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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	rthe 2	2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31	2013	
		C Name of organization		yer identification number
	ress ch	New Jersey Asphalt Pavellient Assoc	21-06	566754
┌ _{Nar}	ne char	Doing Business As		700754
	ıal retur			
_	mınated	FOR HODIZON CENTED DRIVE NO. 520	E Telepho	one number
_	ended r		(609)	586-1188
_		Pending		
i Abb	псацоп			eceipts \$ 645,424
		F Name and address of principal officer KEVIN MONACO	H(a) Is this a group subordinates?	return for
		500 HORIZON CENTER DRIVE No 520	suborumates.	1 1651 110
		HAMILTON,NJ 08691	H(b) Are all subordi	nates
T Ta:	x-exem	pt status	included?	a list (see instructions)
			ii No, attacii	a list (see liistidetiolis)
J W	ebsite	::► WWW NJAPA COM	H(c) Group exempt	ion number 🟲
K Forn	n of org	anization	L Year of formation 19	33 M State of legal domicile NJ
Pa	rt I	Summary		
	1 E	Briefly describe the organization's mission or most significant activities		
	Ī	rade organization formed to promote the Hot Mix Asphalt(HMA) industry		
ဗ	_			
Ē	-			
E .	, -	Check this box 🛏 if the organization discontinued its operations or disposed of	f more than 25% of its	net accets
Governance	2	theck this box Fig. In the organization discontinued its operations of disposed of	Thore than 25% or its	net assets
	3 1	Number of voting members of the governing body (Part VI, line 1a)		3 27
60 (0)	l	Number of independent voting members of the governing body (Part VI, line 1b)		4 27
Ě	l	Fotal number of individuals employed in calendar year 2013 (Part V, line 2a)		5 2
Activities &	l	Total number of volunteers (estimate if necessary)		6 27
∢	l	Total unrelated business revenue from Part VIII, column (C), line 12		7a 0
		Net unrelated business taxable income from Form 990-T, line 34		7b 0
			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	123,	769 168,000
≘	9	Program service revenue (Part VIII, line 2g)	403,	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		285 2,014
a.		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		100 17,600
Ť	11	Other revenue (Fart viii, Column (A), mies 3, 00, 00, 30, 100, and iie)	1 14,	1001
ř	11 12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		
<u> </u>		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
<u> </u>		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		627,457
<u>#</u>	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	544,	627,457
	12 13	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	544,	662 627,457 000 30,900 0 0
	12 13 14 15	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	544,	662 627,457 000 30,900 0 0
	12 13 14 15	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	544,	662 627,457 000 30,900 0 0
Expenses R	12 13 14 15 16a b	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	544, 10, 122,	662 627,457 000 30,900 0 0 044 150,300 0 0
	12 13 14 15 16a b	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	544,i 10,i 122,i	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512
	12 13 14 15 16a b 17 18	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281, 413,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712
Expenses	12 13 14 15 16a b	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281, 413,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745
Expenses	12 13 14 15 16a b 17 18	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281, 413,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745
Expenses	12 13 14 15 16a b 17 18	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281, 413, Beginning of Curre	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year
Expenses	12 13 14 15 16a b 17 18 19	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281, 413, Beginning of Curre Year	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171
	12 13 14 15 16a b 17 18 19	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281, 413, Beginning of Curre Year	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171 563 24,683
Not Assets or Expenses Fund Balances	12 13 14 15 16a b 17 18 19	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281, 413, Beginning of Curre Year 714,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171 563 24,683
Month Assets of Expenses Expenses end befances	12 13 14 15 16a b 17 18 19 20 21 22 t III	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281,, 413,, 131, Beginning of Curre Year 714,, 111, 702,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171 563 24,683 743 837,488
Month Assets of Expenses Expenses end befances	12 13 14 15 16a b 17 18 19 20 21 22 t III	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281, 413, 131, Beginning of Curre Year 714, 11, 702,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171 563 24,683 743 837,488
A Fund Balances Expenses Characters or Expenses	12 13 14 15 16a b 17 18 19 20 21 22 1 III r pena nowled rer ha	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281,, 413,, 131, Beginning of Curre Year 714,, 111, 702,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171 563 24,683 743 837,488
Sign Paramonal Expenses On Day Paramonal Exp	12 13 14 15 16a b 17 18 19 20 21 22 t III r pena nowled rer ha	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171 563 24,683 743 837,488
Sign Paramonal Expenses On Day Paramonal Exp	12 13 14 15 16a b 17 18 19 20 21 22 t III r pena nowled rer ha	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171 563 24,683 743 837,488
Met Assets or Expenses of Fund Balances	12 13 14 15 16a b 17 18 19 20 21 22 t III r pena nowled rer ha	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281,	662 627,457 000 30,900 0 0 044 150,300 0 0 218 311,512 262 492,712 400 134,745 nt End of Year 306 862,171 563 24,683 743 837,488

Preparer

Use Only

Firm's address ► 1670 WHITEHORSE HAM SQ RD

HAMILTON, NJ 086903513

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

Firm's EIN 🕨 21-0650289

Phone no (609) 890-9189

✓ Yes ☐ No

Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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	Yes	
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
L1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11d		No
e	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11a		l No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	NO
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
L6	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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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	Yes	
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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

GI I	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	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 5		163	14
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c		
	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			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		N
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
l	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	- 50		
	II 163, to fine 3a of 3b, the the organization life Form 6000-17	5с		
ı	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	<u> </u>		
	The test, indicate the number of forms 5252 med during the year.			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
ı	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	İ	ĺи
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

56	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	27			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	27			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3	Yes	
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	raanız	ation's assets?	5		No
6	Did the organization have members or stockholders?			6	Yes	
	Did the organization have members, stockholders, or other persons who had the pow	erto	elect or annount one or			
	more members of the governing body?			7a	Yes	N -
	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b		No
	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	•		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	evenu	ie Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	s gov	erning body before filing	11a	Yes	
ь	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annual	ly inte	rests that could give	12b	Yes	
c	rise to conflicts?	the p	olicy? <i>If "Yes," describe</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?			13	Yes	
14	Did the organization have a written document retention and destruction policy?			14	Yes	
	, ,			1-4	162	
15	Did the process for determining compensation of the following persons include a rev independent persons, comparability data, and contemporaneous substantiation of the	e deli	beration and decision?			1
	The organization's CEO, Executive Director, or top management official			15a		No
b	Other officers or key employees of the organization	•		15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?			16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	e step	s to safeguard the	16b		
Se	ection C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed▶					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable (3)s only) available for public inspection. Indicate how you made these available. Ch	2), 99	0, and 990-T (501(c)			

- Own website Another's website Vipon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Association 500 HORIZON CENTER DRIVE SUITE 520 HAMILTON,NJ 08691 (609) 586-1188

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

Check if Schedule O contains a response or note to any line in this Part VII $\,$. $\,$.

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) THOMAS EARLE	1 00	х		х				0	0	0
PRESIDENT					_					
(2) VAL DELLA PELLO JR VICE PRESIDENT	1 00	x		х				0	0	0
(3) JOHN DAVIES	1 00	-			\vdash					
TREASURER	1 00	х		х				0	0	0
(4) MICHAEL CONTI	1 00									_
SECRETARY		Х		Х				0	0	0
(5) VINCENT GALLO	50	х						0	0	0
MEMBER		_ ^						Ü	0	0
(6) R JEFFREY MEEKER	50	х						0	0	0
MEMBER (7) JOSEPH BIGGICA					_					
MEMBER	50	х						О	0	0
(8) SCOTT BRAEN	50									_
MEMBER		Х						0	0	0
(9) ROBERT BROWN	50									
MEMBER		Х						0	0	0
(10) MICHAEL CRISCOLA	50									
MEMBER		х						0	0	0
(11) JOSEPH DIFIORE	50				\vdash					
		х						0	0	0
MEMBER (12) MICHAEL GOOCH	50									
		х						0	0	0
MEMBER (13) DEAN HOLCOMBE	50				_					
		x						0	0	0
MEMBER (14) PETER KOCHEK	50				_					
	50	х						0	0	0
MEMBER (15) STEVEN KURTZ	F0				_					
	50	х						О	0	0
MEMBER (16) SCOTT LAUDONE					\vdash					
(16) SCOTT LAUDONE	50	х						0	0	0
MEMBER										
						ı				
(17) AL MICHAEL	50	x						o	0	0

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

	for related organizations below	10 -		Position (do not che more than one box, un person is both an offi and a director/truste			:)	from the organization (W- 2/1099-	from related organizations (W- 2/1099-	compei from organi	the
	dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	MISC)	MISC)	and re organiz	elated
18) SLAVIC MOKIENKO	50	×							0)	0
MEMBER											
19) TONY MONSALUD	50	x							0		0
1EMBER 20) JOSEPH PANDOZZI	50									-	
1EMBER		X							0		0
21) JIM PONTARI	50										
ИЕМВЕR		X							0		0
22) KEVIN PROPSNER	50	х							0		0
1EMBER									Ŭ .	1	
23) RICHARD RAFFO	50	x							o		0
1EMBER 24) STEVE HAUGHTON	50	-								-	
1EMBER		X							0		0
25) DAVID L JOHNSON	50	†									
MEMBER		X							0)	0
26) CHRISTOPHER STAVOLA	50	x							0		0
1EMBER		ļ								<u> </u>	
27) ANTHONY SUPPA	50			×					o		0
1EMBER 28) KEVIN MONACO	20 00										
EXECUTIVE DIRECTOR				Х					0)	0
1b Sub-Total			•								
c Total from continuation sheets to P	•		•	•		<u> </u>		0	0		0
d Total (add lines 1b and 1c) Total number of individuals (includin \$100,000 of reportable compensation)				d al	bove	e) who	rec	<u> </u>	0		
										Yes	No
3 Did the organization list any former of on line 1a? If "Yes," complete Schedul				em.	• ibio;	,ee, o • •	nig	mest compensat	ed employee		l No
For any individual listed on line 1a, is organization and related organization	s the sum of repor ns greater than \$1	table c 50,000	ompe	nsa <i>"Ye</i> s	tion	and o	thei te Sc	r compensation f chedule J for such	rom the		110
individualDid any person listed on line 1a rece	UVA OF RECEIVE SO	nencat	in .	rom	anı.	· unrol	• atad	organization	· · · 4		No
services rendered to the organization									5		No
Section B. Independent Contrac											
1 Complete this table for your five high compensation from the organization											
	(A) id business address	21011 101	circ ·	curc	· iiuu	ı year	Ciid		(B) tion of services	(0	:)
ivarne ar	iu publiless duuless							Descrip	LIOH OF SCIVICES	Compe	เเอสเเปไ
2 Total number of Independent contractor		mak I:	المراس	اداد		liet-			d manua #1		

Part V	1111
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f g
Program Service Revenue	2a b c d e f
Revenue	g 3 4 5 6a b c d 7a b c d 8a
Other Re	b c 9a b c
	b c 11a b c d e

VIII	Statement o		nco or note to any lu	no in this Bort VIII			
	Check if Schedi	ule O contains a respo	nse or note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					
ь	Membership du	es 1b					
c	Fundraising eve	ents 1c	24,093				
d	Related organiz	rations 1d	143,907				
e	Government grants	s (contributions) 1e					
l f	All other contribution	ons, gifts, grants, and 1f					
'	sımılar amounts no	ot included above					
g	Noncash contribute 1a-1f \$	ons included in lines					
h	Total. Add lines	s 1a-1f	🔎	168,000			
			Business Code				
2a	MEMBERSHIP DUE	S	900099	309,638	309,638		
Ь	EDUCATIONAL PRO	OGRAMS	900099	130,205	130,205		
С							
d							
e	A.II I						
f	All other progra	am service revenue					
g		s 2a – 2f		439,843			
3		ome (including dividen ar amounts)		2,014			2,014
4		stment of tax-exempt bond					
5	Royalties		🕨				
6-	Cross rents	(ı) Real	(II) Personal				
b	Gross rents Less rental						
_ c	expenses Rental income						
d	or (loss)	me or (loss)					
"	Net rental incol	(ı) Securities	(II) Other				
7a	Gross amount from sales of	(1,700001111100	(11)				
	assets other than inventory						
ь	Less cost or						
	other basis and sales expenses						
C d	Gain or (loss) Net gain or (los	[
8a	Gross income f	•					
	events (not inc \$24	luding ,093					
	of contributions See Part IV, lin	reported on line 1c)					
	•	а	17,967				
Ь		penses b		0		ı	
9a		(loss) from fundraising rom gaming activities	events	0			
		e 19					
.		a					
b c		penses b (loss) from gamıng actı					
	Gross sales of						
	returns and allo	owances .					
Ь	less costofa	a oods sold b					
	=	(loss) from sales of inv	∟ entory ▶				
	Miscellaneous		Business Code				
11a	DIRECTORY A	DVERTISING	900099	17,600			17,600
Ь							
c							
d	All other revenu						
e	Total. Add lines		•	17,600			
12	Total revenue.	See Instructions .		627,457	439,843	0	19,614

Part IX Statement of Functional Expenses

ection $501(c)(3)$ 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						
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	18,400			<u> </u>	
2	Grants and other assistance to individuals in the United States See Part IV, line 22	12,500				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16					
4	Benefits paid to or for members					
5	Compensation of current officers, directors, trustees, and key employees					
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$					
7	Other salaries and wages	117,741				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,993				
9	Other employee benefits	16,654				
10	Payroll taxes	11,912			_	
11	Fees for services (non-employees)					
а	Management	58,000				
b	Legal	45,776			_	
c	Accounting	13,025				
d	Lobbying	10,000			_	
e	Professional fundraising services See Part IV, line 17					
f	Investment management fees					
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,193				
12	Advertising and promotion	2,844			-	
13	Office expenses	3,920			_	
14	Information technology	,				
15	Royalties					
16	Occupancy	29,701			_	
17	Travel	2,536				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings	17,847				
20	Interest					
21	Payments to affiliates					
22	Depreciation, depletion, and amortization	1,933				
23	Insurance	4,489				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)					
а	EDUCATIONAL PROGRAM EXP	83,943				
b	CONTRIBTN TO NJ APA PAC	7,200				
С	MISCELLANEOUS	6,691				
d	PRINTING AND SUPPLIES	6,229				
e	All other expenses	12,185				
25	Total functional expenses. Add lines 1 through 24e	492,712				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)					

Form 990 (2013)

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
	1	Cash-non-interest-bearing		52,961	1	52,308
	2	Savings and temporary cash investments		620,162	2	759,771
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		20,591	4	7,480
	5	Loans and other receivables from current and former officers, dire employees, and highest compensated employees Complete Part Schedule L	II of			
Assets	6	Loans and other receivables from other disqualified persons (as d4958(f)(1)), persons described in section 4958(c)(3)(B), and con and sponsoring organizations of section $501(c)(9)$ voluntary emplorganizations (see instructions) Complete Part II of Schedule L	tributing employers		5	
ž	7	Notes and loans receivable, net			7	
₹	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		1,500	9	14,053
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 9,667	·		14,000
	Ь	Less accumulated depreciation	10b 4,576	7,024	10c	5,091
	11	Investments—publicly traded securities		,	11	<u>, </u>
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11		13		
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		12,068	15	23,468
	16	Total assets. Add lines 1 through 15 (must equal line 34)		714,306		862,171
	17	Accounts payable and accrued expenses		607	17	8,587
	18	Grants payable		507	18	
	19	Deferred revenue		10,956	19	16,096
				10,930		10,090
	20	Tax-exempt bond liabilities			20	
<u>je</u> s	21	Escrow or custodial account liability Complete Part IV of Schedu			21	
Liabiliti	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified	I			
<u>.</u>		persons Complete Part II of Schedule L			22	
_	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part X D	ofSchedule		25	
	26	Total liabilities. Add lines 17 through 25		11,563	26	24,683
s o		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗸 a lines 27 through 29, and lines 33 and 34.		·		<u> </u>
anc S	27	Unrestricted net assets		702,743	27	837,488
<u> </u>	28	Temporarily restricted net assets		28	<u> </u>	
_	29	Permanently restricted net assets		29		
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	► and			
	30	Capital stock or trust principal, or current funds			30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund.			31	
Assets	32	Retained earnings, endowment, accumulated income, or other fund			32	<u>'</u>
	33	Total net assets or fund balances		702,743	33	837,488
₹	34	Total liabilities and net assets/fund balances		714,306		862,171
		i otal habilities and het assets/juliu balalites	· · ·	/ 14,306	34	orm 990 (2013)

. •					uge ==
Par	Reconcilliation of Net Assets Check If Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6	527,457
2	Total expenses (must equal Part IX, column (A), line 25)	2			192,712
3	Revenue less expenses Subtract line 2 from line 1	3		1	.34,745
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7	02,743
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			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		8	337,488
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

DLN: 93493225001454

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

▶ 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

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

Na	me of the organization	ations complete rare in		Employer ide	ntification number
Nev	w Jersey Asphalt Pavement Assoc			21-0666754	1
Par	t I-A Complete if the orga	nization is exempt und	er section 501		
1	Provide a description of the organ	nization's direct and indirect p	olitical campaign ac	ctivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				0
Dar	t I-B Complete if the orga	nization is exempt und	er section 501	(c)(3)	
1	Enter the amount of any excise ta				
2	Enter the amount of any excise to	•			\$
3	If the organization incurred a sec	· -	_		⊤ Tes
4a	Was a correction made?	,	,		┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the orga	nization is exempt und	er section 501	(c), except section 5	01(c)(3).
1	Enter the amount directly expend	ed by the filing organization fo	r section 527 exem	npt function activities 🕨	\$
2	Enter the amount of the filing organized exempt function activities	anızatıon's funds contributed t	o other organization	ns for section 527 ▶	\$7,200
3	Total exempt function expenditur	es Add lines 1 and 2 Enter h	ere and on Form 11	20-POL, line 17b	\$ 7,200
4	Did the filing organization file For	m 1120-POL for this year?			▼ Yes
5	Enter the names, addresses and organization made payments. For amount of political contributions is separate segregated fund or a political contribution.	each organization listed, ente received that were promptly a	er the amount paid find the second find directly delivered	rom the filing organization's d to a separate political org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)	NJ ASPHALT PAVEMENT ASSOCIATION PAC	500 HORIZON CENTER DRIVE SUITE 520 HAMILTON,NJ 08691	90-0047083	7,200	0

Sch	hedule C (Form 990 or 990-EZ) 2013					Page 2
P	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		List in Dank IV as			a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		ol" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
		1.6				
_	Grassroots nontaxable amount (enter 25% of lir	•				
	Subtract line 1g from line 1a If zero or less, ent			_		1
	Subtract line 1f from line 1c If zero or less, ente			L		1
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thre	have to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	IOT			
For or	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(6	a)	(l)
activi		Yes	No	Amo	ount
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 Volunteers?				
a b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	EIII-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)(5), c	or sect	ion
				Υe	s No
1	Were substantially all (90% or more) dues received nondeductible by members?		Г	1	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	No
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			309,63
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).				15.10
a	Current year	2a			15,18
b	Carryover from last year	2b			-78,61
c	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2c 3			-63,43 30,96
3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess				30,90
7	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			-94,39
Pa	rt IV Supplemental Information				
	vide the descriptions required for Part l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou t II-B, line 1 Also, complete this part for any additional information	p list),	Part II	-A , line	2, and
	Return Reference Explanation				
Part	I-A, Line 1 THE ORGANIZATION DONATED FUNDS TO THE NEW JERSEY ASPH. ASSOCIATION POLITICAL ACTION COMMITTEE	ALT PA	AVEME	NT	

201104410 0 (101111 330 01 330 12) 2013	i age -i	
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	
l ————————————————————————————————————		

Schedule D (Form 990) 2013

DLN: 93493225001454

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) Open to Public

al Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspect	ion	
ame of the orga w Jersey Asphalt P			Emp	oloyer identifica	tion numbe	r	
:w тегѕеу Аѕрпан Р	avenient Assoc		21-	0666754			
	nizations Maintaining Donor Adv		unds	or Accounts	. Complet	e ıf	the
organ	nization answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds		(b) Funds and	other secon	nto	
Total number	at end of year	(a) Donor advised funds		(b) Fullus allu	other accou	111.5	
	ntributions to (during year)						
55 5	ants from (during year)						
	lue at end of year						
	nization inform all donors and donor adviso	rs in writing that the assets held in do	nor adv	ısed			
	organization's property, subject to the or				☐ Yes	Γ	No
	nization inform all grantees, donors, and d						
	charitable purposes and not for the benef permissible private benefit?	it of the donor or donor advisor, or for	any othe	er purpose	┌ Yes	Г	No
	ervation Easements. Complete if	the organization answered "Yes"	to Forr	n 990, Part I\	/, line 7.		
	f conservation easements held by the org			,	,		
	tion of land for public use (e g , recreation		ın hıstor	cally important	land area		
☐ Protection	n of natural habitat	Preservation of a	certifie	d historic struc	ture		
☐ Preservat	tion of open space						
	es 2a through 2d if the organization held a	qualified conservation contribution in	the form	n of a conserva	tion		
easement on	the last day of the tax year			Held at the	End of the	Vos	
Total number	of conservation easements		2a	rieid at the	Lila of the	1 60	<u>. </u>
	e restricted by conservation easements		2b				
_	nservation easements on a certified histo	oric structure included in (a)	2c				
Number of co	nservation easements included in (c) acq	uired after 8/17/06, and not on a					
	ture listed in the National Register		2d				
	nservation easements modified, transferr	ed, released, extinguished, or termina	ted by th	ne organization	during		
the tax year l	-						
Number of st	ates where property subject to conservat	on easement is located ►					
	anization have a written policy regarding t of the conservation easements it holds?	he periodic monitoring, inspection, ha	ndling of	f violations, and	┌ Yes	Г	No
Staff and volu	unteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ements	during the year			
A mount of ex	penses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	g the year			
► \$							
	onservation easement reported on line 2(o 170(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı)	┌ Yes	Γ	No
balance shee	describe how the organization reports con it, and include, if applicable, the text of the iion's accounting for conservation easeme	e footnote to the organization's financi					
	nizations Maintaining Collection plete if the organization answered "Y		, or Ot	her Similar	Assets.		
works of art,	ration elected, as permitted under SFAS 1 historical treasures, or other similar asse ide, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in furthera			
If the organiz works of art,	ration elected, as permitted under SFAS 1 historical treasures, or other similar asse ide the following amounts relating to thes	16 (ASC 958), to report in its revenue ts held for public exhibition, education	e statem	nent and balanc		IC	
(i) Revenues	included in Form 990, Part VIII, line 1			► \$			
(ii) Assets in	icluded in Form 990, Part X			► \$		_	
If the organiz	ration received or held works of art, histor bunts required to be reported under SFAS	•		ncial gain, provi	de the		
Revenues inc	cluded in Form 990, Part VIII, line 1			▶ \$			
	ded in Form 990, Part X						
Journal Include	, oiiii > > 0 , 1 wit A			· · ·			_

Раг	TITL Organizations Maintaining Co	Hections of Art,	, HIS	TOF	cai i	<u>reasur</u>	es, or Ot	:ner	Similar Ass	ets (c	<u>ontinuea)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other record	ds, ch	neck _	·		_		significant use	of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progra	ams			
b	Scholarly research		е	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	illections and explai	ın hov	w the	y furth	er the or	ganızatıon'	sexe	empt purpose ır	1	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part o	of the	organ	ızatıon's	collection	?	Г	Yes	┌ No
Pai	Part IV, line 9, or reported an an						answered	l "Y∈	es" to Form 99	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary	ford	ontribi	utions or	other asse	ets n		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing	able						
							_	_	Am	ount	
С	Beginning balance						<u> </u>	1c			
d	Additions during the year						<u> </u> :	1d			
е	Distributions during the year						<u> </u> :	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?)					Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expl	anatı	on has	been pro	ovided in P	art X	III		Γ
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b)) Prior	year	b (c)Two	o years back	(d) ⊤	hree years back	(e) Four y	ears back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	ne 1g	, colun	nn (a)) he	eld as				
а	Board designated or quasi-endowment ►										
b	Permanent endowment ►										
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posses	ssion of the organiza	ation	that	are hel	d and ad	mınıstered	for t	he		
	organization by									Yes	No
	(i) unrelated organizations							•	3a(i		<u> </u>
b	(ii) related organizations								3a(i		<u> </u>
4	Describe in Part XIII the intended uses of th	•						•	30		1
	t VI Land, Buildings, and Equipme					n answe	ered 'Yes'	to F	orm 990. Pai	rt IV. li	ne
	11a. See Form 990, Part X, line :			. 9			0.00		550, 1 4.		
	Description of property					or other estment)	(b)Cost or o basis (other		(c) Accumulated depreciation	(d) i	Book value
1a	Land			\top							
	Buildings										
	Leasehold improvements										
	Equipment						9	,667	4,5	76	5,091
e	Other								·		
	II. Add lines 1a through 1e <i>(Column (d) must e</i>			ımn (B), line	10(c).)					5,091
		· · · · · · · · · · · · · · · · · · ·		•					Schedule D	(Form 9	

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

Par		levenue per Audited Financial Stat wered 'Yes' to Form 990, Part IV, line 1		its With	Revenue p	er Re	eturn Complete if
1		er support per audited financial statements				1	645,424
2	Amounts included on line 1 bi	ut not on Form 990, Part VIII, line 12					
а	Net unrealized gains on inves	tments	2a				
b	Donated services and use of f	facilities	2b				
С			2c				
d)	2d				
e	Add lines 2a through 2d	·	<u> </u>			2e	0
3	Subtract line 2e from line 1 .					3	645,424
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1					· ·
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII))	4b		-17,967		
С	Add lines 4a and 4b					4c	-17,967
5	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line	12)			5	627,457
Part		xpenses per Audited Financial Sta		nts With	Expenses	per	Return. Complete
		nswered 'Yes' to Form 990, Part IV, line					
1		r audited financial statements				1	510,679
2		ut not on Form 990, Part IX, line 25	ı	ı			
а		acılıtıes	2a			_	
Ь			2b			_	
С	Other losses		2c			_	
d	Other (Describe in Part XIII)		2d		17,967	_	
е	Add lines 2a through 2d					2e	17,967
3						3	492,712
4		0, Part IX, line 25, but not on line 1:					
а	Investment expenses not incl	luded on Form 990, Part VIII, line 7b	4a				
b	`		4b			_	
C						4c	0
5		nd 4c. (This must equal Form 990, Part I, lin	e 18)			5	492,712
	XIII Supplemental In						
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and					e any additional
	Return Reference	Explanation					
Part X	, Line 2	The Association's federal exempt returns a	are sub	nect to exa	mination by t	the IRS	
. 2127	,	years after they were filed. The statute of li Association believes that all required return Association would recognize interest accruand penalties in operating expenses. The Aland penalties accrued at December 31, 20	mitations ns hav ied rela	ons does no e been fileo ited to unre ition has no	ot apply to und In the ever ecognized tax ot recognized	nfiled re nt it wo k benef	eturns The uld be required, the its in interest expense
	I, Line 4b - Other tments	Fundraising event expenses -17,967					
	II, Line 2d - Other tments	Fundraising event expenses 17,967					

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

DLN: 93493225001454

SCHEDULE G (Form 990 or 990-EZ) **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

ame of the organization ew Jersey Asphalt Pavement A	SSOC				Employer idei	ntification number
					21-0666754	
Part I Fundraising Act Form 990-EZ filers					to Form 990, Part IV	, line 17.
Indicate whether the organ	ızatıon raısed funds	through ar	y of the f	following activities Ch	eck all that apply	
a Mail solicitations			е	Solicitation of nor	n-government grants	
b Internet and email soli	cıtatıons		f	Solicitation of gov	vernment grants	
c Phone solicitations			g	Special fundraisir	ng events	
d In-person solicitations						
Did the organization have a or key employees listed in						Г _{Yes} Г
b If "Yes," list the ten highes to be compensated at least			undraise	rs) pursuant to agreem	ents under which the fu	ndraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		103	140			
-						
-						
			<u> </u>			
S List all states in which the	organization is regis	tered or lic	ensed to	solicit contributions o	r has been notified it is	exempt from
registration or licensing						

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi			
			(a) Event #1 HOLIDAY LUNCHEON (event type)	(b) Event #2 SKEET SHOOT (event type)	(c) O ther events (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	36,510	5,550)	42,060
Revenue	2	Less Contributions	22,343	1,750)	24,093
<u>~</u>	3	Gross income (line 1 minus line 2)	14,167	3,800		17,967
	4	Cash prizes				
မာ	5	Noncash prizes	1,011			1,011
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .	8,881			8,881
Direct	8	Entertainment	1,500	3,800)	5,300
ā	9	Other direct expenses .	2,775			2,775
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(17,967)
	11	Net income summary Subtract li	ne 10 from line 3, column	(d)		0
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		Cash prizes				
Expenses		Non-cash prizes				
		Rent/facility costs				
Direct						
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes	☐ Yes	☐ Yes	
	7	Direct expense summary Add line	s 2 through 5 in column (d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, co	lumn (d)		
9 a	Ist	er the state(s) in which the organization licensed to operate	gaming activities in each	n of these states?		「Yes 「No
b	11	No," explain				
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspen	ded or terminated during	the tax year?	

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	T Employee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	⁄ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u> </u>	<u> </u>		rm 990 or 990-	7) 2012

Schedule I

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

New Jersey Asphalt Pavement Assoc

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

► Attach to Form 990

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

OMB No 1545-0047

2013

DLN: 93493225001454

Open to Public Inspection

Employer identification number

21-0666754

Part I General Inform	nation on Grants	and Assistance					
 Does the organization ma the selection criteria used Describe in Part IV the or 	d to award the grants	orassistance?					▼ Yes
		Governments and recipient that receive					l "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NATIONAL ASPHALT PAVEMENT ASSOCIATION 5100 FORBES BOULEVARD SUITE 200 LANHAM, MD 207064413	53-0231196	501(C)(6)	18,400				TO SUPPORT RESEARCH AND MARKETING PROGRAMS AT A NATIONAL LEVEL
2 Enter total number of sect3 Enter total number of other							1

Schedule I	(Form 990) 2013		
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, F	Part IV, line 2	22
	Part III can be duplicated if additional space is needed.		

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Scholarships	11	12,500			
Part IV Supplemental Inform	nation. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.
Detum Deference					

Return Reference	Explanation
,	The use of grant funds given to the National Asphalt Pavement Association is monitored through regular updates from the programs supported - Asphalt Pavement Alliance(APA) and Pavement Economic Fund(PEC). These updates are provided at meetings and during conference calls. The Executive Director and the Technical Director are actively involved on committees within APA and PEC. Scholarship assistance to individuals is monitored through the requirement of those individuals to sign a scholarship fund agreement. This agreement requires the individuals to apply the funds soley to costs incurred in connection with matriculation at the educational institution stated in their application. Permissible costs are defined as tuition, room and board, the purchase or rental of books and supplies, and student fees.

DLN: 93493225001454

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization New Jersey Asphalt Pavement Assoc **Employer identification number**

21-0666754

					3) and section 0, Part IV, line 2								
1 (a) Nam	1 (a) Name of disqualified pe		1 ' '	nship betweer	' '	(c) Description of transaction					(d) Corrected?		
			pers	on and organi	zation						Yes	No	
2 Enter the 4958 .	amount of ta	x incurred b	y organization	_	disqualified pers	_		r undei	rsection	n			
3 Enter the	amount of ta	ıx, ıf any, on	line 2, above,	reimbursed by	y the organizatio	n			> \$				
			m Intereste										
					990-EZ, Part V,	line 38a, or	Form 9	90, Pa	art IV , li	ne 26,	or if the		
(a) Name of	(b)	(c)			(e)Original	(f) Balance	(g) In		(h)		(i)Wri	tten	
interested	Relations				principal	due	defaul		A pprov	ed .	agreem		
person	with	loar	organizat	on?	amount		by board or						
	organizat	ion											
]				commi	ttee?			
			То	From			Yes	No	Yes	No	Yes	No	
										<u> </u>	_		
	+				1 1					-	_		
				-	+					-	_		
					++						_		
					+ +						_		
otal	1		 \$										
Part IIII Gr			Benefitting				-						
Co	mplete ıf t	he organiza	ation answer	<u>ed "Yes" on</u>	Form 990, Pa	rt IV, line 2	27.						
(a) Name of i		interested	onship betweei person and th anization		nt of assistance	(d) Type	ofass	ıstanc	e (e) Purpo:	se of ass	ıstance	
1) ERIN GUST	Υ	DAUGHTER			1.000	SCHOLAR	SHIP		ED	UCATIO	DNAL		
,		SCHOLARS			, , , , ,					SISTAN			
		 	E MEMBER										
2) RACHEL JO	HNSON	DAUGHTEF SCHOLARS		1,000 SCHOLARSHIP			UCATIO SISTAN						
										313 I A N	ICL		
		ICOMMITTE	E MEMBER	1) SCHOLARSHIP			DUCATIONAL SSISTANCE				
3) THOMAS LA	AUDONE	†	ARD MEMBER	₹	1,000	SCHOLAR	SHIP						
3) THOMAS LA		SON OF BO	ARD MEMBEI	₹		SCHOLAR SCHOLAR			AS ED	SISTAN UCATIO	ICE DNAL		
		SON OF BO	ARD MEMBEI	3					AS ED	SISTAN	ICE DNAL		
4) CHRISTOPI		SON OF BO	ARD MEMBEI	2					AS ED	SISTAN UCATIO	ICE DNAL		

Part IV Business Transactions II	nvolving Interested	i Persons.			
Complete if the organization	<u>n answered "Yes" on F</u>	<u>Form 990, Part IV, lın</u>	e 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	: zatıon's
				Yes	No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Schedule L (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493225001454

OMB No 1545-0047

2013

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization New Jersey Asphalt Pavement Assoc Employer identification number

21-0666754

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, line 3	The Organization has delegated control over management duties to Leading Edge Government Relations Leading Edge provided finance and administration, membership recruitment and retention, communications and publications, media, public and industry relations, and government relations. The Organization's Executive Director, Kevin Monoco, is employed and compensated by Leading Edge Government Relations. During 2013, the Organization paid \$58,000 to Leading Edge for its' management services.
Form 990, Part VI, Section A, line 6	All classes of membership either elect or appoint representatives to the board of directors
Form 990, Part VI, Section A, line 7a	Membership in the association falls into 5 categories as follows. Hot Mix Asphalt Producers, Hot Mix Asphalt Producers. Contractors, Installation Contractors, Asphalt Cement Suppliers, and Associate members. The HMA producers appoint one person from their organization to represent them on the board. HMA producers with seven or more plants have the option of two voting members on the board if they so choose. All members in the installation and associate member categories vote for their categories representative(s) on the board. The asphalt cement suppliers board representative is decided on an alphabetical, annual rotating basis.
Form 990, Part VI, Section B, line 11	Prior to filing, Form 990 is emailed to board members for review, requesting their comments, questions and approval
Form 990, Part VI, Section B, line 12c	The Organization regularly and consistently monitors and enforces its' conflict of interest policy by requiring all covered persons to promptly and fully disclose all material facts of every actual or potential conflict of interest (1)existing at the time he/she becomes a covered person (2) that arises while he/she is a covered person, at the time such actual or potential conflicts arises, and (3) annually through the annual conflict of interest questionaire
Form 990, Part VI, Section B, line 15	The Organization does not compensate the executive director directly, instead he is compensated from the management company, Leading Edge Government Relations Therefore there is no process for determining the compensation of the Executive Director
Form 990, Part VI, Section C, line 19	The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request
form 990, Part XI, line 2c	The process of overseeing the audit and selecting the independent accountant has not changed during the year

DLN: 93493225001454

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Name of the organization New Jersey Asphalt Pavement Assoc **Employer identification number**

21-0666754

restriction of Disregarded Entitles Complete if the organization answered Tes on Form 990, Fart IV, line 33.						
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
			*			

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state	(d) Exempt Code section	(e) Public charity status	(f) Direct controlling	Section	512(b)
		or foreign country)		(if section 501(c)(3))	entity	(13) co	ntrollea ity?
						Yes	No
(1) CONSTRUCTION INDUSTRY ADVANCED PROGRAM OF NJ	PROMOTE THE NJ CONSTRUCTION INDUSTRY	NJ	501 (c) (6)				No
91 FIELDCREST AVENUE RARITAN PLAZA	CONSTRUCTION INDUSTRY				N/A		
EDISON, NJ 08837 22-2164550							
(2) NEW JERSEY ASPHALT PAVEMENT ASSOC POLITICAL ACTION COMMITTEE	TO ADVANCE AND ASSIST THE ASPHALT INDUSTRY IN THE	NJ	527				No
500 HORIZON CENTER DRIVE SUITE 520	STATE OF NEW JERSEY				N/A		
HAMILTON, NJ 08691 90-0047083							
For Denominal Reduction Act Notice and the Instructions for Forms 600		C-+ N- F012F	- \/		Cabadula D /Farms		~4~

(a) Name, address, and EIN of related organization		(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentag ownersh
					J14)			Yes	No	1	Yes	No	
V Identification of Related Org								swere	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of to	total Share	(g) e of end -year ssets		(h) ercentage ownership	Section (b) cont	i) on 512 (13) rolled tity?	!
						<u> </u>			_		Yes		No
									_				+

N	ote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No					
1 Duri	ng the tax year, did the orgranization engage in any of the following transactions with one or more re	elated organizations li	sted in Parts II-IV?				,					
a R	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity											
b G	ıft, grant, or capıtal contribution to related organization(s)				1b	Yes						
c G	ıft, grant, or capıtal contribution from related organization(s)				1c	Yes						
d L	oans or loan guarantees to or for related organization(s)				1d		No					
e L	pans or loan guarantees by related organization(s)				1e		No					
f D	ıvıdends from related organization(s)				1f		No					
g S	ale of assets to related organization(s)				1g		No					
h P	urchase of assets from related organization(s)				1h		No					
i E	change of assets with related organization(s)				1i		No					
j Le	ease of facilities, equipment, or other assets to related organization(s)				1j		No					
k Lease of facilities, equipment, or other assets from related organization(s)												
l Performance of services or membership or fundraising solicitations for related organization(s)												
m Performance of services or membership or fundraising solicitations by related organization(s)												
n Sł	aring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes						
o S	haring of paid employees with related organization(s)				10	Yes						
p R	eımbursement paıd to related organızatıon(s) for expenses				1 p		No					
q R	eımbursement paıd by related organızatıon(s) for expenses				1q		No					
r 0	ther transfer of cash or property to related organization(s)				1r		No					
s 0	ther transfer of cash or property from related organization(s)				1 s		No					
2 11	the answer to any of the above is "Yes," see the instructions for information on who must complete	-										
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved						
		1										

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

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships (a) (b) Name, address, and EIN of entity (c) Primary activity Legal Predominant Are all partners Share of Share of Disproprtionate Code VPUBI General or Percentage																	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?						(f) (g) Share of total end-of-asse	I end-of-year		(h) Disproprtionate allocations?		(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No					
]					
												\Box					
	•																

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013