treasury Internal Revenue Service	▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	edsu) (Liusbe
Name of the organization		Employer identification number
THE STONY BROO	THE STONY BROOK-MILLSTONE WATERSHED	21-0649717
Partil General In	Raries General Information on Grants and Assistance	
1 Does the organizal the selection crite	Does the organization maintain records to substantiate the amount of the grants or assistance, and the grants or assistance?	X Yes

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

(a) Name and address of organization or government	140	100 000	1000 1000 1000 1000	And American Section 1	Control of the Market	,	1-10
	(a)	if applicable	(a) Amount of cash grant	(e) Amount of non-cash assistance	(f) merried of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(n) Purpose of grant or assistance
(1) GREAT SWAMP WATERSHED ASSOCIA							HOMEOWNER
PO_BOX_300							STEWARDSHIP/WAT
NEW VERNON, NJ 07976	22-2403906		12,500.	0.			ER MONIT.
(2) HUNTERDON LAND TRUST							
111 MINE ST.							WETLAND & STORM
FLEMINGTON, NJ 08822	22-3477465		5, 250.	0.			RESTORATION
NJ INVASIVE SPECIES STRIKE							FUNDRAISING/EDU
PO_BOX_5752							./COMMUN./GROWT
I, NJ 08844	27-4565048		9,386.	0.			Н
RAHWAY RIVER ASSOCIATION							
337 E. MILTON	•						STORMWATER
065	22-3531981		6,150.	0.			TRAININGS
SOUTH JERSEY LAND AND WATER I							STORMWATER
PO_BOX_233							RESTORATION/TRA
NJ 0802	22-3298885		5,368.	0.			ININGS
VARIOUS_GRANTS_UNDER_\$5,000							VARIOUS MISSION
							RELATED
			8,200.	0.			ACTIVITIES
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	d government or	ganizations listed	in the line 1 table				2
3 Enter total number of other organizations listed in the line 1 table	listed in the line	1 table			:		
۱.,	the Instructions	for Form 990.		TEEA39011 07/12/13	07/12/13	Schedu	Schedule I (Form 990) (2013)

Page 2* Schedule I (Form 990) (2013) THE STONY BROOK-MILLSTONE WATERSHED

Refinite Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					•
2					
8					
4					
ស					
9					
7					
Partive Supplemental Information. Provide the information required in	ide the informatio	n required in Part I	Part I, line 2, Part III, co	column (b), and any other	er additional information.
PART IV - ADDITIONAL SUPPLEMENTAL INFORMATI	TAL INFORMATIC	NO.			
MONITORING_OF GRANT FUND USE IS DONE IN MULTIPLE WAYS	IS DONE IN MUL		THE GRANT PROGRAM	<u>M</u>	
COORDINATOR_MEETS_WITH_EACH_GRANTEE_HALFWAY_THROUGH_THE_PROJECT_PERIODPRIOR_TO	RANTEE HALEWAY	_THROUGH_THE_PI	ROJECT PERIOD.	PRIOR TO	
IHIS MEETING, GRANTEES ARE ONLY PROVIDED WITH ELTHER \$5,000 OR HALF OF THE GRANT	LY_PROVIDED_WI	TH ELTHER \$5.00	00_OR_HALE_OF_T	HE GRANT	
AWARD,_WHICHEVER_IS_GREATERIF_PROGRESS_		<u>AT MEETING TIME IS ON TRACK, THE REMAINDER</u>	IS ON TRACK, T	HE_REMAINDER	
OF_THE_GRANT_FUNDS_ARE_RELEASEDGRANTEES	ED. GRANTEES	ARE_REQUIRED_T	ARE REQUIRED TO GAIN APPROVAL FROM THE	FROM THE	
COORDINATOR_FOR_ANY_DESIRED_CHANGES_TO_THE_USE_OF_FUNDSIN_ADDITION,_GRANTEES	HANGES TO THE	USE_OF_FUNDS	IN ADDITION, G	RANTEES	
SUBMIT INTERIM AND FINAL FINANCIAL REPORTS, AND A FINAL NARRATIVE REPORT,	NCIAL REPORTS,	AND A FINAL N	<u>arrative repor</u> t		
DEMONSTRATING_PROJECT_COMPLETION_AND_FUND_		SPENDING. ALL REPORTS ARE REVIEWED BY THE	REPORTS ARE REV	TEWED BY THE	
COORDINATORSHOULD ANY CHALLENGES_ARISE.	LENGES ARISE,	THE GRANT REVI	THE GRANT REVIEW PANEL IS AVAILABLE TO	ILABLE_TO	
ASSIST THE COORDINATOR IF NEEDED BAA	DED.				Schedule I (Form 990) (2013)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 2013 Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization THE STONY BROOK-MILLSTONE WATERSHED ASSOCIATION 21-0649717 FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS A) SCIENCE - SCIENCE IS AT THE HEART OF THE WATERSHED ASSOCIATION'S ENVIRONMENTAL LEADERSHIP. ACROSS THE REGION, WE COLLECT KEY DATA ON THE HEALTH OF OUR STREAMS AND ON OTHER ENVIRONMENTAL FACTORS. WE DISTRIBUTE THE INFORMATION TO CITIZENS AND OFFICIALS IN CENTRAL NEW JERSEY, AND WORK WITH THEM TO ADDRESS POLLUTION OF OUR WATER SUPPLIES AND WATERWAYS. OUR GEOGRAPHIC INFORMATION SYSTEM COMBINES SCIENTIFIC DATA WITH MAPPING SYSTEMS TO HELP LOCAL GOVERNMENTS AND CITIZENS UNDERSTAND THE ENVIRONMENTAL ISSUES FACING OUR COMMUNITIES AND HELP PLAN FOR A BETTER FUTURE. B) ADVOCACY - FOR SIX DECADES, THE WATERSHED ASSOCIATION HAS LED THE FIGHT TO PRESERVE OUR REGION'S WATER AND LAND. WE ENGAGE LOCAL AND STATE OFFICIALS, URGING THEM TO STRENGTHEN ENVIRONMENTAL PROTECTIONS, IMPROVE PLANNING AND ZONING, AND MAKE BETTER INFORMED DECISIONS ABOUT OUR FUTURE. WE WORK COOPERATIVELY WITH LOCAL TOWNS THROUGH OUR PROJECT FOR MUNICIPAL EXCELLENCE, AND SPEAK OUT AGAINST DEVELOPMENT PROPOSALS THAT WOULD HARM THE LOCAL ENVIRONMENT AND OUR QUALITY OF LIFE. FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER THE WATERSHED ASSOCIATION DEFINES MEMBERS OF THE ORGANIZATION AS INDIVIDUALS, CORPORATIONS, CLUBS, FOUNDATIONS, GOVERNMENT ENTITIES, AND OTHER ORGANIZATIONS, ENTITIES, OR GROUPS THAT SUBSCRIBE TO THE PURPOSES OF THE ORGANIZATION AND PAY THE ANNUAL MEMBERSHIP FEES ASSESSED BY THE ORGANIZATION. MEMBERS ARE ENTITLED TO VOTE FOR THE ELECTION OF TRUSTEES THAT HAVE BEEN RECOMMENDED BY THE ORGANIZATION'S NOMINATING COMMITTEE. FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY MEMBERS OF THE ORGANIZATION VOTE TO ELECT MEMBERS OF THE BOARD OF TRUSTEES, THE ORGANIZATION'S GOVERNING BODY, UPON THE RECOMMENDATION OF THE ORGANIZATION'S NOMINATING COMMITTEE

Schedule O (Form 990 or 990-EZ) 2013	Page 2
Name of the organization THE STONY BROOK-MILLSTONE WATERSHED ASSOCIATION	Employer Identification number 21-0649717
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
MEMBERS OF THE ORGANIZATION'S BOARD OF TRUSTEES REVIEW THE COMPLETED FORM 990 PRIOR	
TO SIGNATURE AND FILING.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS	
TRUSTEES MUST ANNUALLY ACKNOWLEDGE IN WRITING THEIR ACCEPTANCE	E_OF_THIS_POLICYAS
PART OF THIS PROCESS, TRUSTEES ARE PROVIDED WITH A FORM WHERE THEY CAN EITHER AFFIRM	
THAT THEY HAVE NO INTEREST, DIRECT OR INDIRECT, IN CONFLICT W	ITH THE WATERSHED'S
INTEREST OR IDENTIFY ANY INTERESTS THAT HAVE THE POTENTIAL FOR CONFLICT.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE	
UPON REQUEST	
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	. _

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box...... If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ... All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instru Employer identification number (EIN) or Type or THE STONY BROOK-MILLSTONE print ASSOCIATION 21-0649717 Number, street, and room or suite number. If a P.O. box, see instructions Social security number (SSN) File by the due date for TITUS MILL ROAD filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See instructions. PENNINGTON, NJ 08534-4303 Enter the Return code for the return that this application is for (file a separate application for each return). Application Is For Return Application Return Is For Code Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) Form 4720 (other than individual) 09 03 Form 990-PF 04 Form 5227 10 05 11 Form 990-T (section 401(a) or 408(a) trust) Form 6069 Form 8870 12 Form 990-T (trust other than above) 06 The books are in the care of ► CONTROLLER Telephone No. ► <u>(609)</u> <u>737-3735</u> Fax No. ► (609) 737-3075 If the organization does not have an office or place of business in the United States, check this box.. If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box. ▶ 🗍 . If it is for part of the group, check this box . . ▶ 🗍 and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time , 20 14 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: |X| calendar year 20 13 or ____, 20 ___, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a|\$ b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated 3Ы\$ tax payments made. Include any prior year overpayment allowed as a credit c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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