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# 990

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

For the 2013 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable New Jersey State Policmen's Benevolent Association Doing Business As Address change Number and street (or PO box if mail is not delivered to street address) Room/suite 22-1553972 Name change 158 Main Street E Telephone number Initial return ZIP code City or town State 732-636-8860 Woodbridge 07095 Terminated Foreign country name Foreign province/state/county Foreign postal code Amended return G Gross receipts \$ 13,772,531 F Name and address of principal officer Application pending Yes X No H(a) Is this a group return for subordinates? Anthony Wieners 158 Main St, Woodbridge, NJ 07095 H(b) Are all subordinates included? If "No," attach a list (see instructions) Tax-exempt status 501(c)(3) X 501(c) ( ) **(**insert no ) 4947(a)(1) or J Website: ▶ www njspba com H(c) Group exemption number ▶ X Corporation K Form of organization Trust Association Other ▶ L Year of formation 1905 M State of legal domicile NJ Part I Summarv Briefly describe the organization's mission or most significant activities Promote, advance and improve financially Activities & Governance and otherwise, the welfare, condition and other interests of police and law enforcement officers through out the state of New Jersey Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 34 Number of independent voting members of the governing body (Part VI, line 1b) 4 31 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 15 Total number of volunteers (estimate if necessary) 6 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** Contributions and grants (Part VIII, line 1h) 116,101 Revenue 9 Program service revenue (Part VIII, line 2g) 4,204,583 4,175,902 Investment income (Part VIII, column (A), lines 3, 4, and 7d) REC 10 464,552 731,190 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c/ 10c, and 11e) 11 2,879,513 2,965,862 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), the 12 12 7,548,648 7,989,055 13 Grants and similar amounts paid (Part IX, column (A), line (1)-3) 14 Benefits paid to or for members (Part IX, column (A), line 453 2,992,786 2,421,421 15 Salaries, other compensation, employee benefits (Part IX, column (A) Times 1,319,327 1.345.408 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,672,023 2.849,656 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 6,984,136 6,616,485 19 Revenue less expenses Subtract line 18 from line 12 564,512 1,372,570 Beginning of Current Year **End of Year** Total assets (Part X, line 16) 25,747,442 27,284,420 Total liabilities (Part X, line 26) 11,808,259 11.870.360 Net assets or fund balances Subtract line 21 from line 20 13,939,183 15.414.060 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signaturé Here 10-Type or print name and title Print/Type preparer's name Date Preparer's signatur Paid **Edward Noble Edward Noble** 6/9/2014 self-employed P00998177 Preparer ► Reed & Associates CPAs Firm's name Firm's EIN > 20-1983682 **Use Only** Firm's address > 127 US Highway 206 Suite 19C, Hamilton, NJ 08610 609-585-7501 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

	90 (2013)	New Jersey State Policmen's Benevolent Association	22-1553972	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly	describe the organization's mission		
		a of police and law enforcement officers through and the state of New Joseph		
2	Did the	organization undertake any significant program services during the year which were not listed on		
	•	r Form 990 or 990-EZ? ' describe these new services on Schedule O	Yes	X No
3	Did the service	organization cease conducting, or make significant changes in how it conducts, any program s?	Yes	X No
		' describe these changes on Schedule O		
4	expens	the the organization's program service accomplishments for each of its three largest program service es. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all expenses, and revenue, if any, for each program service reported.		
4a	interest	) (Expenses \$ 4,645,080 including grants of \$ ) (Rever e, advance and improve financially and otherwise, the welfare, condition and other is of police and law enforcement officers through out New Jersey		
4b		) (Expenses \$ including grants of \$ ) (Rever		
4c	(Code	) (Expenses \$ including grants of \$) (Rever	nue \$	)
			·	
			•	••
			•	
				••
				•••••
4d	Other p	rogram services (Describe in Schedule O )		
	(Expen	ses \$ 0 including grants of \$ 0 ) (Revenue \$	0)	
4e	Total pr	ogram service expenses   4,645,080		

			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		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	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		
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		Χ
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			
40	negotiation services? If "Yes," complete Schedule D, Part IV	9		X
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	4.0		v
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		X
• •	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	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	11b	Х	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		X
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		Χ.
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	12a	Х	
U	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	126		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		- <u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1		
	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			
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		v
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		X
• •	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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Χ
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	I	

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Part IV	Checklist of Req	uirea 5	cneaules	(continuea)

powernment on Part IX. column (A), line 1.7 II "Yes" complete Schedule I, Parts I and II 21			_	Tes	NO
22 Did the organization report more than \$5,000 of grains or other assistance to individuals in the United States on Part IX. Column (A), line 27 If "es" complete Schedule L, Part I and III 22 I x 2	21				
on Part IX. Column (A), line 2? If "Yes," complete Schedule I, Parts I and III 2 Did the organization as very "Yes" to Part IV. Section A. In a 3. 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X Did the organization have at 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 II. If "IN", gr to Inte 25a	22		21		<u> </u>
33 but the organization answer "Yes" to Part VII, Section A, line 3.4, or 5 about compensation of the organizations current and former officers, directors, trustees, key employees, and highest compensated employees?" If "Yes," complete Schedule I.  35 100,000 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 24b through 24d and complete Schedule K. If "No," go to line 25a 24b through 24d and complete Schedule K. If "No," go to line 25a 24b through 24d and complete Schedule K. If "No," go to line 25a 24b through 24d and complete Schedule K. If "No," go to line 25a 24b through 24d and complete Schedule K. If "No," go to line 25a 24b through 24d and complete Schedule K. If "No," go to line 25a 24b through 24d and complete Schedule K. If "No," go to line 25a 24b through 24d and complete Schedule K. If "No," go to line 25a 24b through 24d and complete Schedule K. If "No," go to line 25a 24c through 24d and complete Schedule K. If "No," go to line 25a 24d the organization aware that the process of an excess benefit transaction with a disqualified person and a sa in "on behalf of issuer for bonds outstanding at any time during the year? 24c through 24d and complete Schedule L. Part II through 24d the organization aware that the transaction with an excess benefit transaction with a disqualified person in a prore year, and that the transaction has not been reported on any of the organization promote promote Schedule L. Part II through 25b through 24d the transaction with an excess benefit transaction with a disqualified person in a prore year, and that the transaction has not been reported on any of the organization in promote Schedule L. Part II through 25b through 25a through 25b through 25a throu	~ ~	- · · · · · · · · · · · · · · · · · · ·	22		x
amployees? If "Yes," complete Schedule J 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  25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  27d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  28d Section 501(c)(3) and 501(c)(4) organizations. Did the organization 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 pror Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I    28d Did the organization and 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, or disqualified persons? If so, complete Schedule L, Part II    27d 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 a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV    28d Vas the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV    28d A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule K    28d A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule K    28d A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule K    28d Did the org	23			<u> </u>	
24a Dut the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," amount of more than 24b through 24d and complete Schedule K. If "No," go to Jine 25a.  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  C Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24d		· · · · · · · · · · · · · · · · · · ·			
s100.000 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 "Mo," go to the 25a 24b through 24d and complete Schedule K. if "Mo," go to the 25a 24b through 24d and complete Schedule K. if "Mo," go to the 25a 24b through 24d and complete Schedule K. part II 24b X. 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any fax-exempt bonds? 24d X. 24d X. 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization gain an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I 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-E27 if "Yes," complete Schedule L. Part II b 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, inghest compensated employees, or disqualified persons? If so, complete Schedule L. Part II b Did the organization provide a grant or other assistance to an officer, director, trustee, ley employee.  25b 27 b Did the organization provide a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV A mainty of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV A mainty of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule R. Part V. In A mainty member of a current or former officer, director, trustee, or key emp			23	X	<u> </u>
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b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d X  24d X  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  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 prior Forms 990 or good and the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or good and the transaction and prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or good and the prior of the search of the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If so, complete Schedule L, Part II  Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV  a National to former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  B the organization receive more than \$25,000 in non-cash c					
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d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  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  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-E2? If "Yes," complete Schedule L, Part I  25b 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  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  28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV  29 A family member of a current of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I, Part IV  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II, Part IV  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II, Part IV  29 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  29 If "Yes," complete Schedule II, Part II, III, or IV, and Part V, line 1.  30 Did th	·		24c		x
with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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  25b  25c  35c  35c  35c  35c  35c  35c  35c	d				
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I.  25b Id 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	25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
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			25a		
990-E27 If "Yes," complete Schedule L, Part I.  25b   27c   16 "Yes," complete Schedule L, Part I.  26c   27c   27c   16 "Yes," complete Schedule L, Part I.  27c   28c   27c	b		Ì		
Dut 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 X  26 X  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV at Ivinitructions for applicable filing thresholds, conditions, and exceptions)  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X  A nentity 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 X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization iquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 X  31 Did the organization iquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X  32 A Was the organization elacted to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, III or 1.  33 A X  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? "Yes," complete Schedule R, Part II, III, or IV, and Part V, III or 1.  35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chanitable related organization? If "Yes,					
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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part  VI  37 X  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 X			36		
VI 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 X	37				
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 X					
19? Note. All Form 990 filers are required to complete Schedule O	26		37		<u> </u>
	<b>J</b> 0	· · · · · · · · · · · · · · · · · · ·	38	y	
			_		(2013)

New Jersey State Policmen's Benevolent Association

Statements Regarding Other IRS Filings and Tax Compliance Part V

	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1a 1	142			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable .				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable				
	gaming (gambling) winnings to prize winners? .	<u> </u>	1c		L.
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return  2a	15		-	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_	2b		
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	_			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	L	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	-	3b		—
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority				ĺ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		_		
	account)? .	-	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	İ	_	-	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	-	5b		X
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.	F	5c		
oa	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?				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	-	6a		X
J	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	⊢	מס		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods				
_	and services provided to the payor? .	j	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	┢			
	required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
	organization, have excess business holdings at any time during the year?	L	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.	].		-	
а	Did the organization make any taxable distributions under section 4966?	L	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	L	9b		
10	Section 501(c)(7) organizations. Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12				
b 44	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  [10b]				
11	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders	-			
a b	Gross income from members or shareholders		}		
U	against amounts due or received from them )				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	$\dashv$ .	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	⊢	IZa		<b></b>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	_			
а	Is the organization licensed to issue qualified health plans in more than one state?	-	13a		$\vdash$
_	Note. See the instructions for additional information the organization must report on Schedule O	┝	. 50		$\vdash$
b	Enter the amount of reserves the organization is required to maintain by the states in which				1
	the organization is licensed to issue qualified health plans				1
С	Enter the amount of reserves on hand	$\neg$			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	┤.	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		

Form 990 (2013) Part VI

New Jersey State Policmen's Benevolent Association

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

Sect	ion 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	<b>1a</b> 34	, Éx						
	If there are material differences in voting rights among members of the governing body, or			tc ,					
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O								
b									
2									
	any other officer, director, trustee, or key employee?								
3	Did the organization delegate control over management duties customarily performed by or under	the direct			X				
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w.	·	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's a		5		X				
6	Did the organization have members or stockholders?		6	X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint							
	one or more members of the governing body?	appot	7a	х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	1	<u>                                     </u>						
~	stockholders, or persons other than the governing body?	,	7b	х					
8	Did the organization contemporaneously document the meetings held or written actions undertake	n durina		<u> </u>	<del></del>				
·	the year by the following	ir during	**************************************						
а	The governing body?		8a	X	····· }				
b	Each committee with authority to act on behalf of the governing body?		8b	x	<del></del>				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	eached	55						
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	Saci ica	9		×				
Sect	ion B. Policies (This Section B requests information about policies not required by the	Internal Revenue		<u>                                     </u>					
	ten 21. The testion Broqueste information about penales not required by the	memai revenue (	<u> </u>	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?		10a	Х					
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 pu		10b	Х					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	Х					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	J	1,1						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	give rise to conflicts?	12b		X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If								
	describe in Schedule O how this was done		12c	X					
13	Did the organization have a written whistleblower policy?		13	Х					
14	Did the organization have a written document retention and destruction policy?		14	Х					
15	Did the process for determining compensation of the following persons include a review and appro	val by	,		,				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation		343						
а	The organization's CEO, Executive Director, or top management official		15a	Х					
b	Other officers or key employees of the organization		15b	Х					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	ement	, , ,						
	with a taxable entity during the year?		16a	<u> </u>	<u>x</u>				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	. X.						
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe	guard	١						
	the organization's exempt status with respect to such arrangements?	<del> </del>	16b						
<u>Sect</u>	ion 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 99	0-T (Section 501(c)(3	)s onl	y)					
	available for public inspection Indicate how you made these available. Check all that apply								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19									
	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								
	organization:   the corporation  158 Main St. Woodbridge NJ 07095	732-636-886	50						
	TOWING ST VVOCODINGE NJ U7095								

Form 990 (2013)	New Jersey State Policmen's Benevolent Association	22-1553972	Page <b>7</b>
	Compensation of Officers, Directors, Trustees, Key Employees, Hig	hest Compensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part	VII	. [7]

Section A.	Officers	. Directors.	. Trustee:	s. Kev	Employees	s. and Highest	Compensated Employees

- **1a** Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	Pos neck ss pe	rson	n oth stell Highest compensated to so the semployee	an	(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
(1) Anthont F Wieners	40 00							-		
Pres	0 00	x		х				75,000		
(2) Keith Dunn	40 00									-
Exec VP	0 00	X		Х				55,000		
(3) Mark Butler	12 00									
1st VP	0 00	Х		Х				3,195		
(4) Michael Pelligrino	40 00									
9th VP	0 00	Х		Х				1,560		
(5) Peter Andreyev	12 00									-
2nd VP	0 00	Х		Х				2,320		
(6) Jerry Tolomeo	12 00									
3rd VP	0 00	Х		Х				1,980		
(7) Walter Haase	12 00									
4th VP	0 00	X		Х				1,520		
(8) Henry Werner	12 00				l					
5th VP	0 00	Х		Х				1,620		
(9) Pat Colligan	12.00									
6th VP	0 00	_		Х	<u> </u>			12,530		
(10) Kenneth Burkert	12 00									
7th VP	0 00	_	<u> </u>	Х	<u> </u>			2,040		
(11) Michael Minni	12.00									
8th VP	0 00	X	lacksquare	Х				1,565		
(12) Domenic Capella	12 00									
10th VP	0.00	Х	<u> </u>	X				2,100		
(13) Mark Aurigemma	12.00		ļ							
11th VP	0.00	_	<u> </u>	X	Ļ			1,840		
(14) Michael Kaniuk	12 00		ł							
12th VP	0 00	Х	L_	Х	L			2,730		

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Position (A) (B) (do not check more than one (D) (E) (F) Average Reportable Name and title box, unless person is both an Reportable Estimated hours per officer and a director/trustee) compensation compensation amount of week (list any from related fmm other Individual trustee Officer employee Highest compensated Institutional trustee Key employee the hours for organizations compensation related organization (W-2/1099-MISC) from the organizations (W-2/1099-MISC) organization below dotted and related organizations line) (15) Wayne Hall 12 00 Financial Secretary 0 00 Х Χ 4,970 (16) George Miller 12 00 Recording Secretary 0 00 Х 3.990 (17) John Monsees 12 00 Х Х Treasurer 0.00 3,350 (18) James Crilly 12 00 Trustee 0 00 Х 1,835 (19) Manuel Corte 12 00 Trustee 0 00 Х 1,870 (20) Marc Kovar 12 00 0 00 Х Trustee 3,370 (21) Keith Bennett 12 00 Trustee 0 00 Х 2,445 (22) Mark Messinger 12 00 0 00 l Trustee Х 3.220 (23) Eugene Dello 12 00 Trustee 0 00 1,630 (24) Richard Kott 12 00 Trustee 0 00 l 1,125 (25) Luke Sciallo 12 00 Sergeants at Arms 0 00 l 915 1b Sub-total 193,720 0 0 Total from continuation sheets to Part VII, Section A ▶ 168,092 0 0 Total (add lines 1b and 1c) ٥ 361,812 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No

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

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

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

3	,* ``	X
	33 V	,
4	ά, Χ	
	**	
5		<u> </u>

#### **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address	(B) Description of services	(C) Compensation
Mets Schiro McGovern	555 US Rt 1 South, Iselin, NJ 08830	Legal services to LPP memb	131,654
Sciarra & Catrambone	1130 Clifton Ave, Clifton, NJ 07013	Legal services to LPP member	
Alterman & Associates	800 Kings Highway Suite 301, Cherry Hill, NJ 08034	Legal services to LPP memb	364,744
Patrick Toscano Jr	80 Bloomfield Ave, Caldwell, NJ 07006	Legal services to LPP memb	134,000
Zazzalı, Fagella, Kleinbaum et al	1 River Front Plaza, Newark, NJ 07102	Legal services	275,239
2 Total aurahan af malana adam	and the state of t		20.5 3 3 45 A 25 D

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 5

Part VIII Statement of Revenue

Table   Tabl			Check if Schedule O contains	a response or n	ote to any line in	this Part VIII.	• _		
Bar   Federated campaigns   1a		,		- 14 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15 - 15		• •	Related or exempt function	Unrelated business	Revenue excluded from tax under sections
### Description dues   1b   0   0   0   0   0   0   0   0   0		1a	Federated campaigns	1a	0		y / 545 y	The Contract	
Total	age age					4/2	, , , , , , , , , , , , , , , , , , ,	, ` , .	
Total	S a	-	•	<u> </u>	<u>%</u>	* 1		, , , , , , , , ,	,
Total	à A	_	•	<u> </u>	ļ		Sec. State	( ) 選本 "流山	Part of the Art
Total	를 즐	d	<del>-</del>	·	ļ	, 11, 1			, ,
Total	Sim	е		′ <del></del>	<del></del>	´-, .			
Total	utio	f				2			* *
Total	를 등			<del></del>		٠,	•	,	
Total	5 E	g		nes 1a-1f: \$	0		, in . 2 . 3	(2) 5 t	120 5
2a Legal Protection Plan   S25100   3,504,249   3,504,249   b Group Term Life   S25100   79,350   79,350   c PAC Cards   S25100   S92,303   S92,303   c PAC Cards		<u>h</u>	Total. Add lines 1a-1f	<del></del>	. •	116,101			
3   Investment income (including dividends, interest, and other similar amounts)   331,296   331,296	9				Business Code				
3   Investment income (including dividends, interest, and other similar amounts)   331,296   331,296	ē	2a	Legal Protection Plan		525100	3,504,249	3,504,249		
3   Investment income (including dividends, interest, and other similar amounts)   331,296   331,296	å	b	Group Term Life		525100				
3   Investment income (including dividends, interest, and other similar amounts)   331,296   331,296	.2	C	PBA Cards		525100	592,303	592,303	<u></u>	
3   Investment income (including dividends, interest, and other similar amounts)   331,296   331,296	Š	d				0			
3   Investment income (including dividends, interest, and other similar amounts)   331,296   331,296	Ē	е				0			
3   Investment income (including dividends, interest, and other similar amounts)   331,296   331,296	g	f	All other program service revenue	<b>∋</b>		0			
1   3   Investment income (including dividends, interest, and other similar amounts)   331,296   331,296   331,296	ď	g	Total. Add lines 2a-2f.		•	4,175,902	34,	in the second second	~
Other similar amounts		3		dends, interest	and				
A   Income from investment of tax-exempt bond proceeds	Ì				<b>&gt;</b>	331,296	331,296	1	
Form	}	4	Income from investment of tax-ex	empt bond pro	ceeds . ►				
1990   1990	1	5	Royalties			0			
December 2015   December 20			,	(ı) Real	(II) Personal	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Brighton (B	Part Bayer	1
December 2015   December 20		6a	Gross rents			3		Carlotte of	
C   Rental income or (loss)   D   D   D		b				\$1.12 Kg 13.33	斯里特達的音樂	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,
December 2015   December 3	Í		•	C	0				,
Ta   Gross amount from sales of assets other than inventory   To3,106   5,444,475		_			<b>&gt;</b>	0			
assets other than inventory b Less. cost or other basis and sales expenses.  C Gain or (loss)  D Net gain or (loss)  Ba Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18 b Less direct expenses.  C Net income or (loss) from fundraising events. See Part IV, line 19 b Less direct expenses.  C Net income or (loss) from gaming activities. See Part IV, line 19 b Less direct expenses.  C Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances.  b Less: cost of goods sold b Less: cost of goods sold c Net income or (loss) from sales of inventory.  Miscellaneous Revenue  Business Code  11a Membership Dues b Annual, mini conventions, PBA Day, Seminar c Miscellaneous C Total. Add lines 11a-11d  D 2,964,471  D 2,964,471  D 399,894  399,	1			(i) Securities	(ii) Other	164 . 1-1818. A	अ इस्ला र		· · · · · · · · · · · · · · · · · · ·
b Less. cost or other basis and sales expenses. 700,335 5,047,352 c Gain or (loss) 2,771 397,123 d Net gain or (loss) ▶ 399,894 399,894 399,894 399,894 399,894	Ì	٠. ـ		703 106	<del>}</del>				
and sales expenses .		h	•	700,100	0, 111, 470	The state of	Jack William S	of the Control of the Control	37 1
C Gain or (loss)  d Net gain or (loss)  8a Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c).  See Part IV, line 18				700 335	5 047 352				]
Ba Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18		_	•			4 .			
8a Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18		1	• •	2,77	007,120		300 804		<del>[</del> : 1-'
events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18		u	Net gain or (1033)			333,034	333,034		<del> </del>
events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	ø	82	Gross income from fundraising		}	Kr. I sugar	age on a graph	<b>)</b>	
C Net income or (loss) from fundraising events  Gross income from gaming activities.  See Part IV, line 19  a 0  b Less direct expenses b 0  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a 37,180  b Less: cost of goods sold b 35,789  c Net income or (loss) from sales of inventory 1,391  Miscellaneous Revenue Business Code  11a Membership Dues 900099 1,675,466 1,675,466  b Annual, mini conventions, PBA Day, Seminar C Miscellaneous 900099 73,419 73,419  d All other revenue 0 2,964,471	nu	Ųα	•	0				· ·	}
C Net income or (loss) from fundraising events  Gross income from gaming activities.  See Part IV, line 19  a 0  b Less direct expenses b 0  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a 37,180  b Less: cost of goods sold b 35,789  c Net income or (loss) from sales of inventory 1,391  Miscellaneous Revenue Business Code  11a Membership Dues 900099 1,675,466 1,675,466  b Annual, mini conventions, PBA Day, Seminar C Miscellaneous 900099 73,419 73,419  d All other revenue 0 2,964,471	eve.				1	1		l .	1
C Net income or (loss) from fundraising events  Gross income from gaming activities.  See Part IV, line 19  a 0  b Less direct expenses b 0  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a 37,180  b Less: cost of goods sold b 35,789  c Net income or (loss) from sales of inventory 1,391  Miscellaneous Revenue Business Code  11a Membership Dues 900099 1,675,466 1,675,466  b Annual, mini conventions, PBA Day, Seminar C Miscellaneous 900099 73,419 73,419  d All other revenue 0 2,964,471	ř		·	•		1.			1
C Net income or (loss) from fundraising events  Gross income from gaming activities.  See Part IV, line 19  a 0  b Less direct expenses b 0  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a 37,180  b Less: cost of goods sold b 35,789  c Net income or (loss) from sales of inventory 1,391  Miscellaneous Revenue Business Code  11a Membership Dues 900099 1,675,466 1,675,466  b Annual, mini conventions, PBA Day, Seminar C Miscellaneous 900099 73,419 73,419  d All other revenue 0 2,964,471	her					-{			
9a Gross income from gaming activities. See Part IV, line 19 a 0 b Less direct expenses b 0 c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a 37,180 b Less: cost of goods sold b 35,789 c Net income or (loss) from sales of inventory ▶ 1,391 1,391  Miscellaneous Revenue Business Code  11a Membership Dues 900099 1,675,466 1,675,466 b Annual, mini conventions, PBA Day, Seminar c Miscellaneous 900099 73,419 73,419 d All other revenue 0 2,964,471	ŏ				<u>_</u>	d	1	<u></u>	
See Part IV, line 19					· · · · · ·	<del>                                     </del>		<del>                                     </del>	<del> </del>
b Less direct expenses b 0 0 c Net income or (loss) from gaming activities ▶ 0  10a Gross sales of inventory, less returns and allowances a 37,180 b Less: cost of goods sold b 35,789 c Net income or (loss) from sales of inventory ▶ 1,391 1,391  Miscellaneous Revenue Business Code  11a Membership Dues 900099 1,675,466 1,675,466 b Annual, mini conventions, PBA Day, Seminar c Miscellaneous 900099 73,419 73,419 d All other revenue 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Já			1	İ		1	1
c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a 37,180  b Less: cost of goods sold b 35,789  c Net income or (loss) from sales of inventory ▶ 1,391 1,391  Miscellaneous Revenue Business Code  11a Membership Dues 900099 1,675,466 1,675,466  b Annual, mini conventions, PBA Day, Seminar C Miscellaneous 900099 73,419 73,419  d All other revenue 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		_				4	•	· · ·	
10a       Gross sales of inventory, less returns and allowances		1		–		<del> </del>	<del> </del>		
returns and allowances a 37,180 b Less: cost of goods sold b 35,789 c Net income or (loss) from sales of inventory ▶ 1,391  Miscellaneous Revenue Business Code  11a Membership Dues 900099 1,675,466 1,675,466 b Annual, mini conventions, PBA Day, Seminar c Miscellaneous 900099 73,419 73,419 d All other revenue 0 2,964,471  ■ Total. Add lines 11a–11d ▶ 2,964,471	1	ł -		activities	·	\ <u>\</u>	<del></del>	<del> </del>	
b Less: cost of goods sold b 35,789		Jua	<del>-</del>	_	27 100	j	1		1
c Net income or (loss) from sales of inventory       ▶       1,391       1,391         Miscellaneous Revenue       Business Code       1         11a Membership Dues       900099       1,675,466       1,675,466         b Annual, mini conventions, PBA Day, Seminal Conventions       900099       1,215,586       1,215,586         c Miscellaneous       900099       73,419       73,419         d All other revenue       0       2,964,471         e Total. Add lines 11a-11d       2,964,471		١.				<b>-</b>	, ,	1	
Miscellaneous Revenue         Business Code           11a         Membership Dues         900099         1,675,466         1,675,466           b         Annual, mini conventions, PBA Day, Seminar         900099         1,215,586         1,215,586           c         Miscellaneous         900099         73,419         73,419           d         All other revenue         0         2,964,471           e         Total. Add lines 11a-11d         ≥ 2,964,471		)				4	4 204	<del> </del>	
11a       Membership Dues       900099       1,675,466       1,675,466         b       Annual, mini conventions, PBA Day, Seminar       900099       1,215,586       1,215,586         c       Miscellaneous       900099       73,419       73,419         d       All other revenue       0       2,964,471         e       Total. Add lines 11a-11d       2,964,471		<del>  _c</del>		n miventory.	<del></del>	1,391	1,391	<del> </del>	<del> </del>
b Annual, mini conventions, PBA Day, Seminar 900099 1,215,586 1,215,586		1			<del></del>	4 075 400	4 075 400		
c Miscellaneous       900099       73,419       73,419         d All other revenue .       0         e Total. Add lines 11a–11d       ▶ 2,964,471				a. Canta					<del> </del>
d All other revenue		1		ay, seminai				<del></del>	<del> </del>
e Total. Add lines 11a–11d		1			ลดดดลล	/3,419	/3,419	<del>' </del>	<del> </del>
				•		2004 474	<del>' </del>	<del> </del>	<del> </del>
12 Iotal revenue. See Instructions		1 -						<del>}</del>	<del> </del>
F., 000		12	iotal revenue. See instructions		· · · · · · · · · · · · · · · · · · ·	1 7,989,055	1,8/2,954	<u> </u>	

# Part IX Statement of Functional Expenses New Jersey State Policmen's Benevolent Association Part IX

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

	Check if Schedule O contains a response or note to any line in this Part IX .						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to governments and						
	organizations in the United States See Part IV, line 21	0					
2	Grants and other assistance to individuals in the						
	United States See Part IV, line 22 .	0					
3	Grants and other assistance to governments,						
	organizations, and individuals outside the						
	United States See Part IV, lines 15 and 16	0	· · · · · · · · · · · · · · · · · · ·	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `			
4	Benefits paid to or for members	2,421,421	2,421,421				
5	Compensation of current officers, directors,						
_	trustees, and key employees	427,876		427,876	-,		
6	Compensation not included above, to disqualified						
	persons (as defined under section 4958(f)(1)) and						
-	persons described in section 4958(c)(3)(B)	705,000	407.004	577.450			
7	Other salaries and wages	765,263	187,804	577,459			
8	Pension plan accruals and contributions (include	0.404	4 050	7.040			
	section 401(k) and 403(b) employer contributions)	9,464	1,852 26,590	7,612	<del></del>		
9 10	Other employee benefits . Payroll taxes	69,948	<del></del>	43,358			
11	Fees for services (non-employees)	72,857	9,442	63,415			
''a	Management	اها					
b	Legal	233,369	233,369		<del></del>		
	Accounting	51,231	233,309	51,231			
d	Lobbying	67,390	67,390	51,251	<del></del>		
e	Professional fundraising services See Part IV, line 17	07,550	* 07,000	<del>-</del>	<del></del>		
f	Investment management fees	48,830		48,830			
g	Other (If line 11g amount exceeds 10% of line 25, column	10,000		70,000			
9	(A) amount, list line 11g expenses on Schedule O)	140,077	90,000	50,077			
12	Advertising and promotion	0	33,000	00,011			
13	Office expenses	26,608	0	26,608	<del></del>		
14	Information technology .	0		,			
15	Royalties	0					
16	Occupancy	195,971	0	195,971			
17	Travel . ,	97,245	66,558	30,687			
18	Payments of travel or entertainment expenses		- "				
	for any federal, state, or local public officials .	0					
19	Conferences, conventions, and meetings .	1,067,598	1,067,598	0			
20	Interest	0					
21	Payments to affiliates .	0					
22	Depreciation, depletion, and amortization	162,466	0	162,466	0		
23	Insurance	46,748		46,748			
24	Other expenses Itemize expenses not covered				;		
	above (List miscellaneous expenses in line 24e If				1		
	line 24e amount exceeds 10% of line 25, column				•		
_	(A) amount, list line 24e expenses on Schedule O )	144.745		144 745	····		
a	Contributions and Donations Committee Operations, net	144,745 107,044	107,044	144,745			
D O	Other Tayon	22,698	22,698				
d	Miscellaneous	75,232	3,741	71,491			
e	All other expenses	362,404	339,573	22,831			
25	Total functional expenses. Add lines 1 through 24e	6,616,485	4,645,080	1,971,405	0		
26	Joint costs. Complete this line only if the	0,010,700	-7,0-70,000	1,071,100			
	organization reported in column (B) joint costs			ļ			
	from a combined educational campaign and						
	fundraising solicitation Check here						
	following SOP 98-2 (ASC 958-720)						

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			1	
	2	Savings and temporary cash investments	[	2,392,642	2	3,264,586
	3	Pledges and grants receivable, net	0	3	0	
	4	Accounts receivable, net		109,422	4	70,538
	5	Loans and other receivables from current and for	ormer officers, directors,			
		trustees, key employees, and highest compens	ated employees			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified personal	ons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	and contributing employers and			ŧ
		sponsoring organizations of section 501(c)(9) voluntary e	employees' beneficiary			
ets		organizations (see instructions) Complete Part II of Sche	edule L .		6	
Assets	7	Notes and loans receivable, net		0	7	0
4	8	Inventories for sale or use .		37,925	8	30,825
	9	Prepaid expenses and deferred charges		95,322	9	113,485
	10a	Land, buildings, and equipment cost or		*		
		other basis Complete Part VI of Schedule D	<b>10a</b> 5,531,399			
1	b	Less accumulated depreciation .	<b>10b</b> 1,756,253	3,882,257	10c	3,775,146
!	11	Investments—publicly traded securities		3,287,911	11	5,170,848
	12	Investments—other securities See Part IV, line	11	15,827,478	12	14,802,125
	13	Investments—program-related See Part IV, line	e 11	0	13	0
	14	Intangible assets .		0	14	0
	15	Other assets See Part IV, line 11 .		114,485	15	56,867
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	25,747,442	16	27,284,420
	17	Accounts payable and accrued expenses .		10,079,296	17	10,102,316
	18	Grants payable	.		18	<del></del>
	19	Deferred revenue .	. [	1,728,963	19	1,768,044
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete	<b>-</b>		21	
ies	22	Loans and other payables to current and forme	· ·	`		,
Liabilities		trustees, key employees, highest compensated	· · ·			
iab		disqualified persons Complete Part II of Sched	<u>-</u>		22	
_	23	Secured mortgages and notes payable to unrel	· · · · · · · · · · · · · · · · · · ·	0	23	0
	24	Unsecured notes and loans payable to unrelate	· • • • • • • • • • • • • • • • • • • •	0	24	0
	25	Other liabilities (including federal income tax, pa	•			
		parties, and other liabilities not included on lines	s 17-24) Complete	_	]	
		Part X of Schedule D .		0	25	0
	26	Total liabilities. Add lines 17 through 25		11,808,259	26	11,870,360
es		Organizations that follow SFAS 117 (ASC 956 complete lines 27 through 29, and lines 33 at				
JUE	27	Unrestricted net assets		13,939,183	27	15,414,060
3al	28	Temporarily restricted net assets	·	13,939,103	28	15,4 14,000
d E	29	Permanently restricted net assets	}		29	
Ë		•			23	<del></del>
ř		Organizations that do not follow SFAS 117 (ASC958),	check here ▶ ☐ and			
ts (	22	complete lines 30 through 34.				
Se	30	Capital stock or trust principal, or current funds	F		30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or e	· ·	<del>-</del>	31	
Net	32	Retained earnings, endowment, accumulated in	icome, or other funds	40 000 400	32	45 44 655
_	33 34	Total liabilities and not assets/fund balances	· .	13,939,183	33	15,414,060
	<b>→</b>	Total liabilities and net assets/fund balances		25,747,442	34	<u>27,</u> 284,420

orm 9	990 (2013) New Jersey State Policmen's Benevolent Association	2	22-1553972	Pag	e 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			-	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,989	9,055
2	Total expenses (must equal Part IX, column (A), line 25)	2	(	3,616	3,485
3	Revenue less expenses Subtract line 2 from line 1 .	3		1,372	2,570
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10	3,939	,183
5	Net unrealized gains (losses) on investments	5		102	2,308
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			-1
0	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B)) .	10	15	5,414	1,060
art	XII Financial Statements and Reporting			1	
	Check if Schedule O contains a response or note to any line in this Part XII		•		
	<u> </u>			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		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	• ;	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				,
	reviewed on a separate basis, consolidated basis, or both			9	1
	X Separate basis Consolidated basis Both consolidated and separate basis		1.03	ź	- [
b	Were the organization's financial statements audited by an independent accountant?		2b	X	'
_	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		25	<del>^</del>	<del></del> :
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis		50		ĺ
_				ž į	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	•	<u> </u>		
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c   ∛ ≫	<u>, Х</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in		* *	5	
2-	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		x

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

Form **990** (2013)

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

## **Political Campaign and Lobbying Activities**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

- Complete if the organization is described below.Attach to Form 990 or Form 990-EZ.
- See separate instructions.
- ▶ 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

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

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

Na	me of organization			E	mploye	r identification number
Ne	w Jersey State Policmen's I	Benevolent Association				22-1553972
P	art I-A Complete if t	he organization is exempt und	ter section 501	(c) or is a sectior	1 <b>527</b> o	rganization.
1	•	he organization's direct and indirect p	political campaign	activities in Part IV		
2				•	▶ \$ .	64,950
3	Volunteer hours				-	
P	art I-B Complete if t	he organization is exempt und	ler section 501	(c)(3)		·· <u>-</u>
1		excise tax incurred by the organization			<b>▶</b> \$	
2		excise tax incurred by organization m			- 4	
3		ed a section 4955 tax, did it file Form	•		▶ Ψ.	☐ Yes ☐ No
	a Was a correction made?	a a cochon 1000 tax, ala it ilic i onii	Trzo for tilio year	•		Yes No
	b If "Yes," describe in Part I	V				1es 140
		he organization is exempt und	ler section 501	(c) except section	n 501(	(0)/3)
1		expended by the filing organization f			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>0)(0).</u>
	activities .	· · · ·		inperanction	<b>▶</b> \$	
2	Enter the amount of the f	iling organization's funds contributed	to other organizati	ons	<b>,</b>	
	for section 527 exempt fu				<b>▶</b> \$	
3	Total exempt function exp	penditures Add lines 1 and 2 Enter h	ere and on Form	1120-POL,		
	line 17b				▶ \$	0
4	Did the filing organization	file Form 1120-POL for this year?				X Yes No
5	Enter the names, address	ses and employer identification numb	er (EIN) of all sect	tion 527 political orga	anızatıoı	ns to which the filing
	organization made payme	ents For each organization listed, en	ter the amount par	d from the filing orga	anızatıor	n's funds Also enter
		ntributions received that were prompt				
	as a separate segregated	fund or a political action committee	(PAC) If additiona	space is needed, p	rovide ii	nformation in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro		(e) Amount of political
				filing organization funds if none, enter		contributions received and promptly and directly
						delivered to a separate
						political organization If none, enter -0-
	Floring Food of No. 11, Oli	A				
(1)	Election Fund of Nia H Gill	Attn D Leigh 201 Railroad Avenue East Rutherford, NJ 07073			4 500	
	Election Fund of John	17 Main St			1,500	
(2)	Wisniewski	Sayreville, NJ 08872	22-3497392		600	
	Elec Fund of Gabriela	PO Box 1368	22 0407002		- 000	
(3)	Mosquera for Assem	Blackwood, NJ 08012	45-2544014		300	
(4)	Election Fund of Craig	PO Box 368				
(*/	Coughlin for Assem	Woodbridge, NJ 07095			350	
(5)	Friends of Dan Benson	81 Hempstead Rd			7	
,	0 0 10/ 0	Hamilton, NJ 08610	26-2299066		750	
(6)	See Part IV - Supplemental Information				ا	^

P	art II-A Complete if the organization under section 501(h)).	ion is exempt	under section 5	01(c)(3) and file	d Form 5768 (elec	tion
A	Check ▶ if the filing organization	_	•		•	p member's
В	name, address, EIN, ex Check ▶ if the filing organization					
	Limits on Lo (The term "expenditures"	bbying Expendit			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence pi	ublic opinion (gra	ss roots lobbying)	<del></del>		0
b	Total lobbying expenditures to influence a					0
С	Total lobbying expenditures (add lines 1a	-	, ,,		0	0
d	Other exempt purpose expenditures	,				0
е	Total exempt purpose expenditures (add li	nes 1c and 1d)			0	0
f	Lobbying nontaxable amount Enter the ar	· ·	ollowing table in bot	h		
	columns		J		ol	0
	If the amount on line 1e, column (a) or (b) is	s: The lobbying	ıg nontaxable amou	ınt is:		<del>,</del>
	Not over \$500,000		mount on line 1e			,
Í	Over \$500,000 but not over \$1,000,000		s 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	is 10% of the excess	over \$1,000,000		·
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	us 5% of the excess of	over \$1,500,000	•	
$\perp$	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25%	6 of line 1f)	•		0	0
h	Subtract line 1g from line 1a If zero or les				0	0
i	Subtract line 1f from line 1c If zero or less	s, enter -0-			0	0
j	If there is an amount other than zero on ei	ther line 1h or lin	e 1ı, dıd the organı	zation file Form 472	0 reporting	
	section 4911 tax for this year? .					Yes No
	(Some organizations that	made a section				
	Lobby	ing Expenditure	es During 4-Year A	veraging Period	T - T-	
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	( <b>d)</b> 2013	(e) Total
2a	Lobbying nontaxable amount	0	0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))					0
	Total lobbying expenditures	0	0	0	0	0
d —	Grassroots nontaxable amount	0	0	0	0	0
_e	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures		•			_

Schedule C (Form 990 or 990-EZ) 2013

Par	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	l For	n 576	8	
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	3)		(b)	
		Yes	No	A	mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			<u> </u>	·	
b	If "Yes," enter the amount of any tax incurred under section 4912	۱,۰۰۰	x f			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<b>'</b> .'*	٠,	
Par	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	c)(5),	or s	ectior	)	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	ļ	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
1	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members	)R (b	) Pai	t III-A	, line	3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	- }	1			
-	political expenses for which the section 527(f) tax was paid).					
а	Current year					
h	Carryover from last year	}	2a 2b			
c	Total	- 1	20 2c			0
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		3			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible					
_	lobbying and political expenditure next year?  Touchle amount of lebbying and political expenditures (see years)	}	4			
5 Post	Taxable amount of lobbying and political expenditures (see instructions)		5			0
Part I	Supplemental Information  de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group lines), line 1. Also, complete this part for any additional information  -C, Line 5 Elec Fund of Donald Norcross for Senate PO Box 1003 Camden, NJ 08101-1003 Paid	ıst), P	art II-	A, line	2, and	
from	organization's funds \$750 Political contributions received and delivered \$0,					
Part I	-C, Line 5 Friends of Benjie E. Wimberly for Asm. PO Box 365 Elmwood Park, NJ 07407-0365 Paid					
from	organization's funds \$1,500 Political contributions received and delivered \$0,					<b></b>
Part I	-C, Line 5 Friends of Ronald Rice Senate Campaign Co PO Box 20037 Newark, NJ 07101 Paid from					
orgar	ization's funds \$2,500 Political contributions received and delivered \$0,					<b>-</b>
Dort I	C. Line 5 District 36 Democratic Club 9 Lincoln Avenue Butherford, N.J. 07070 42 4609274 Bord					

Part IV Supplemental Information (continued)
from organization's funds \$2,500 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Joseph F. Vitale PO Box 1467 Woodbridge, NJ 07095 91-2067793 Paid
from organization's funds \$500 Political contributions received and delivered \$0,
Part I-C, Line 5 Johnson for Assembly PO Box 971 Englewood Cliffs, NJ 07632 05-0401050 Paid from
organization's funds \$1,550 Political contributions received and delivered \$0,
Part I-C, Line 5 EFO of Troy Singleton for Assembly 907 Morgan Avenue Palmyra, NJ 08065 45-4908879
Paid from organization's funds \$600 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Thomas P Giblin PO Box 43062 Upper Montclair, NJ 07043 Paid
from organization's funds \$1,000 Political contributions received and delivered \$0,
Part I-C, Line 5 Greenstein for Senate PO Box 492 Plainsboro, NJ 08536 22-3625781 Paid from
organization's funds \$2,600 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Linda Greenstein PO Box 492 Plainsboro, NJ 08536 Paid from
organization's funds \$2,600 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Senator Paul Sarlo 9 Lincoln Avenue Rutherford, NJ 07070
03-0470225 Paid from organization's funds \$5,200 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Loretta Weinberg PO Box 3392 Teaneck, NJ 07666 22-3580789 Paid
from organization's funds \$1,000 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Joe Cryan PO Box 2245 Union, NJ 07083 Paid from organization's
funds \$2,600 Political contributions received and delivered \$0,
Part I-C, Line 5 Bob Gordon for Assembly 22 Maltese Dr Fair Lawn, NJ 07023 26-1089535 Paid from
organization's funds \$2,600 Political contributions received and delivered \$0,
Part I-C, Line 5 O'Donnell for Assembly 2013 PO Box 1063 Bayonne, NJ 07002 Paid from organization's
funds \$2,000 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Nelson Albano 21 North Main Street Cape May Court House, NJ
08210-2154 Paid from organization's funds \$2,600 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Vincent Prieto 699 3rd Street Secaucus, NJ 07094 27-1766120 Paid
from organization's funds \$2,600 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Asw Linda Stender PO Box 146 Scotch Plains, NJ 07076 Paid from

Part IV Supplemental Information (continued)
organization's funds \$5,200 Political contributions received and delivered \$0;
Part I-C, Line 5 Election Fund of Nicholas Scutari 20 Kennedy Drive Clark, NJ 07066 22-3632480 Paid
from organization's funds \$1,000 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Assemblyman Dave Rible PO Box 1381 Wall, NJ 07719 Paid from
organization's funds \$1,400 Political contributions received and delivered \$0,
Part I-C, Line 5 Assembly Republican Victory Fund 158 Main ST Woodbridge, NJ 07095 Paid from
organization's funds \$5,000 Political contributions received and delivered \$0,
Part I-C, Line 5 Democratic Assembly Campaign Committee 196 West State St. Trenton, NJ 08608
20-4354327 Paid from organization's funds \$2,500 Political contributions received and delivered \$0,
Part I-C, Line 5 Committee to Re-Elect Albert Coutinho 45 Essex Street, Suite 204, 2nd Floor
Hackensack, NJ 07601 35-2340184 Paid from organization's funds \$300 Political contributions received
and delivered \$0,
Part I-C, Line 5 Bonnie Watson Coleman for Assembly 132 Sanhican Drive Trenton, NJ 08618 22-3786876
Paid from organization's funds \$350 Political contributions received and delivered \$0,
Part I-C, Line 5 Friends of Connie Wagner 45 Essex St , Ste 204-2nd Floor Esssex, NJ 07601
75-3266090 Paid from organization's funds \$250 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Shirley K Turner 125 Lawrenceville-Pennington Road Lawrenceville,
NJ 08648 22-3212136 Paid from organization's funds \$1,200 Political contributions received and
delivered \$0,
Part I-C, Line 5 Election Fund of Senator Codey 770 North Dr Brick, NJ 08724 91-2068392 Paid from
organization's funds \$2,600 Political contributions received and delivered \$0,
Part I-C, Line 5 Bramnick for Assembly 279 Watchung Fork Watchung, NJ 07090 13-7469787 Paid from
organization's funds \$2,600 Political contributions received and delivered \$0,
Part I-C, Line 5 EFO Louis Greenwald for Assembly 2240-15 Route 70 Cherry Hill, NJ 08002 22-3565484
Paid from organization's funds \$1,000 Political contributions received and delivered \$0,
Part I-C, Line 5 Election Fund of Jerry Green 1460 Prospect Avenue Plainfield, NJ 07060 Paid from
organization's funds \$1,000 Political contributions received and delivered \$0,
Part I-C, Line 5 Jerry Green for Assembly 1460 Prospect Avenue Plainfield, NJ 07060 Paid from

# SCHEDULE D (Form 990)

**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.

2013

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury

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

Employer identification number Name of the organization New Jersey State Policmen's Benevolent Association 22-1553972 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year. 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be 6 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? Yes Conservation Easements. Part II 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 an historically important land area Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements b Total acreage restricted by conservation easements 2b С Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes 6 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 7 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1. . . ▶ \$ (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedi	ıle D (Fo		Policmen's Benevol	ent Assoc	ıatıon			22-155	3072		Page <b>2</b>
Part		Organizations Maintaining				easures, oi	r Other				
3		the organization's acquisition, a									<del>-/</del>
	_	f its collection items (check all th		•	•		Ŭ	J			
а		Public exhibition		d 🗌	Loan	or exchange p	program	s			
b	$\Box$	Scholarly research		е	Other						
С	Ħ	Preservation for future generati	ions		•						
4	Provid	de a description of the organizati		evolain h	ow they fu	orther the ora	anızatıor	n's exempt purp	ose in		
•	Part >			OAPIGIII II	on a.c, .c		a. 11201101	. o oxompt parp			
5	Durin	g the year, did the organization s	solicit or receive don	ations of a	art, historio	cal treasures.	or other	r sımılar			
		s to be sold to raise funds rather							Y	es	No
Part	IV	Escrow and Custodial Arr	rangements.							<del></del> -	·
		Complete if the organization		to Form	990, Par	t IV, line 9,	or repo	rted an amou	nt on Fo	orm	
		990, Part X, line 21.					•				
1a	Is the	organization an agent, trustee,	custodian or other in	itermediar	y for contr	ributions or ot	her asse	ets not			
	ınclud	ded on Form 990, Part X?							Y	es 🗀	No
b	If "Ye	s," explain the arrangement in P	art XIII and complete	the follow	ving table						
									Amount		
C		nning balance					1c				0
d		ions during the year				•	1d		- · · - · ·		
e f		butions during the yearing balance					1e 1f				0
-		•		د د سال ۱			<u> </u>			V	
2a		ne organization include an amou						- 4 3/111	Ц Т	es 🔀	No
b		s," explain the arrangement in P	art XIII Check nere	if the expi	anation na	as been provi	aea in P	art XIII			
Part	V	Endowment Funds.			000 D	+ D / 15 40					
		Complete if the organization	(a) Current year				ha alt	(d) Three years bac			. h 1:
1a	Regin	nning of year balance	(a) Current year	(0) FII	or year O	(c) Two years	0	(u) Three years bac	0	our years	0
b	_	ibutions	<u> </u>				<del>∀</del>  -		4		
c		nvestment earnings, gains,				<del></del>			+		
		osses .									
d	Grant	ts or scholarships									
е	Other	expenditures for facilities									
		orograms									
f		nistrative expenses				<del></del>					
g		of year balance	0		0		<u> </u>		0	·	0
2		de the estimated percentage of t d designated or quasi-endowmer	•	-	line 1g, co	olumn (a)) nei	d as				
a b		anent endowment	%	<u>"</u>							
c		orarily restricted endowment	<u>→</u> %								
•	•	percentages in lines 2a, 2b, and		%							
3a	-	nere endowment funds not in the	•		n that are	held and adr	ministere	ed for the			
	orgar	nization by								Yes	No
	(i)	unrelated organizations			•	•			3a(i)		
	(ii)	related organizations							3a(ii)		<u> </u>
b		s" to 3a(II), are the related organ		•					3b		<u> </u>
4		ribe in Part XIII the intended use		i's endowr	ment funds	\$					
Part	VI	Land, Buildings, and Equ		ha	000 0-	411/1: 44	. 0	F 000 C		- 40	
		Complete if the organization	1								
		Description of property	(a) Cost or of			st or other s (other)		Accumulated epreciation	(d) E	look valu	е
1a	Land			1		33,300		-			33,301
b	Build			ō		4,492,849		853,634			39,215
					i						

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a	Land	1	33,300		33,301			
þ	Buildings	0	4,492,849	853,634	3,639,215			
C	Leasehold improvements	0	0	0	0			
d	Equipment	0	976,241	890,983	85,258			
<u>e</u>	Other	0	29,008	11,636	17,372			
Tota	Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).							

22-1553972

Part VII	Complete if the organization		90, Part IV, line 11b. See Forr	n 990. Part X. line 12
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation
(1) Financial o	· · · · · · · · · · · · · · · · · · ·		<del> </del>	THAIRCT VALUE
	eld equity interests		·	<del></del>
	ertificates of Deposit	14,802,125	<u> </u>	
	c requires reclass		) F	<del></del>
			1	
(E)				·
				·
(H)				<del></del>
	must equal Form 990, Part X, col (B) line 12)	► 14,802,125	5	<u></u>
Part VIII	Investments—Program Re			
			90, Part IV, line 11c See Forr	n 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of v Cost or end-of-year	
_(1)				
_(2)				
(3)	· · · · · · · · · · · · · · · · · · ·			
(4)				·
(5)				
(6)				<u></u> -
(7)				
(8)				
(9)				
	nust equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>	)	· · · · · · · · · · · · · · · · · · ·
Part IX	Other Assets.			
<del> </del>	Complete if the organization		90, Part IV, line 11d See Forr	
	** <del> </del>	(a) Description	·	(b) Book value
(1)		<del></del>		
(2)				
(4)				
(6)			-	
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X	( col (B) line 15 )	<b>-</b>	
Part X	Other Liabilities.	, 00. (2)		L
r are A		answered "Yes" to Form 90	90, Part IV, line 11e or 11f. Se	e Form 990 Part Y
	line 25.			e Form 990, Part A,
1.	(a) Description of liability	(b) Book value		
(1) Federal I	ncome taxes	C	2	
(2)			_	
(3)	<del></del>	<del></del>	4	
_(4)			_	
<u>(5)</u>		<del></del>	-{	
<u>(6)</u>			-	
<u>(7)</u>		<del></del>	4	
(8)			-	
(9)	ust equal Form 990, Part X, col (B) line 25)	•	<del>,</del>	
	incertain tax positions. In Part XIII, p		· L	that rangets the
Liability lot u	moentain tax positions. III Fait Alli, pi	IDAIDE HIE IEVI OF HIE HOURING ID LIFE	a organization a infancial statement	ulacteports 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 New Jersey State Policmen's Benevolent Association	22-1553972	Page <b>5</b>
Part XIII	Supplemental Information (continued)		
	oupplomental information (continued)		
	•••••••••••••••••••••••••••••••••••••••		
			<b></b>
	•		

#### **SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

#### 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.

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

OMB No 1545-0047

Internal Revenue Service Name of the organization Employer identification number New Jersey State Policmen's Benevolent Association 22-1553972 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I 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 Mail solicitations Solicitation of non-government grants а Internet and email solicitations b Solicitation of government grants Phone solicitations C Special fundraising events d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or 2a key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 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 (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (Iv) Gross receipts (or retained by) (ii) Activity custody or control of (or retained by) or entity (fundraiser) from activity fundraiser listed in contributions? organization col (ı) Yes No 0 0 0 0 0 0 0 5 0 0 0 6 0 0 0 0 0 0 0 0 0 0

3	List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing
	•••••••••••••••••••••••••••••••••••••••

Total 3

Part II

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col (a) through col (c)) (event type) (event type) (total number) Revenue Gross receipts 0 2 Less Contributions 0 Gross income (line 1 minus line 2) 0 0 Cash prizes 0 0 Noncash prizes 0 0 Direct Expenses Rent/facility costs 0 0 Food and beverages 0 0 Entertainment 0 0 Other direct expenses 0 0 Direct expense summary Add lines 4 through 9 in column (d) 0) 11 Net income summary Subtract line 10 from line 3, column (d) 0 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 0 Direct Expenses Cash prizes 0 Noncash prizes 0 Rent/facility costs 0 5 Other direct expenses Yes % Yes % Yes Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) 0) Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states? Yes 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes If "Yes," explain:

Sched	ule G (Form 990 or 990-EZ) 2013 New Jersey State Policmen's Benevolent Association	22-1553972 Page <b>3</b>
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 to administer charitable gaming?	Yes No
13 a b 14	Indicate the percentage of gaming activity operated in The organization's facility An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records	13a % 13b %
	Name ►Address ►	
15a b c	Does the organization have a contract with a third party from whom the organization receives gaming revenue?  If "Yes," enter the amount of gaming revenue received by the organization  \$\bigs \text{\$ 0 \text{ and the amount of gaming revenue retained by the third party} } 0  If "Yes," enter name and address of the third party	Yes No
	Name ►	
16	Gaming manager information  Name   Gaming manager compensation   \$ 0  Description of services provided	
	Director/officer	Yes No
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, column Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to additional information (see instructions)	provide any

#### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► See separate instructions.

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

Employer identification number New Jersey State Policmen's Benevolent Association 22-1553972 **Questions Regarding Compensation** 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No." complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a 233 related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study **%**, Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? b 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 5 compensation contingent on the revenues of The organization? 5a Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of The organization? 6a Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53 4958-6(c)?

22-1553972

Schedule J (Form 990) 2013 New Jersey State Policmen's Benevolent Association

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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

Note. The sum of columns (B)(I)—(III) for each	Isted	individual must equal t	he total amount of Fo	orm 990, Part VII, Sec	tion A, line 1a, applica	ble column (D) and (	E) amounts for that in	dividual
(B) Breakdown of W-2 and/or 1099-MISC compensation		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	bac tacamento (2)	oldoxetack (O)	(E) Total of polymen	20100000000 (2)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(ii) Other reportable	other deferred	benefits	(B)(I)+(D)	reported as deferred in prior Form 990
				compensation				
Rob Nixon	ε	156,362					156,362	
1 Dir Govt Relations	(ii)						0	
	(i)							
2	(ii)							
	Θ							
3	<u>(ii</u>							
	ε	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
4	(ii)							
	(1)							
5	(11)						1	1
	Θ							
9	(ii)				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	:
	(i)							
7	(ii)					; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
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10	(ii)							
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	Ξ			11 11 11 11 11 11 11 11 11 11 11 11 11				
16	€							

Schedule J (Form 990) 2013

#### SCHEDULE O (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.

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

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OMB No 1545-0047

New Jersey State Policmen's Benevolent Association	22-1553972
Form 990, Part VI, Section B, Line 11b. Controller reviews and reconciles the 990 and details	
therein to the audited FS and resolves any questions direct with the independent CPA and then	
reviews the 990 with the officers who have been delegated authority to accept and file same on	
behalf of the Board.	
Form 990, Part VI, Section B, Line 12c Controller reviews Col documents for completion by all	
employees and the Board consistent with policy and reports details to the Board	
Form 990, Part VI, Section B, Line 15a: Controller reviews compensation levels consistent with	
Board and By Laws authorized salaries for the following: President and Exec VP Trustees	
receive stipulated per diem compensation for attendance at Board meetings which are reported	
to IRS.	
Form 990, Part VI, Section C, Line 19. Controller maintains copies of all public documents	
articles, bylaws, Col, whistle blower, record retention, form 990 and audited FS and will make	
same availale upon request from a 3rd party.	
Form 990, Part XI, Line 9 Rounding.	
Form 990, Section Tax Exempt Status, Line I. Please note the PBA was granted 501 C 8 tax	
exempt status retroactively on January 14, 2013. Howver the IRS rejected on June 9, 2014 the	
e-file of the 990 because "tax exempt status specified in item I, must macth data in the efile	
database". We have attached copies of the Tax Determination letter and the IRS rejection	
notice	

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
New Jersey State Policmen's Benevolent Association	22-1553972
••••••	
•	
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	••
•••••	
•	
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# **Continuation Sheet for Form 990**

Name of the Organization

Employer identification number

New Jersey State Policmen's Benevolent Association Continuation of Officers, Directors, Trustees, Key Employees, and Highest Part VII Section A

Compensated Employees										
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Posit	ion (	Г	T	that ap	<del></del>	Reportable	Reportable	Estimated
	hours per week	or and	Inst	Officer	Key employee	E E	Former	compensation from	compensation from related	amount of other
	(list any	individual t or director	럁	<u> </u>	9	ploy	) He	the	organizations	compensation
		or a	na		ğ	e com		organization	(W-2/1099-MISC)	from the
	related organizations	Individual trustee or director	Institutional trustee		&	Pen		(W-2/1099-MISC)		organization and related
	below dotted	"	ê			Highest compensated employee				organizations
	line)					ء ا				
(26) Frederick Ludd	12 00									
Sergeants at Arms	0 00	<u> x</u>						1,620		
(27) Frank Cipully	12 00									
Sergeants at Arms	0 00	X					_	1,805		
(28) John Cernek	12 00									
Sergeants at Arms	0 00	X	_	<u> </u>		ļ	<b> </b>	775		
(29) Kevin Hibbitt	12 00						ĺ			
Sergeants at Arms	0 00	X	<u> </u>	<u> </u>	ļ	<del> </del>	<b> </b>	1,050		
(30) Michael McLaughlin	12 00	.,								
Sergeants at Arms	0 00	Х	<u> </u>		<u> </u>	<b>├</b>	├	1,370		<del></del>
(31) Richard Brown	12 00									
Sergeants at Arms	0 00	Х			-		├	1,725		
(32) Richard Geib	12 00	,								
Sergeants at Arms (33) Bruce Chester	0 00 12 00	Х		-	-	<del> </del>	┢	0		
Sergeants at Arms	0 00	x						1,550		
(34) Margaret Hammond	12 00	<del>  ^</del>	⊢	<u> </u>	┢	<del> </del>	├	1,550		
Sergeants at Arms	0 00	х						1,835		
(35) Rob Nilvon	40 00	<del>^</del>	$\vdash$			<del>                                     </del>	<del>                                     </del>	1,000		
Dir Govt Relations	0 00	1			x	x		156,362		
(36)			<u> </u>							<del>.</del>
(37)										
(38)										
(39)							$\vdash$			
(40)				-	-					
(41)										
(42)										
(43)										
(44)										····
(45)		-								
(46)										
<del></del>							•			

. . .

# Part II-A (Sch C (990/990EZ)) - Affiliated Group Lobbying Expenditures

Check (7)	0	_				0
Check (TX)			Total Taxable	Oved Lobbyng	Expenditures	
Check (X)   Numbers   Affaited Group   State   Zip Code   Topic   Topic   Total   Tota	0	Tarable	Grassmols	Lobbyng	Expenditures	0
Check (X)   Number is Affiliated Coup   State   To Cook    0		Grassmots	Nontaxable	Amount	0	
Check (X)   Number is Affiliated Coung   State   To Cook   0		- Guriago	ortaxable	Amount	0	
Check (X)   Wenther is Affiliated Coup   State   Zip Code   Fovegn Country   Total   Total   Total   Total   Total   Other Etempt     Wenther is Affiliated Coup   State   Zip Code   Fovegn Country   Tember   Expenditures   Expendit	0					0
Check (X)   Nembers   Affaited Group   State   Zip Code   Fronego Country   member   Expenditures   Expenditure	0				_	
Check (X)   Number is Affiliated Coup   State	0		35 G		_	0
Check (T)    Nember is Affaited Group   State   Zip Code   Foreign Country   Total				Total Lobbying	Expenditues	
Check (X) if Nember is Affiliated Coup a Business Member's EIN Street Address City State To Code Foreign Country member E	0	Total	Ored	Lobbying	Expenditures	
Check (T)  if Nembers Affaited Grap  a Bisoness Members EIN Street Address City State Zip Code Foreign Country	0	Tebal	Gassnots	Lobbyring	Expenditures	
Check (X) if Nember is Afficiate Group a Bisoniess Member's EIN Street Address City State Zip Code For			Check (X)	if electing	шешре	
Check (T.) if Nembers Affiliated Grup a Business Member's EIN					Foreign Country	
Check (T.)  if Members Affiliated Grup a Busness Members EIN			••••		ZpCode	
Check (T.)  if Members Affiliated Grup a Busness Members EIN					鶈	
Check (T.)  if Members Affiliated Grup a Busness Members EIN					Š	
<u></u>					Street Address	
<u></u>				Afficated Group	Member's EIN	
स्य Group a's Name			Check (X)	i Nember 15	a Busness	
Affar				Afficiated Group	Member's Name	

Part VII	(Sch D	(990)	- Investments	Other	<b>Securities</b>
----------	--------	-------	---------------	-------	-------------------

	Total:	14,802,125	
			Method
	Description	Book Value	Valuation
1	Financial derivatives and other financial products	0	
2	Closely-held equity interests	0	
3	Certificates of Deposit	14,802,125	F
4	Mkt Sec requires reclass	0	F
	Total:	0	Method
:VI	II (Sch D (990)) - Investments Program Related		
	IOLAI.	<u> </u>	Mothod
		Į.	Method
	Description	Book Value	Valuati
		Book Value	<u>Valuat</u>
 _ <u>P</u>	Part IX (Sch D (990)) - Other Assets		
<u>P</u>	Part IX (Sch D (990)) - Other Assets	Book Value  Total:  Book Value	0

	Part III, Line 9 (	<u>(Sch G (990/990EZ))</u>	<u>- States Where O</u>	perating	Gaming Activities
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art III, Line 9 (Sch G (990/990E	<u>Z)) -                                  </u>	States Where Operating Gaming Acti	vities	
Armed Forces the Americas		Louisiana		Palau
Armed Forces Europe		Massachusetts		Rhode Island
Alaska		Maryland		South Carolina
Alabama		Maine		South Dakota
Armed Forces Pacific		Marshall Islands		Tennessee
Arkansas		Michigan		Texas
American Samoa		Minnesota		Utah
Arizona		Missouri		Virginia
California		Commonwealth of the Northern Mariana Islands		U S Virgin Islands
Colorado		Mississippi		Vermont
Connecticut		Montana		Washington
District of Columbia		North Carolina		Wisconsin
Delaware		North Dakota		West Virginia
Florida		Nebraska		Wyoming
Federated States of Micronesia		New Hampshire		
Georgia		New Jersey		
Guam		New Mexico		
Hawaii		Nevada		All States
lowa		New York		_
Idaho		Ohio		
Illinois		Oklahoma		
Indiana		]Oregon		
Kansas		Pennsylvania		
Kentucky		Puerto Rico		
		•		

#### FIXED ASSET INFORMATION Workpaper Index F-5 New Jersey State PBA 12/31/13 Organization Statement of financial position date Prepared by Date prepared 03/18/14 Leo 12/31/13 **Fixed Assets** 12/31/12 Additions Disposals Automobiles 191,006 24 246,361 81 F-40 55,355 57 F-30 Furniture and fixtures 459,633 24 459,633 24 270,245 82 F-20 Computers 270,245 82 Construction in Process\* 16,729 04 Building improvement (Bldg) 16,729 04 F-10 Buildings 4,476,119 40 F-10 4,476,119 40 33,300 00 33,300 00 F-50 Land -Software 29,008 20 29,008 20 F-60 5,476,041 94 55,355 57 5,531,397 51 Accumulated Depreciation Automobiles (158,358 00) (19,727 93) (178,085 93) F-40 Furniture and fixtures F-30 (448,731 54) (3,634 00) (452,365 54) Computers (242,813 00) (17,718 46) (260,531 46) F-20 Office equipment Building improvement (Bldg) Buildings (738,064 00) (115,570 00) (853,634 00) F-10 Land F-50 Software (5,818 00) (5,817 60) (11,635 60) F-60 (1,593,784 54) (162,467 99) (1,756,252 53) To = FS, GL

Other Information	Fixed Assets	Accumulated Depreciation	Depreciation Expense	Capıtal	Net Sales			
12/31/13	5,531,398	(1,756,253)	(162,468)					
12/31/08	5,476,042	(1,593,785)		•	1			
12/31/07	5,476,121	(1,593,785)	(177,527)					
12/31/06	5,435,090	(1,416,258)	(203,413)	plus				

(1,593,784 54)

3,882,257 40

Less than 1

(162,467 99) difference to GL

(107,112 42)

JU 10 10 100

Acc Dep/Depreciation

**Net Fixed Assets** 

excludes CIP\*

(1,756,252 53) Less than 1 difference to GL

3,775,144 98 Less than 1 difference to GL

# Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172
2013
Attachment

Department of the Treasury Internal Revenue Service (9)

See separate instructions.

Attach to your tax return.

Sequence No 179

Name(s) shown on return	vity to which this form relates				Identifying number					
New Jersey State Policmen's Benevol	lent Associ 990 22-1553972 e Certain Property Under Section 179									
Note: If you have any liste		ete Part V b	efore you compl	ete Part I				1	<del></del>	
1 Maximum amount (see instructions)										
	2 Total cost of section 179 property placed in service (see instructions)									
3 Threshold cost of section 179 property before reduction in limitation (see instructions)								3	0	
4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-										
5 Dollar limitation for tax year Subtr	act line 4 from lin	e 1 If zero	or less, enter	-0- If married	filing					
separately, see instructions						5	0			
6 (a) Description of property			(b) Cost (business use only)			(c) Elected cos	t			
			<del></del>							
7 Listed property Enter the amount	•		Į	7		8				
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7										
9 Tentative deduction Enter the smaller of line 5 or line 8									0	
	<b>10</b> Carryover of disallowed deduction from line 13 of your 2012 Form 4562 .									
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)										
12 Section 179 expense deduction A				nan line 11	. 1			12	0	
13 Carryover of disallowed deduction					<b>&gt;</b>	13		0	<u> </u>	
Note: Do not use Part II or Part III belo										
Part II Special Depreciation	1 Allowance a	nd Other	Depreciatio	n (Do not in	clude liste	ed p	property.) (See	ınstr	uctions )	
14 Special depreciation allowance for		ty (other th	an listed prope	rty) placed in s	service				1	
during the tax year (see instruction		•						14		
15 Property subject to section 168(f)(		•		•				15	ļ	
16 Other depreciation (including ACR						,		16	13,317	
Part III MACRS Depreciation	n (Do not inclu			ee instructior	าร.)					
	<del> </del>	Secti								
17 MACRS deductions for assets place								17	114,462	
18 If you are electing to group any as		rvice durin	g the tax year i	nto one or mo	re					
general asset accounts, check her							▶□	l.		
Section B - Asset	ts Placed in Ser	vice Durin	g 2013 Tax Ye	ar Using the (	Seneral De	epre	ciation System			
	(b) Month and									
(a) Classification of property	year placed	(busines:	s/investment use	(d) Recovery period	(e) Convention		(f) Method	(g) Depreciation deduction		
	in service	only—s	ee instructions)							
19 a 3-year property	<u> </u>							<u> </u>		
<b>b</b> 5-year property	_									
c 7-year property	_									
d 10-year property	<u> </u>									
e 15-year property		ļ								
f 20-year property										
g 25-year property				25 yrs			S/L			
h Residential rental				27 5 yrs	MM		S/L			
property				27 5 yrs	ММ		S/L			
i Nonresidential real				39 yrs	MM		S/L			
property					MM		\$/L			
Section C - Assets	Placed in Servi	ce During	2013 Tax Year	Using the Al	ternative l	Сер	reciation System	n		
20 a Class life							S/L			
b 12-year				12 yrs			S/L			
c 40-year				40 yrs	MM		S/L			
Part IV Summary (See instru	ictions.)									
21 Listed property. Enter amount from line 28										
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21										
Enter here and on the appropriate						ons		22	127,779	
23 For assets shown above and place					ſ					
of the basis attributable to section			·	<u> </u>	<u> </u>	23				