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orm 990

Department of the Treasury

Internal Revenue Service

" Return of Organization Exempt From Income Tax

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

Do not enter Social Security numbers on this form as it may be made public.

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

2013

OMB No 1545-0047

Open to Public Inspection

	OI LITE	ZO 13 Calellu	ar year, or tax year begin	ming	11-01 , 20 13, and er	lullig		10.	-31 ,2014
В	, Check if a	k if applicable C Name of organization Ski Bears of Connecticut Inc						Employer identification no	
	Address c	ress change Doing Business As							06-1086128
	Name cha	e change Number and street (or P O box if mail is not delivered to street address)				Room/su	ute		Telephone number
_		stal return PO Box 1653							(860)309-4290
_	Terminate			country and ZIP or foreign postal code		J		-	309,613
_	Amended		Norwalk, CT 06					I,	G Gross receipts \$
☴ '	,	n pending	F Name and address of princi			•		<u> </u>	O Cross receipts
"	фрисаци	in pending	i Hame and address of princi	paromos		H(a)	Is this a group	up retu	urn for Yes X No
			501(c)(3) X 501(c) (7	, 4 ()	Пгот				= =
	ax-exem) (insert no) 4947(a)(1) o	r 527	H(b)	If "No " attac	rdinate h a lis	t (see instructions)
	Vebsite		skibears.org	. 🗆 🕨	1	111(0)	Group exem	paon	ildilibei
Pa		Summar		ociation Other	L Year of formation 1	963	M State o	of lega	I domicile CT
Га			·						
	1	=	=	ion or most significant activities	Provide members	with	ski tr	ips	and social
9		activiti	es at discounted	rates					
Jan									
ē									
õ	2			discontinued its operations or d	isposed of more than 25% of	fits net	assets		1
ಹ	3		•	rning body (Part VI, line 1a)	8033			3	6
es	4		•	s of the governing body (Part VI	, line/log) / · · · · · · · ·	• • • •		4	0
ξ	5	Total number	r of individuals employed in	n calendar year 2013 (Part V, line	² // 2// 2// 2// 2// 2// 2// 2// 2// 2//	• • • •		5	0
Ē	6	Total number	r of volunteers (estimate if	necessary) · · · · · · · ·				6	
ਨੇਂ	7a	Total unrelate	ed business revenue from	Part VIII, column (C), line 12				7a	0
	b	Net unrelated	d business taxable income	from Form 990-T, line 34	~/. & ./Q/			7b	0
と				/>		P	nor Year		Current Year
i i	8	Contributions	s and grants (Part VIII, line	1h) · · · · · · · · · /· ·]	/··››. · //⁄/// /···· [19,343
ۋ.	9	Program sen	vice revenue (Part VIII, line	e 2g)	\$5.05C		284,	477	290,270
Ę,	10	Investment in	ncome (Part VIII, column (/	A), lines 3, 4, and 7d)	······				0
:e.	11	Other revenu	ue (Part VIII, column (A), lir	nes 5, 6d, 8c, 9c, 10c, and 11e)					0
<i>~</i>	12	Total revenue	e - add lines 8 through 11	(must equal Part VIII, column (A)), line 12)		284,	477	309,613
Ę.	13	Grants and s	similar amounts paid (Part	X, column (A), lines 1-3) · ·					0
	144	Benefits paid	I to or for members (Part I)	(, column (A), line 4)	[190,	415	296,887
S. C.	15	Salaries, other	er compensation, employe	e benefits (Part IX, column (A), I	ines 5-10)				0
Expensês, 0 2	16a	Professional	fundraising fees (Part IX, o	column (A), line 11e) · · · ·					0
ğ	Ь	Total fundrais	sing expenses (Part IX, co	lumn (D), line 25)	0				
Ж	17	Other expens	ses (Part IX, column (A), lii	nes 11a-11d, 11f-24e) · · ·			5,	758	22,848
	18	Total expens	es Add lines 13-17 (must	equal Part IX, column (A), line 2	25) • • • • • • • • • [196,	173	319,735
	19	Revenue less	s expenses Subtract line	18 from line 12			88,	304	(10,122)
5	-				ı	Beginning	of Current	/ear	End of Year
sets	20	Total assets	(Part X, line 16) · · · ·		[88,	304	145,304
Net Assets or	21	Total liabilitie	es (Part X, line 26) · · ·		[0
Ž	22	Net assets of	r fund balances Subtract	line 21 from line 20 · · · · ·			88,	304	145,304
Pa	rt II	Signatu	re Block						
				n, including accompanying schedules and cer) is based on all information of which p		nowledge a	and belief, it i	s	
100 0	J110CL, 81	ind combinens made	aranon or property totale trial offi	O - C A	oparar nas any miomioago			T	
٠.			Jeffery	Paul Jeffery	<u> </u>	<u> </u>			12-17-2015
Sig	n	Signatur	e of officer	' () () ()	1			Date	
Her	e	Paul	Jeffery, Treas.	0					
		Type or	print name and title						
		Print/Type pre	eparer's name	Preparer's signature	Date	، ا	Check 🔯	ıf F	PTIN
Pai	d	Joseph	Paldino	Joseph Palgang	2-18-2015],	self-employed	,	P00036578
Pre	parer		Paldino			Firm's El			
	Only			ston Post Roge		Phone n	-		
	•			eck NY 10543				4 - 2	53-6857
May	the IRS	discuss this		own above? (see instructions)				• •	· · · 🔀 Yes 🗌 No
			on Act Notice, see the se						Form 990 (2013)

	990 (2013) Ski Bears of Connecticut Inc	06-1086128	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		
;	Provide members with ski trips and social activities at discounted rates		
		<u> </u>	
2	Did the organization undertake any significant program services during the year which were not listed on the		_
	prior Form 990 or 990-EZ?	· · · ∐ Yes t	x No
•	If "Yes," describe these new services on Schedule O		
3 ′	Did the organization cease conducting, or make significant changes in how it conducts, any program		_
;	services? · · · · · · · · · · · · · · · · · · ·	· · · ∐ Yes [x No
;	If "Yes," describe these changes on Schedule O		
4 ;	Describe the organization's program service accomplishments for each of its three largest program services, as measured	•	
:	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	ers,	
7	the total expenses, and revenue, if any, for each program service reported		
<u>.</u>			
4a	(Code) (Expenses \$308,171 including grants of \$) (Revenue	\$ 290	<u>,270</u>)
i	Provided members with various ski trips at substantial discounts and savings		
:			
;			
,			
			
			
			
4b	(Code) (Expenses \$ including grants of \$) (Revenue	\$	<u> </u>
7.0	/ Code / (Experious #) (Nevenue	<u> </u>	
			
			
			
•			
٠			
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
,			
<u>,</u>			
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 308,171		

Form 990 (2013)
Part IV C 3) Ski Bears of Connecticut Inc
Checklist of Required Schedules

			Yes	No
1 (Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
1	complete Schedule A	1		X
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		<u> X</u>
4:	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
e :	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5 t	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 98-197 If "Yes," complete Schedule C,	_		v
e ·	Part III	5		<u>X</u>
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 !	6		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	•		<u>X</u> _
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		v
8;	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			<u>X</u>
1	complete Schedule D, Part III	8		v
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	•		<u>X</u>
•	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
•	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		v
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	3		<u>X</u>
٠,	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		-	
••,	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
ь	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
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
ď	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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12á	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
•	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
•	fundraising, business, 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		_X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or		į	
	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	. 1		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u> _
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>X</u>
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		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
_ <u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_		···
,	government on Part IX, column (A), line 19 If "Yes," complete Scheudle I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
;	on Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
,	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			 -
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
ć	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			\vdash
1	to defease any tax-exempt bonds?	24c		
_		24d		\vdash
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
,	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
þ	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		<u> </u>
26 ,	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			-
-	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
00	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
J4	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		x
25-	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
35a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334	<u> </u>	
b		35b		_v
20	· · · · · · · · · · · · · · · · · · ·	350		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	36	1	
	related organization? If "Yes," complete Schedule R, Part V, line 2	100	 	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			,,
	Part VI · · · · · · · · · · · · · · · · · ·	37	<u> </u>	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	Х	1

Form 990 (2013) . Ski Bears of Connecticut Inc

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		İ	
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		ŀ	
Ċ	Did the organization comply with backup withholding rules for reportable payments to vendors and			
:	reportable gaming (gambling) winnings to prize winners?	1c		
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			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		ŀ	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
þ	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		ŀ	
•	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
ı	account)?	4a		<u>X</u>
b	If "Yes," enter the name of the foreign country			
,	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	ļ		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۵.		
_	gifts were not tax deductible?	6b		
7_	Organizations that may receive deductible contributions under section 170(c).		- 1	
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?	7.		
L	and services provided to the payor?	7a 7b		
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	75		
C	required to file Form 8282?	7c	Ī	
: d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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?	8	1	
9 .	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter		İ	l
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			l
	against amounts due or received from them)			l
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
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		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which	ļ		
•	the organization is licensed to issue qualified health plans	ļ		
C	Enter the amount of reserves on hand			
14ạ	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in the Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Х Did the organization delegate control over management duties customarily performed by or under the direct 3 . Х supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Х 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint Х one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Х Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a Did the organization have local chapters, branches, or affiliates? 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 purposes? 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 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? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official **b** Other officers or key employees of the organization 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 arrangement X with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► CT Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website ☐ Upon request ☐ Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 20 Paul Jeffery (860)309-4290, PO Box 1653, Norwalk, CT 06854

Form 990 (2013)	Ski, Bears of Connecticut Inc	
Dart VIII Compone	tion of Officers Directors Tructocs Key Employees Highest Comp.	_

06-1086128 Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, 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)	(B) (C)				(D)	(E)	(F)			
Name and Title	Average hours per			Posit				Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any	,				an one both an		from	related	other
•	hours for related	·				rustee)		the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations below dotted					, ' - -	7	(W-2/1099-MISC)		organization and related
•	line)	Individual trustee or director	stituti	Officer	Key employee	ghest	Former			organizations
		al tru	onal t		ploye	ee				
		stee	Institutional trustee		ä	Highest compensated employee				
			"			ated				
(1) Paul Jeffery	20.00									
Treas.				Х				0	0	0
(2) Dennis Conley	10.00			v						
President	10.00			Х		-		0	0	0
(3) Kodi_Smith	1 10.00			$ \mathbf{x} $				0	0	0
(4) Phil Glifort	10.00								· · · · · · · · · · · · · · · · · · ·	
Secretary				х				0	0	0
(5) Luis Rodriguez	20.00									
Member at Large - Membership Chair				X				0	0	0
(6) Michael Burns	10.00			v				_		
Member at Large - Social Chair	1.		-	X				0	0	0
(7)										
(8)'										
<u>(9)</u>										
(10)										
(10)										
(11)										
(12)										
(13)										
(14)										
	l				L		لـــا		L	5 (22.12)

Page 8

Part \	Section A. Officers, Directors, Trustoes,	es, Key Employees, and Highest Compensated Employees (continued)											
	(A)	Beatles											
	Name and title		(do no	ot che			an one		Reportable compensation	Reportable compensation from		stimate mount c	
		hours per week (list any	box, u		-		both an		from	related		other	
		hours for related	├ ─ ─			_	· ·	70	the organization	organizations (W-2/1099-MISC)		npensat from the	
		organizations	Individual trustee or director	institutional trustee	Officer	cey employee	Highest compensatemployee	ome	(W-2/1099-MISC)		1	ganızatı	
;		below dotted line)	ctor t	tiona		륗	st co yee	4			1	nd relate janizatio	
			ruste	trus		ě	mper						
-		•	°	fee			ısated						
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45											-		
15)													
16)											1		
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18)						İ							
19)										 	 		
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20)													
21)													
22)											 		
<i></i>)													
23)													
											<u></u>		
24)													
· 0.5.)	·-····································	-				_						-	
[25)											ļ		
1b	Sub-total							>			 		
С	Total from continuation sheets to Part VII, Section	on A .						•					
	Total (add lines 1b and 1c)	,							0	0	<u> </u>		0
	Total number of individuals (including but not limited	I to those liste	ed abov	ve) v	vho I	rece	ived n	nore	than \$100,000 of				
	reportable compensation from the organization									0		Yes	N.
3	Did the organization list any former officer, director,	or trustee, ke	ev emp	olove	e. o	r hia	hest c	omp	ensated			163	+ ''
	employee on line 1a? If "Yes," complete Schedule J					_					3		Х
4	For any individual listed on line 1a, is the sum of rep	ortable comp	ensati	on a	nd o	ther	comp	ensa	ation from the				
	organization and related organizations greater than				•			e J f	or such				
	Individual · · · · · · · · · · · · · · · · · · ·								on or individual		4		X
	big any person listed on line Taireceive of accrue of for services rendered to the organization? If "Yes," of			-			_	ıızaıı			5		X
	n B. Independent Contractors	on piece our	000.0										1 41
1	Complete this table for your five highest compensation	ed independe	nt con	tract	tors	that	receiv	ed n	nore than \$100,00	0 of		-	
	compensation from the organization. Report compe	nsation for th	e caler	ndar	yeaı	end	dıng w	ith o	r within the organia	zation's tax			
	year	-											
	(A) Name and business address								(B) Description of	l l		(C) censatio	
	realing and positions address								Description of	SCITION	COM	201138110	<i>y</i> 11
Y													
-													
_ `											-		

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) (C) (D) Revenue excluded from tax under sections 512-514 Total revenue Related or Unrelated business revenue exempt function Contributions, Gifts, Grants and Other Similar Amounts 1a 1b 19,343 1c 1d Government grants (contributions) . . 1e All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ 19,343 **Business Code** Program Service Revenue 290,270 2a Discounted Ski trips 900099 290,270 f All other program service revenue g Total. Add lines 2a-2f · · · · · · · · · · · · · · · · · · ▶ 290,270 Investment income (including dividends, interest, Income from investment of tax-exempt bond proceeds (i) Real (II) Personal 6a Gross rents **b** Less rental expenses · · · · c Rental income or (loss) . . . (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory **b** Less cost or other basis and sales expenses c Gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV. line 18 · · · · · · · · a **b** Less direct expenses b c Net income or (loss) from fundraising events · · · · · · · ▶ 9a Gross income from gaming activities See Part IV, line 19 · · · · · · · · a b Less direct expenses b c Net income or (loss) from gaming activities · · · · · · · · ▶ 10a Gross sales of inventory, less returns and allowances a **b** Less cost of goods sold **b** c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a e Total. Add lines 11a-11d 309,613 290,270

Form 990 (2013) , Ski Bears of Connecticut Inc Part IX | Statement of Functional Expenses

Do n	Check if Schedule O contains a response or note to any not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	b), and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and		0.0011000	goriora, expenses	Фаропава
•	organizations in the United States See Part IV, line 21				
2.					
_ :	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
٠,	organizations, and individuals outside the				
;	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members	296,887	296,887		
5	Compensation of current officers, directors,		230,007	-	
	trustees, and key employees				
6 }	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
;	persons described in section 4958(c)(3)(B)				
7 !	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	i		!	
9	Other employee benefits				
10 ·	Payroll taxes · · · · · · · · · · · · · · · · · · ·				
11	Fees for services (non-employees)				
а	Management	11,284	11,284		
b	Legal				
¢	Accounting	500		500	
d	Lobbying				
0	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14 ′	Information technology		_		
15	Royalties				
16 ·	Occupancy · · · · · · · · · · · · · · · · · · ·				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest			ļ	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24 ,	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
a		7,740		7,740	
b		800		800	
Ç	Accounting software	2,100		2,100	
d	Supplies	424		424	
. e	All other expenses		*		
25 . 26	Total functional expenses. Add lines 1 through 24e - Joint costs. Complete this line only if the	319,735	308,171	11,564	0
26	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here ► ☐ if				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 1 Cash - non-interest-bearing 88,304 145,304 2 2 3 3 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and : sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions) Complete Part II of Schedule L 1 7 7 Assets 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b 10c 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 88,304 145,304 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, iabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 26 0 0 Organizations that follow SFAS 117 (ASC 958), check here > X and Net Assets of Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 Temporarily restricted net assets 28 88,304 145,304 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32

145,304

33

34

88,304

88,304

33

34

-orm	1990 (2013) , Ski Bears of Connecticut Inc	<u>06-1086</u>	128	Pa	ige 12
Pa	rt XI Reconciliation of Net Assets	_			
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		. 🛛
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	3	09,6	13
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	3	19,7	35
3	Revenue less expenses Subtract line 2 from line 1	. 3		10,1	.22)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		88,3	04
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9		67,1	.22
1Ò	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
,	33, column (B))	. 10	1	45,3	04
Pa	rt XII Financial Statements and Reporting				
1	Check if Schedule O contains a response or note to any line in this Part XII		· · · · · <u>·</u>		<u>. L</u>
•				Yes	No
1	Accounting method used to prepare the Form 990 🔯 Cash 🔲 Accrual 🔲 Other				
٠	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				
	Separate basis Consolidated basis Both consolidated and separate basis				
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				
	separate basis, consolidated basis, or both				
•	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		· · 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
-	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		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	:	
FΔ			Form	990 (2	2013)

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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.

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the	he organization	Employer identification number
ski B	ears of Connecticut Inc	06-1086128
0.1	Form 000 mercaming hade marries (Part VI line 11)	
01.	Form 990 governing body review (Part VI, line 11)	
Form	990 is submitted to the board for final review and compared to the	internal financial
,		
state	ments prior to filing	
:		
1		
02.	Form 990 availability to public (Part VI, line 18)	
,		
upon	written request form 990 is made available to anyone who wishes to	see it of receive
a cop	у.	
		<u>.</u>
03.	Governing documents, etc, available to public (Part	VI, line 19)
Upon	written request all information is made available.	
04.	Explanation of other changes in net assets or fund	balances (Part XI, li
Fees	collected in anticipation of future events	
1.005	COLLECTION OF LEGICLE	
-		
		
•		